

Being a hybrid for a day; phenomenological analysis of simulated patient's experience.

Meghana Sudhir, Safeeja Abdul Rahuman

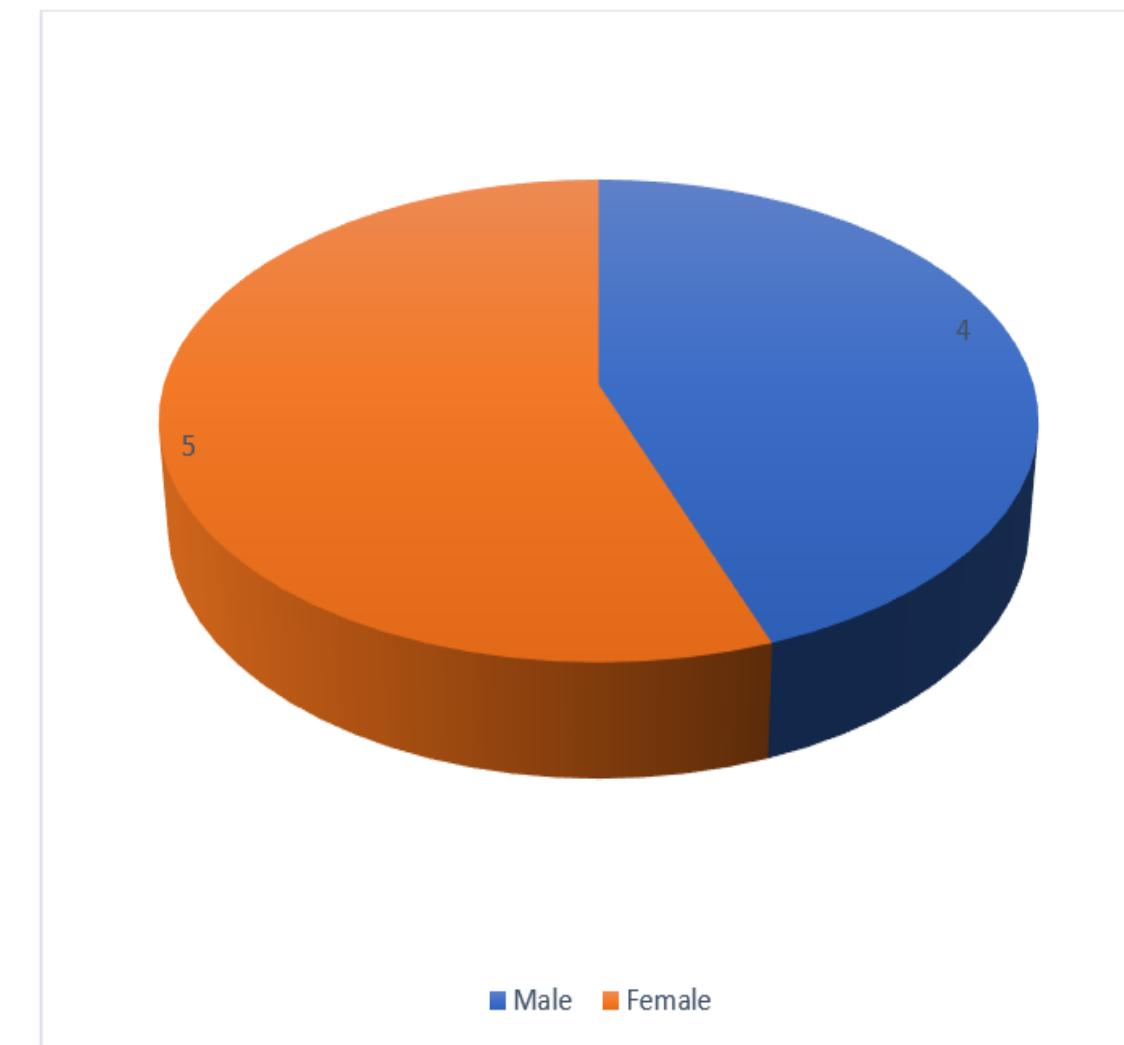
Mohammed Bin Rashid University of Medicine and Health Sciences, Dubai, United Arab Emirates



