T Level Technical Qualification in Health

Employer set project (ESP)

Core skills

Standardised patient guidance May 2023 series

Introduction

This guidance document is additional to the existing provider guidance for the Supporting Healthcare employer set project. It should be used alongside that guidance.

This document aims to give further guidance on how to approach the use of standardised patients (SPs) in task 2(a) of the Supporting Healthcare employer set project, the existing guidance for which is included below.

The additional guidance for standardised patients starts on page 3 of this document.

Task 2(a)

Required resources:

- standardised patient (SP)
- task 2(a) materials
- access to research from preparation research activity
- video recording equipment for the second part of the task.

Delivery

Students will be allocated a total of 2 hours for this task; however, this is split into different sessions, as described below.

For the first part of the task, students will be allocated 30 minutes in supervised conditions to prepare for a discussion in which they will take the role of a healthcare assistant and the tutor will take the role of the SP within the case study. For the preparation activity, students will have access to their research completed in the preparation research activity to support them in preparing a series of questions they can ask within the discussion to support in the planning of the individual's care.

For the second part of the task, students will be allocated a maximum of 30 minutes for the discussion, which must be video recorded. They should take their questions into the discussion. Tutors who take on the role of the SP from one of the case studies should ensure they are familiar with each of the case studies to be able to answer questions appropriately to the student. Tutors will need to complete the feedback form on the student's conduct and communication within the discussion and this will be provided to the student for the third part of the task.

For the third part of the task, students will be allocated 1 hour in supervised conditions to clarify and expand their notes and write a reflection from their feedback, which they will use to support them in the completion of task 3. Students will be able to have access to the tutor feedback form, their own notes from the discussion and the research completed in the preparation research activity.

Guidance on the use of standardised patients: preamble

This task requires providers to allocate tutors, subject matter experts, or other individuals with the appropriate level of subject knowledge, to take on the role of the patients detailed in the pre-release case studies in the project brief insert. We refer to these people as those playing the role of a standardised patient, or simply 'the standardised patient (SP)'.

The SP is a person carefully briefed to take on the characteristics of a real patient, thereby affording the student an opportunity to be evaluated on learned skills in a simulated clinical environment.

The role of the SP is to independently, consistently and accurately convey details of the patient's life.

We recommend that providers research the principles of good practice in presenting standardised patients, reading around the subject (for example, NCFE recommends The Simulated Patient Handbook: A Comprehensive Guide for Facilitators and Simulated Patients by Fiona Dudley). In addition, NCFE provides guidance on delivery to support consistency, as well as series-specific guidance, below.

Guidance

Tutors, subject matter experts or other individuals who take on the role of the SP should ensure they have the appropriate level of subject knowledge to understand the nature and complexity of the case study and the role.

The SP should ensure they are familiar with each of the case studies to be able to answer questions appropriately when in discussion with the student. The SP can have a copy of the project brief insert, as well as this guidance, during any discussion to support this, but should ensure they have familiarised themselves with each case study in advance, and with this guidance.

The SP will be expected to:

- access and apply information provided in the training supplied by NCFE

- memorise the patient's details (although the SP/role player is permitted to have the appropriate notes with them)

- remain in a specific patient character when responding to student questions

- play the role in a convincing but not melodramatic manner, being mindful of facial expression

- check that language used is appropriate for a typical patient (for example, not overly medicalised)

- refrain from embellishing the condition in a misleading way

- play the role consistently so that every student's experience will be the same in terms of the approach that is taken

- repeat aspects that the student has not understood, and be prepared to alter the wording slightly if they continue to fail to be understood but not radically, so not to advantage that student in comparison to other students

- avoid tips or prompts that make the assessment less challenging

- be prepared to give information, but only in response to appropriate prompting.

It is important to note that the discussion activity that is part of this task is designed to be led by the student, and students are being assessed on their ability to ask appropriate and relevant questions, including any follow up

questions as necessary. This includes students opening and closing the conversation in an appropriate way and taking the role of a healthcare assistant leading the conversation. The SP should give space for the student to do this.

If the SP's physical appearance or age is significantly different from the case study patient they are portraying, students may find this unrealistic, (for example where the case study features a child as the patient). In these scenarios an introduction to say 'Imagine I am patient X, I will talk to you as if I am' can support with this and ensure the student approaches the conversation in a realistic way.

Handling different types of student question

SPs should ensure they do not provide leading answers or comments that might go beyond what a real patient would be expected to say – for example:

Student question	Standardised patient answer
Can you tell me about x (aspect that might not be relevant to the scenario)?	I can, but would you also like to know about this (aspect that the SP may feel is more relevant for the student to have asked about)?

In the example above it would be more appropriate for the SP to answer the question as the patient might, (for example, if the question is not relevant, a real patient might not be able to give an answer or provide relevant detail).

In addition, SPs should try to avoid giving short, closed answers to relevant questions. Where a student has asked a reasonable question that is relevant to the case study, the SP should be able to respond in an appropriate way, including given information on parameters that may not be explicit in the case study or in the additional guidance below – for example:

Student question	Standardised patient answer
Can you tell me what your goal is for returning to work?	Yes, I think for me I'd like to be back at work in about 6 weeks.

