

Standardized Patient Handbook



CENTER FOR
**CLINICAL SKILLS
AND SIMULATION**
OSU Center for Health Sciences

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Glossary of Terms and Commonly Used Abbreviations

AT – Athletic Training

Auscultate – One of the four techniques of physical examination accomplished by listening, usually through a stethoscope.

Case Training – Scheduled time, either hour before event or previous day for SP and faculty to review assigned case or any pertaining questions.

Checklist – A list of items for which learners are "checked off" to assess their performance with a patient.

CC – Chief Complaint – A word or short phrase used by the patient to describe the main reason they seek care. It is usually recorded in the patient's own words and may or may not be the "real" reason for the visit.

Client – A faculty member, clerkship, course or program using the Clinical Skills Center.

CCF – Clinical Care Foundations course for first- and second-year medical students.

Clinical Skills Exam – An interaction between a learner and a standardized patient. The learning occurs while interacting with the SP, after which the clinical performance of the learner is assessed.

COM – College of Medicine

EM – Emergency Medicine

Encounter – The set duration of time in which the SP portrays their assigned case to a learner.

Event – A scheduled session with learning objectives or examination

Fellow – An advanced learner; one who has completed medical school, at least three years of post-graduate training, had obtained a “medical doctor” license, and is pursuing specialized training (such as cardiology, pediatric orthopedics, etc.).

FM – Family Medicine

HPI – History of Present Illness. Detailed information about the problem(s) the patient is presenting with for this visit.

Inspection – One of the four techniques of physical examination accomplished by looking and observing.

IPE – Interprofessional Education

Learner – This is a general term for any participant involved in a simulation.

MI – Learners in their first year of medical school.

MSII – Learners in their second year of medical school.

MSIII – Learners in their third year of medical school.

MSIV – Learners in their fourth year of medical school.

Medical Imaging – a program of study for those professionals who perform x-rays, CT scans, MRIs, etc.

MIRS – Master Interview Rating Scale – A checklist used by SPs to assess communication.

OMM – Osteopathic Manipulative Medicine

OSCE – Objective Structured Clinical Examination – An examination in which the learner is assessed in the mastery of discrete clinical skills.

OTC – Over the counter

Otoscope / Ophthalmoscope – The lighted instruments on the walls of the exam rooms used for looking at the ears and eyes.

OT – Occupational Therapy

PA – Physician’s Assistant

Palpate – A method of physical examination which involves feeling.

PE – Physical Examination.

Percuss – A method of physical examination which involves tapping to discern solid vs. hollow objects.

PGY – Post Graduate Year(s)

PMH – Past Medical History

PSH – Past Surgical History

PT – Physical Therapy

Resident – Refers to a physician in a supervised training program after graduation from medical school.

ROS – Review of Systems – A rapid review, during the history-taking part of the visit, of screening questions designed to cover key components of each major body system.

SOAP Note – A common format for a health professional’s written note about a patient. It includes subjective (history) data, objective (physical exam and tests) data, the assessment and plan.

SH – Social History – This is information about a patient’s occupation, hobbies, living arrangements and habits that may affect their health, such as tobacco, alcohol and recreational drug use, sexual partners, contraception, and sexually transmitted infection prevention.

Sit-Only – A SP encounter which does not require learning a script or portray a case. During these events learners typically practice listening to heart sounds, lung sounds or utilizing the ultrasound machine.

SP – Standardized Patient – an individual trained to act as a real patient to simulate a set of symptoms or problems.

Summative – an event primarily for the grading or evaluating of a learner.

Introduction: What is a Standardized Patient?

The Standardized Patient Program is an important part of Oklahoma State University Center for Health Sciences and the College of Osteopathic Medicine at OSU. Standardized Patients (SP) are independent specialists trained to replicate clinical encounters consistently for the instruction and assessment of clinical skills. These encounters allow healthcare learners an opportunity to fine-tune clinical skills by interviewing standardized patients and performing non-invasive physical exams. SPs receive specialized training to ensure portrayals are realistic and consistent.



Services Provided by Standardized Patients

We are dedicated to establishing competencies in professional, clinical, communicative, and interpersonal skills of healthcare providers in our communities.

Teaching and Evaluating Learners

Some activities involving SPs are primarily for the purpose of educating learners by providing them with the opportunities to practice clinical skills. Other activities are to assess how well learners have learned basic clinical skills. Many activities at OSU-CHS are a mixture of both.

