

Simulation Training: A Novel Approach to Primary Care Behavioral Health Training

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Who we are

- ▶ Wendy, Darlene, and Jennifer
- ▶ Our varied backgrounds and perspectives and what interested us in this project

Learning Objectives

- ▶ List 3 advantages of simulation training vs. traditional didactic training for enhancing effective communication in high stress/high conflict encounters
- ▶ Describe the process & methodology for the successful implementation of this training
- ▶ Describe challenges and solutions to successful implementation
- ▶ Identify 2 ways this educational methodology could be utilized by your agency or institution

The birth of our project... why we wanted to do this

Our collaboration - we each bring something unique to the project from an inter-disciplinary perspective, we each had unique goals for the training that informed our primary goal:

RESIDENT PHYSICIAN TRAINING IN ENHANCED COMMUNICATION SKILLS



Background

- ▶ Benefits of inter-disciplinary training
- ▶ Communication Training
- ▶ Patient Satisfaction
- ▶ Simulation

Benefits of Inter-disciplinary Training

- ▶ **Shared decision making**
- ▶ **Improved patient care outcomes**
- ▶ **Enhanced patient and provider satisfaction**
- ▶ **Better prepared providers to meet the workforce needs of the new healthcare delivery system**
- ▶ **Enhanced patient safety**
- ▶ **Enhanced professionalism across all team members**

Communication Training Overview

- ▶ **BREAKING BAD NEWS:** This is not a skill that can be mastered in medical school. Rather it is an acquired skill which may, and should be taught, acquired and supported in advanced training.
- ▶ **TRUST:** between providers and patients is an important aspect of patient centered care. Clear, empathetic listening and communication enhances the **relationship dynamic**.
- ▶ **PROFESSIONAL VALUES:** Healthcare providers value clear, structured training, practice and feedback when dealing with uncomfortable tasks and report maximal learning when receiving it .
- ▶ **SKILL PRACTICE:** Some studies have shown that provider distress in difficult communication situations is greatest in those who have not received training in these communication skills.

Benefits of Communication Training in medical setting

- ▶ Improved patient adherence
- ▶ Improved patient/clinical outcomes
- ▶ Lowered risk of malpractice litigation
- ▶ Increase provider satisfaction
- ▶ Increased patient and family satisfaction
- ▶ Decreased provider dissatisfaction and burnout
- ▶ Skills acquired and practiced in focused training are more readily “available” and utilized by providers in real time clinical situations requiring faster decision making.

Patient Satisfaction

- ▶ Used to measure quality in multiple health care settings
- ▶ A healthcare benchmark that is being measured and tracked nationally
- ▶ Impacts reimbursement
- ▶ Impacts provider - patient relationship
- ▶ Affects clinical outcomes
- ▶ Decreases medical malpractice claims
- ▶ Proper communication is a key component of patient satisfaction.

Simulation Training Overview

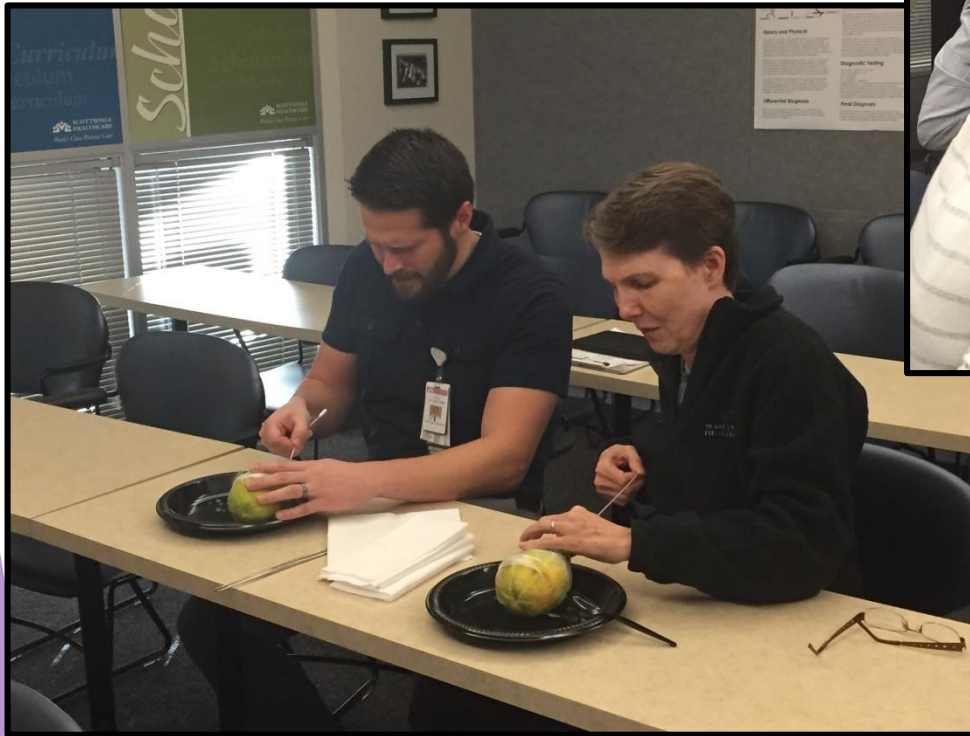
- The use of simulation training in medical education has expanded and become more utilized especially in cases of procedural training and critical patient scenarios.
- Advantages of simulation training include:
 - ▶ The ability to practice skills without actual risk to patients/clients
 - ▶ A protected environment for learners to experiment outside of their usual comfort zone.
 - ▶ Improved confidence in dealing with stressful or unfamiliar situations
 - ▶ Ability to watch your own performance and/or performance of others
 - ▶ Chance to debrief and learn from the experience which often doesn't happen during day to day practice of medicine