In the example above, the student has asked a direct and relevant question, but the specific parameter (in what length of time the patient would like to get back to work) may not be detailed or 'scripted' in the case study. In this circumstance it is better for the SP to give a response that feels reasonable to the scenario, as it would be unnatural not to give a response, and it may prevent a student considering that aspect of their healthcare plan. In this instance it does not matter what length of time is given, as the important point of the discussion is to simulate information for the student to work with, so SPs should not worry that they may give a slightly different answer to other SPs for other students, as long as their answer is reasonable and relevant to the case study.

Other examples of these parameters might be 'how much weight would you like to lose?', or 'do you want your father involved in the treatment?', or 'what timeframe would you like to achieve your goal in?'.

There is a balance to be struck, as SPs must not give additional information that is either not reasonable or relevant to the scenario, or is not prompted by the student's questions – but as long as the answer does fit these 2 categories, it is fine if it is given.

If questions asked by the students are not relevant to the information provided in the case study, SPs are permitted to ask the student to proceed to the next question.

Specific case studies

To support those playing the role of standardised patients, the following guidance can be used for the Summer 2023 assessment series case studies:

Case study	Summary of symptoms or feelings that might be reflected in the standardised patient's responses	Breadth of answer
Zafia Moderate learning disability No underlying health conditions Lives in supported accommodation Working towards independence and attends college 2 days a week Works part time. Ambitions for a full-time job In a relationship Boyfriend has a moderate learning disability Recently confirmed Zafia is pregnant	Symptoms: Weight gain Feeling sick Feelings: Shocked Excited Looking forward to becoming a mother	It would be appropriate to discuss the mixed emotions Zafia is feeling right now, including that she was unaware she was pregnant. It would be inappropriate to begin suggesting that this was a hidden pregnancy – something which Zafia knew about but chose to hide. It would be appropriate to talk about the possibility of the couple not knowing about the experience of pregnancy, or how to look after the baby in more general terms (for example, how to feed the baby). It would be appropriate to talk about the support Zafia receives from her family (for example, she lives in supported accommodation and the majority of support she receives comes from her support worker rather than family members) It would be appropriate to talk about feelings around the suggestion of abortion or adoption (for example, Zafia is determined to continue with the pregnancy and raise a child)

Case study	Summary of symptoms or feelings that might be reflected in the standardised patient's responses	Breadth of answer
<u>Fred</u> 10 years old and lives with his parents and 4 siblings Missing school Falling asleep in class Losing contact with his friends Withdrawing socially Anxiety about parents arguing Needs physical and mental health wellbeing checks	<u>Symptoms:</u> Tiredness Falling asleep Tummy aches Weight loss <u>Feelings:</u> Lethargy Isolation Worry	It would be appropriate to discuss the time missed at school (for example, parents not sending Fred to school due to tiredness or sickness, withdrawal from learning) It would be appropriate to discuss losing interest in friends and activities. It would be appropriate to say that he is tired and falls asleep. It would be inappropriate to say this is all due to his parents' behaviour.

Case study	Summary of symptoms or feelings that might be reflected in the standardised patient's responses	Breadth of answer
<u>Theo</u> Diagnosis of bowel cancer Wound infection following operation Wife has Alzheimer's Care of stoma bag following operation	<u>Symptoms</u>: Bleeding Swelling Wound infection <u>Feelings</u>: Disgusted Frustrated Annoyed Withdrawn	It would be appropriate to discuss the challenges with managing his condition and how painful and unpredictable this is. It would not be appropriate to suggest what support they need with the stoma bag as they are unlikely to fully know this yet. However, it would be appropriate to discuss the reluctance to self-manage their condition along with the medical support they will be given. For example, you could say that you are very reluctant to take on responsibility of caring for stoma bag.

Case study	Summary of symptoms or feelings that might be reflected in the standardised patient's responses	Breadth of answer
Phil History of alcohol misuse Was in foster care as a child, neglected by parents Close to older sister Lives on his own Wants to improve his life and return to college needs support to achieve this	Symptoms: Effects of alcohol consumption Loss of memory Unconscious Feelings: Anxious about addressing his relationship with alcohol Nervous about exploring feelings Motivated Painful memories	It would be appropriate to discuss that he feels overwhelmed but it would not be appropriate to initially 'place' this within specific areas of his life (for example, feeling overwhelmed at the thought of going back to college). It would be appropriate to indicate that he is keen to return to college but it would not be appropriate to make suggestions about what needs to be put in place for him to be able to achieve this (for example, counselling). It would be appropriate to acknowledge that he is keen to engage with whatever help and advice is available to him, but it would be inappropriate to indicate what form this help and advice could take for him.

Case study	Summary of symptoms or feelings that might be reflected in the standardised patient's responses	Breadth of answer
Lewa Was very active, worked in a racing yard Lives in shared accommodation Involved in a car crash Amputation of leg Usually active and independent	Symptoms: Decreased mobility Effect on independence Feelings: Distressed Anxious Worried Determined	It would be appropriate to indicate that she is aware that adaptations will need to be made to all aspects of her life (for example, changes around her home, changes to diet, changes to exercise) It would be inappropriate to suggest specific adaptations, such as handrails to the front door, bathroom facilities on the ground floor or a rise and recline chair. It would be appropriate to discuss that she is worried about the impact on her ability to remain independent however, it would be inappropriate to suggest specific actions or activities she anticipates having difficulties with.

Document information