Demonstrations and Small Group Activities

SPs may be involved in small group demonstrations in which a faculty member, a learner or a group of learners interviews, examine or interact with an SP in front of the group. Other times, SPs may be involved in a small group exercise in which they meet with 8-9 learners and a faculty facilitator to demonstrate or practice specific skills as a group or go into the classroom to work with learners.

While all SP work shares many common elements, each event is individualized to meet the needs of the client utilizing them.

Clients

The SP program provides simulated encounters for various programs and departments at OSU-CHS. In addition, the program occasionally contracts with third parties to provide educational and experiential sessions using SPs. These may occur on the OSU-CHS campus or off-site. The SP program considers both internal OSU departments, programs and third parties as clients and they will be referred to as such in these materials.

Academic Health Programs

The SP Program provides educational and experiential encounters for learners from the university's academic health programs. This includes the College of Medicine, the Physician Assistant program and the Athletic Training program.

Post-Graduate Trainees

Physician education continues throughout three plus years of post-graduate training including residency or fellowship programs. All participants, regardless of their educational or training level are referred to as "learners."

External Clients

We provide training and sponsor conferences for medical groups not affiliated with OSU. These trainings may involve the use of standardized patients in simulation experiences. Clients may choose to utilize both our space and our SPs or request that SPs come to the training or conference location.

Compensation

Vendor information – SPs are required to fill out a W-9 for OSU payroll and are considered a 1099 vendor for OSU CHS.

Current Compensation Rates

SP: Cases during class demonstrations, group events and teaching and/or assessment activities	Training - \$18/hour Performance - \$18/hour
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SP Compensation rates are determined by the OSU SP Program administration and are subject to change. SPs are notified of such changes via the SP email list maintained by the SP Program staff.

Live events – SPs should sign in and out on the proper computer in each exam room. There will be timesheets provided in the SP Lounge upon the SPs arrival or soon after.

Virtual encounters – The event coordinator will complete the timesheets for the SPs for these events. Please request a copy of your timesheet if you need a copy.

The SP is responsible for all updates to contact information, including address, email address and phone contact number. If this information changes, the SP is responsible for telling the SP Program staff of any changes.

After an SP has been hired, they are required to complete all new onboarding, training, and background checks. Once completed, SPs are eligible for assignments. In the event of multiple simulation events on a given day, the break period between respective events is not compensated time.

Standardized Patient Case Assignment and Selection Process

Clients submit requests for events utilizing SPs. With these requests, the client specifies case details such as the age range, gender, ethnicity and other demographics, etc. Based on this information, qualifying SPs are identified. SPs are notified via email about events and sent a Sign-Up Genius link with dates and times to sign-up.

The following secondary selection criteria are considered to narrow down possible SPs:

- SP casting considerations requirements (affect to be portrayed, case difficulty, knowledge base needed to portray case, live experience)
- Ability to master the role, personality, and requirements of the case
- Ability to interact with the staff and trainees in a professional manner
- Level of experience in portraying case
- Level of experience and quality of feedback (verbal and/or written)
- Performance history and ability to maintain changes of case/feedback
- Client preferences (client may identify a specific SP or ask NOT to send a specific SP)
- Number of times SP has interacted with this group of learners
- Historical attendance reliability

The SP Program reserves the right to cast in a manner that will best maintain the overall skills of our SP population.

The client or course director of the SP event has the final say in all casting decisions. Once the best SPs for the parts are identified, they are contacted to determine availability and interests. Out of the individuals who are available for the event(s), final casting decisions are made, and confirmations are sent out via email with the event details.

Casting Performance Criteria

SPs are trained to portray a patient case. This may include assessment/documentation of learner performance, providing individualized feedback on clinical, interpersonal and/or professional skills. For select events, the SP completes a checklist of items. As an SP gains experience, knowledge, and expertise, they will be assessed using the following criteria for consideration of extra events and cases:

1. *Ease of training and time training for a high-quality performance:* As experience increases for the SP, training time is more efficient and effective.
2. *Quality of Feedback:* Quality and detail of verbal and written feedback. Feedback is accurate and consistent in quality. Upholds training, uses phraseology as specified and completes checklists in detail with useful comments.
3. *General Attendance/punctuality:* Consistently arrives on time or provides adequate advance notice when late.
4. *Preparation:* Prepared with case details, knowledge of checklist and feedback.
5. *Working with staff, learners and peers:* Works well with SP Program staff, learners and peers.
6. *Flexibility:* Ability to adapt to quick changes in an event.
7. *Ability to receive feedback and integrate feedback:* Integrates feedback readily and consistently. SP does not object to changes requested.
8. *Consistently Performs in a high-quality manner:* Understanding details necessary to portray cases and document learner performance.
9. *Contributes positively to the attitude and morale of peers:* Does not contribute or spread malicious gossip or rumors.
10. *Checklist accuracy and reliability:* Consistent checklist accuracy and reliability.
11. *Professionalism:* Represents SP Program professionally at all times and is conscious of impact to internal and external clients.