Simulation Training Overview

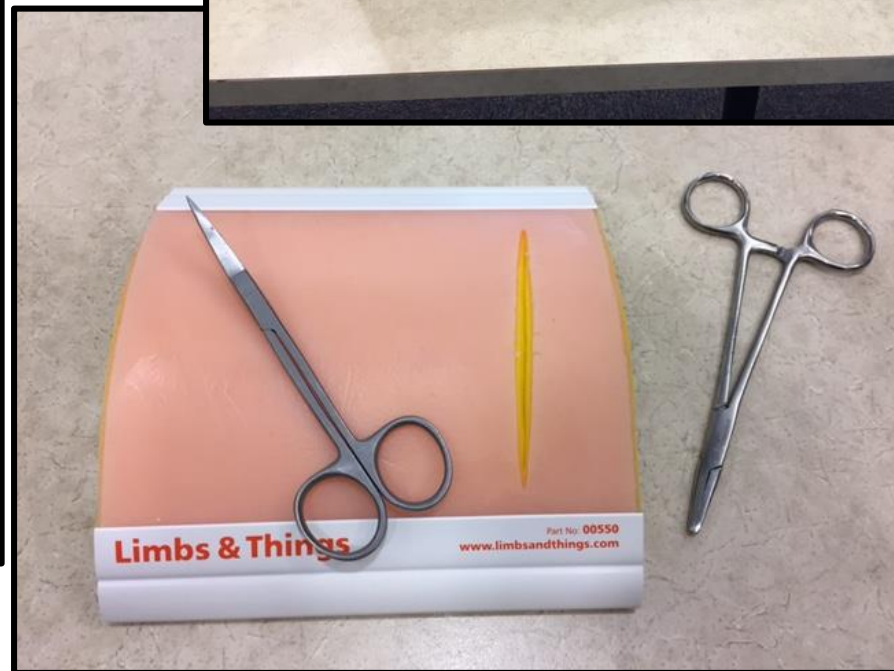
- **Types of simulation include:**
 - ▶ High Fidelity Simulators
 - ▶ Standardized patient scenarios or role plays
 - ▶ Mixed simulation (standardized patient + simulated environment)
 - ▶ Video scenarios and virtual reality
 - ▶ Procedure Models



Simulation Training Overview



Simulation Training Overview



Simulation Training Overview

▶ **Debriefing:**

- ▶ This is where most of the learning happens
- ▶ Learners should reflect on their performance and identify things they would have done differently
- ▶ Learners can identify if they felt comfortable or uncomfortable and why
- ▶ Allows the facilitator to insert teaching points
- ▶ Allows the facilitator to see how learners perceive themselves and their interactions and adapt training as needed
- ▶ Learners can learn from each other

Implementation of our project

- ▶ Planning
- ▶ Implementing the session
- ▶ Debriefing

Planning

- ▶ To mannequin or not? (need to most closely approximate clinical reality)
- ▶ Deciding on a theme for the session (Difficult Patient Scenario)
- ▶ Articulating the case objectives for the learners
- ▶ Detailing the case scenario
- ▶ Constructing the patient chart and sign out sheet
- ▶ Rehearsal, fine tuning and dry run
- ▶ Planning for debrief and feedback (examples of our feedback sheets, plans to have learners review their own videos etc.)