Standardized Patient Case Preparation

SPs signed up for events will receive their assigned case up to one week prior to an event. SPs are expected to learn the detail of their cases and understand the event specifics (i.e., length of a case, whether they will need to give feedback, complete checklists, etc.) Physical copies of case scripts are available for SPs on event day.

Case Training Sessions

SPs should arrive at training with confident understanding and knowledge of assigned case details. SPs are expected to know opening statement(s), case details, and all scripted responses prior to training. Training sessions are scheduled with the purpose of fine-tuning details and providing the SPs an opportunity to ask the course director questions about case specifics. Case training may be scheduled virtually or in person depending on the course director's needs. Training generally starts with a brief description of how the character is envisioned. SPs should be able to participate in the training without having to reference case materials. Lack of adequate preparation for training may result in replacement, lack of future assignments, or discontinuation of services.

In addition to training activities described above, other activities may include:

- General SP best practices and etiquette training
- Video review of the case
- Specialized training to complete a history and/or physical exam checklist
- Training on verbal and/or written feedback without editorializing
- Instruction in feedback techniques
- Rehearsal of the case
- Telehealth/Virtual encounter
- Other training procedures as required by the nature of the event.

Punctuality, Attendance, and Cancellations

Punctuality

Lateness or an unexpected absence of an SP creates a situation that can have serious consequence including, but not limited to, compromise of the integrity of an exam, learners missing a graded event with no option to make it up, wasted valuable time of the faculty, staff and other SPs. The financial cost of scheduling a make-up exam, should the learner and faculty schedules permit, may exceed \$1,000 when staff, faculty, learner and SP time is accounted for. Punctuality is of the utmost importance. In the case of traffic or parking issues, please plan your arrival time accordingly.

Attendance

Cancellations with less than 24 hour notice due to extreme circumstances, illness, or family emergencies require direct notification as described earlier as soon as the circumstances become known. If a SP needs to call in for an event, they should notify the coordinator referenced in that particular date's Sign-Up Genius.

Cancellation by an SP

SPs are free to accept or decline any request without penalty. However, once an assignment is accepted, the SP is expected to honor that commitment under all circumstances, except illness or emergencies. Failure to honor such commitments will result in discontinuation of services.

Cancellation by OSU-CHS

In the rare event that the SP Program cancels a confirmed SP engagement, the following compensation policies apply:

- Less than to 24 hours- SP receives full compensation for the event, with the exception of campus closures due to inclement weather
- More than 24 hours- SP receives no compensation.

SPs will be notified of SP Program-initiated cancellations via email.

In the event of an on-campus emergency please follow directions given by Simulation staff.

Expectations for Standardized Patients

Call time – The call time is usually prior to the start of the session and will be specified in the email confirmation for the session. Call time is compensated.

Parking – Please Park in the visitors’ parking areas or parking garage.

Where to Report – All SPs will need to check in at the security desk

Cell Phones – All cell phones are to be silent and not in view while an event is running. Please step out into the hallways if you should need to take a call or talk to an instructor.

Dress Code – Your case training will communicate dress code requirements. Typical attire required for cases includes shorts and a loose-fitting t-shirt. *Please utilize designated SP changing areas when needed. All exam rooms and hallways are recording at all times. These are not appropriate locations to utilize as changing rooms.

Hygiene – SP encounters take place in exam rooms for long periods of time. For the comfort of our learners, faculty, and staff, please come freshly showered if possible. Also, please refrain from wearing excessive perfumes and colognes.

Physical Exam – Learners must learn the skills of protecting modesty during physical exams which does require a certain amount of practice. The SP Program provides a safe atmosphere for the learners to practice and make mistakes.

For example, the abdominal exam involves the palpation of the abdomen. The cardiac exam involves learners palpating the chest area under the left breast and abdomen. SPs must be comfortable allowing learners to access this area. Sometimes, the learner may ask the SP to hold the breast out of the way while conducting this part of the exam. This is acceptable, and the SP should accommodate the learner’s request.

During exams, learners may be expected to drape patients appropriately to avoid exposing them unnecessarily; however, this is a learned skill and is accomplished

to varying degrees during the learning period. It is also noted that not all programs and faculty educators utilize draping for all exams. This could vary program to program and should not be an expectation. Please inquire with a faculty member or simulation staff member for any concerns.