Planning

► Our Patient:



Planning- Objective #1

- ▶ **Demonstrate the following in a high stress/ high conflict hospitalized patient encounter:**
 - ▶ ability to assess & diffuse conflict
 - ▶ use of appropriate non-verbal and listening skills
 - ▶ use of appropriate verbal communication skills
 - ▶ brief, clear and objective handoff/transition of care
 - ▶ ask permission to share information with family and/or friends

Planning- Objective #2

- ▶ **Learner will demonstrate the ability to utilize active listening skills in the patient encounter**
 - ▶ sitting on bed or bedside chair
 - ▶ eye contact, nodding and open body posture
 - ▶ positive, friendly and open facial expressions
 - ▶ deferring judgment (not interrupting)

Planning- Objective #3

- ▶ **Learner will demonstrate the ability to effectively communicate empathy and validation in the patient encounter.**
 - ▶ asking appropriate, clarifying questions
 - ▶ verbalizing curiosity vs. judgment or expertise
 - ▶ verbalizing and expressing understanding of feelings and emotions
 - ▶ summarizing understanding of patient/family member's preferences and goals in a calmly confident vs. argumentative manner

Planning- Objective #4

- ▶ **Learner will demonstrate the ability to partner with patient, family, and care team in a clearly communicated treatment plan.**
 - ▶ summarizing goals of treatment including time frame/priority for completion
 - ▶ asking for understanding and agreement on goals
 - ▶ communicating plan for implementation of treatment plan to patient, family and nursing staff
 - ▶ checking (asking for) questions or concerns

Planning- Objective #5

- ▶ **Learner will demonstrate the ability to communicate agreed upon treatment plan to the learner(s) receiving sign out from them.**
 - ▶ brief summary of test findings and overnight events
 - ▶ concise, clear, non-judgmental communication of treatment plan
 - ▶ checking for questions or concerns from receiving team

The Training

- ▶ Prep and Sign-out
 - ▶ Residents were expecting a “crashing” patient in the hospital and the high-fidelity mannequin simulator
 - ▶ Residents were given a sign-out as if they were covering for the night in the standard format they had learned
 - ▶ Sign-out example video

Sign Out Video Shown Here

The Training

▶ The Scenario

- ▶ Delivering Bad/Difficult News
- ▶ Dealing with an Angry Patient/Family
- ▶ Keep Learning Objectives in Mind

Scenario Video Shown Here

The Training

- ▶ Signing the patient back out to the day team
- ▶ Sign-out video
- ▶ Transition of Care Learning Points

Sign Out Video Shown Here

Debriefing & Feedback

- ▶ Residents' (trainees) perspective
- ▶ Physician Faculty perspective
- ▶ Behavioral Health/psychosocial perspective
- ▶ What we'd do differently?
- ▶ What we appreciated?
- ▶ What about the learning objectives?

Medical Jargon Video Shown Here

Going Forward

- ▶ **Future research:** Excellent research methodology in communication training is scarce but needed. (cultural/local differences; communication training in different treatment team contexts etc.)
- ▶ **Standardized training format with modifications over three years of training to account for developmental appropriateness:** Consider regular inclusion in FM residency training curriculum; enhanced workforce development and training; pre and/or post simulation structured; targeted communication training
- ▶ **Expand to other arenas of inter-professional training**
- ▶ **Adding BH observation and feedback to all simulation training as a standard**

A Pause to Reflect on Your Work

How might you utilize simulation training in your agency or work setting? What aspect of your work could benefit from interdisciplinary simulation training? _____ What are some other potential benefits? _____

Which method(s) would be the best fit in your setting?

- High Fidelity Simulators
- Standardized patient scenarios or role plays
- Mixed simulation (standardized patient + simulated environment)
- Video scenarios and virtual reality
- Procedure Models

Identify some potential collaborators with you on this project: _____

What are some possible barriers to implementation? _____

Find a partner. (If someone from your agency or group is here; find them! Share your plans with each other and discuss.

LARGE GROUP DISCUSSION AND QUESTIONS



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