If any of the above-referenced encounters are unacceptable, the SP should withdraw from the programs or accept only assignments involving medical history.

Relationships with Learners – SPs providing services for the program are not to interact with the medical learners on a personal level since they are in a position of assessing the learner’s performance. Providing a quality educational experience for the learner is compromised if the learner must be concerned with discriminating between the SP as a patient or as a friend. Should an SP discover, over the course of their work, that they have an existing relationship with a learner, the SP Program staff should be notified immediately for rescheduling.

Realism and Staying in Character – Realism in portraying patients is an important responsibility of the SP. SPs must practice and be attentive to using speech patterns, vocabulary, body language, physical simulations, etc., that mimic real patients. To lessen the chance of an encounter with learners before the event, SPs should report immediately to their assigned event location.

The Camera is Always On – Cameras are always on and recording. Please refrain from making gestures (eye rolling, thumbs down etc.) or comments about the learners at any time. The footage will be viewed by medical faculty and observed by the learner. Discussions about the learner or case with faculty or other staff should be avoided in any recording area (clinical exam rooms, hospital simulation center). Video recordings may be utilized for student or faculty review. SPs are required to sign a video release and liability waiver upon onboarding.

Summoning Assistance during an Encounter/Event – Notify simulation staff or faculty if you should need anything outside the exam room or need assistance with the computer you log onto in the exam rooms. Questions or other requests can be accommodated, but please do not leave the room during an encounter without letting a staff or faculty member know.

Interacting with Faculty – Case related questions should be asked of the faculty during case training. Case specific clarifications and feedback should not take place

in learners' presence or in recording areas. Discussion with assigned faculty members prior to event start time is encouraged.

Interacting with Staff – Prior and during simulations the staff must prepare rooms, turn on computers, greet and orient the faculty and learners and get everyone where they need to be for an on-time event. Please do not ask for special attention, services (assistance with sign-ups, payroll inquiries etc.) or bring up anything not directly related to and crucial for the successful start of the upcoming event. Each SP is expected to independently function during this time and prepare for their role. However, unforeseen difficulties which threaten the start time, or the success of the event should be brought to the staff's attention immediately.

Who Can Alter a Performance or Event? – Events involving standardized patients commonly utilize faculty preceptors to oversee the event. These faculty members are briefed prior to start time on the event's learning objectives and desired SP performance criteria. It is acceptable for a faculty to “fine tune” a case or portrayal if it does not change the way in which the case was originally envisioned and trained. For example, if an SP is asked to increase or decrease the anxiety level, that is acceptable. Adding a new symptom not on the original case is not acceptable. It is necessary to keep performances true to the original purpose of the case and to keep SP roles consistent. If one SP performance changes all SPs will need to be adjusted. If further questions arise during the event the SP should contact the training faculty.

Control Room and Hallway Monitoring Area – Should an SP have some reason to be in the Control Room during an event, the SP must maintain silence so that others can listen and concentrate on the event at hand. During faculty viewing, SPs should maintain silence and enter and exit the room quietly so as not to disrupt concentration of the faculty.

Privacy is critical at the event. An SP may be observing (or being observed by) another SP for training purposes. If the examination is sensitive, every effort will be made by the staff to protect the SP's privacy.

Housekeeping – SPs are responsible for their examination rooms. Prior to the event, SPs should check their rooms to ensure there is sufficient stock of all supplies, including linen and that needed props or cards are in place.

Following each encounter, SPs are responsible for returning props to their storage area, tearing the used paper on the exam table if applicable and leaving the exam room in pristine condition. SPs are responsible for putting all trash in provided bins and straightening the room after each encounter. This includes the doctor's chair for the next student doctor.

Additionally, if the SP has any problems with the equipment, finds something not working or utilizes the "last" of something in the room, they must notify the program staff.

SPs must not leave any confidential materials (case, checklists, instructions, etc.) inside or outside of the rooms. If necessary, always take cases and any other sensitive documentation with you.

SPs should not leave any personal belongings in exam rooms at the end of the session. OSU-CHS is not responsible for any loss of misplaced personal items.

External Clients – When an SP is representing OSU-CHS off campus, all guidelines and expectations of an OSU Standardized Patient remain effect.

No Doctor/Patient Relationship – SPs should not take any advice or recommendations made during an event as consultation for individualized medical care or advice. Should something abnormal be found on a physical exam, the SP can expect to be informed of the finding and advised to seek medical evaluation and treatment from the SP's personal physician or other healthcare provider. Neither the learners nor faculty provide any medical advice for SPs. None should be sought or expected.

Computer Literacy – Standardized patients program utilizes the online platform Sign Genius for SP scheduling. Basic computer skills are necessary for all SPs.

Telehealth/ Virtual Encounters and Trainings – In the event of virtual encounters additional expectations of standardized patients are as follows

- Good quality internet connection capable of video conferencing without interruption.
- Access to a quiet private distraction free environment
- Ability to operate a webcam without assistance

Professionalism – Standardized patient assignments are professional obligations and SPs are expected to act professionally. Excessive unprofessional behavior, vulgarity, and harassment of staff and learners will not be tolerated and is grounds for immediate dismissal from the Standardized Patient Program.

Quality Assurance

Providing high-quality simulations is of the utmost importance for the Standardized Patient program at OSU-CHS. Quality assurance will be maintained using several methods:

- Direct observation during training
- Direct, scheduled observation during sessions
- Footage review of events
- Footage self-review by the SP

Additional training may be required of the standardized patient in the case of repeated subpar performance as reported by faculty. Feedback will be provided to the SP as soon as possible. If, at any time, an SP has questions or requires a review they should arrange a scheduled time to meet with the SP Program staff to answer their concerns.

Confidentiality

Learner Confidentiality – No learner performances, behaviors or interactions are to be discussed outside of the SP Program offices. While it is appropriate to discuss performances during the debriefings, trainings, etc., these should be done without identifying learners. Feedback about specific learners should be shared only with the coordinator and/or director of the SP Program. The staff must always maintain total privacy for the learners. Learner confidentiality is protected by the Family Educational Rights and Privacy Act (FERPA) and it is a serious matter to jeopardize learner confidentiality.

SP Confidentiality – Any observations of another SP's performance during training or quality assurance/reliability sessions are to be kept in the strictest confidence. Discussion of SP performance is to be limited to the trainer and SP Program staff.

Confidential Materials – The training manuals, cases and checklists are the property of Oklahoma State University Center for Health Services. These materials are to be used exclusively for experiences and sessions arranged through the SP Program and by SPs trained at OSU-CHS.

Psychological Safety

If at any time a Standardized Patient feels physically uncomfortable during an encounter, they are encouraged to use a "safe phrase" - "that's a little rough, doctor" and that they are free to stop a physical exam at any time they feel it is uncomfortable, invasive, or inappropriate.

If a Standardized Patient has concerns about a scenario, learner interaction or simulation experience, they are encouraged to notify simulation staff or a faculty member immediately. A meeting with simulation staff can be scheduled if needed.

Discontinuation of Services

All cases, check lists and written materials are the property of OSU CHS or on loan from another institution and being used with permission. These cases are to be used exclusively by SPs booked through the SP Program. Upon discontinuation of services for OSU CHS, all written materials are to be returned to the program.

OSU Substance Use Policy

Smoke/Drug-Free Campus – OSU-CHS is a smoke free campus inside and outside of buildings. Please plan and behave accordingly. This includes within vehicles located on property and vaping on campus.

OSU CHS adheres to the Policy set by the University for the Drug Free Workplace - Drug Free Workplace (OSU Policy 1-1205)

1.01 The Drug-Free Workplace Act passed by Congress in 1988 requires federal contractors and grantees to certify to the contracting or granting agency that they will provide a drug-free workplace. This policy is adopted to comply with this statutory directive.

For all SPs providing services to the OSU CHS campus, the following activities are expressly prohibited:

- Illicit activity (smoking, vaping or drinking) prior to events.
- Illicit activity (smoking, vaping or drinking) during activities sponsored by a client.
- Illicit activity (smoking, vaping or drinking) at a conference or workshop site where participants or clients may observe this activity.

Equal Opportunity, Discrimination, and Harassment Policy

OSU CHS adheres to the same policy and procedures put forth by Oklahoma State University.

OSU does not discriminate based on race, color, national origin, sex, qualified disability, religion, sexual orientation, sexual identity, veterans' status, genetic information, or age in its programs and activities. The Equal Opportunity Officer is designated to handle inquiries regarding the non-discrimination policies and can be reached at 405-744-9154, eeo@okstate.edu or 408 Whitehurst Hall, Stillwater, OK 74078.

Gender Discrimination/Sexual Harassment & Title IX Grievance Procedure (OSU Policy & Procedure 1-0702). There will be no discrimination conduct accepted at OSU CHS, neither verbal nor non-verbal