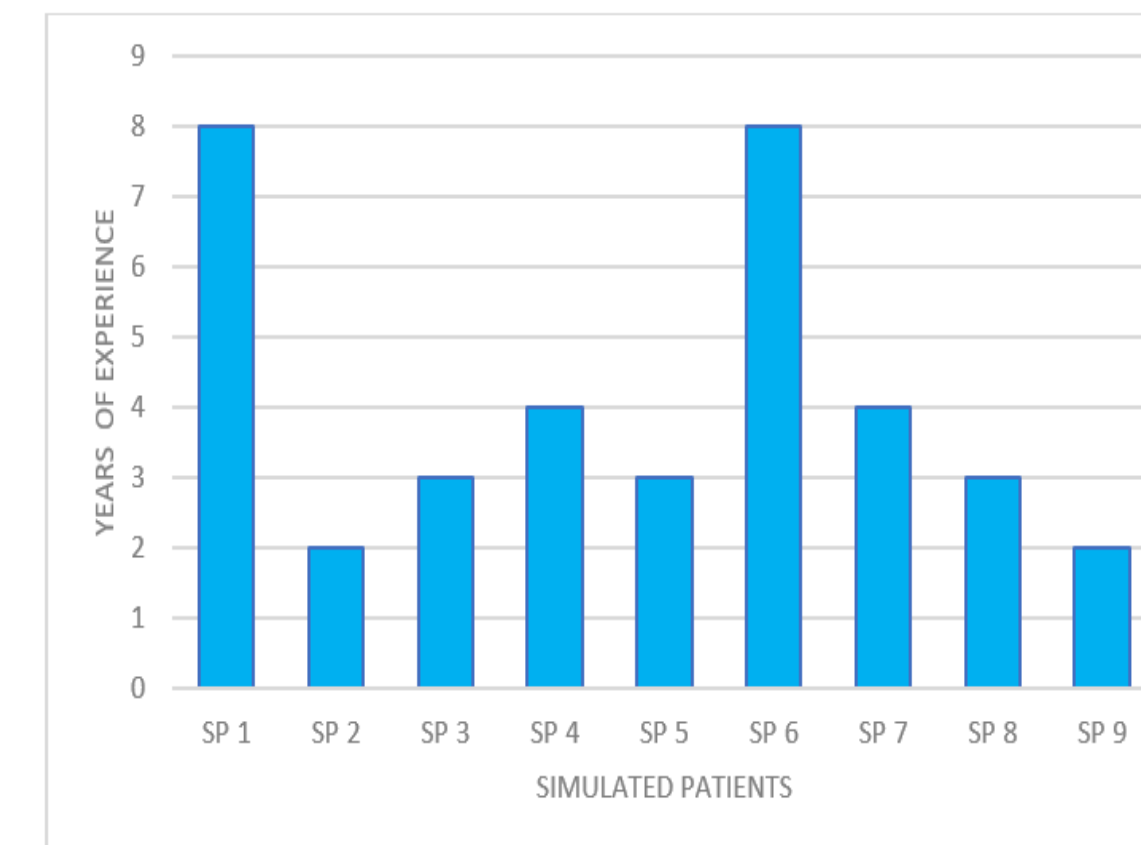
Background

In healthcare simulation, hybrid simulation is most applied to the situation where a part task trainer is realistically affixed to a standardized/simulated patient, allowing for the teaching and assessment of technical and communication skills in an integrated fashion. Hybrid simulation allows a better simulation experience for students during procedure skills learning, which is a demanding clinical skill where communication with patients is often neglected. However, there are not much literature in exploring the experience of simulated patients who are part of the whole experience as hybrid.

Figure(1): Gender distribution



Figure(2): Years of Experience as Simulated Patient



Theme 1: Experience

The SPs felt Hybrid Simulation session as a good learning experience, as well as a unique and easy way to teach students.

Theme 2: Extension of manikin

Most of the SPs (88%), prepared themselves to feel like an extension of the manikin. They had to put a conscious effort to focus and be attentive and feel or pretend the sensation like, touch, cold hands, pain, etc.

Theme 3: Emotions

The SPs felt awkward initially when the manikins were exposed, and with repeated session this awkwardness faded away.

Theme 4: Communication

The SPs shared the communication between them and students. Most of the students explained the procedure to the SPs before starting the examination. 22% SPs felt that the communication need to be improved. There were times when students got confused as to whom to communicate and do the examination.

Theme 5: Repeating

The SPs were asked about their interest in repeating the role, and 88% of them felt it a unique and different learning experience. They are confident and are willing to do again. But 55% SPs liked doing their regular SP sessions more comfortable than hybrid sessions.

Theme 6: To do or see differently

The SPs felt that the students should be oriented and be prepared before coming for the sim session, they should understand that they are future doctors and communicate with everyone irrespective of gender.

Conclusion

We recommend debriefing and deroling of SPs after every hybrid simulation session. Even though the procedure is done on a manikin, the experiences shared by the SPs reveal that there is emotional impact as well as feeling of awkwardness. The SPs had to deliberately put effort to make them feel as an extension of manikin. As hybrid simulation sessions were in areas involving intimate physical examination on simulators, some of the SPs felt unsafe being with opposite gender students. As SP trainers, it is our responsibility to provide proper pre briefing and ensuring a safe environment. The experiences shared by SPs are valuable for future SP training sessions. Orientation to environment, clear roles and responsibilities, sharing experiences of SPs, piloting etc will be useful. Feedback from SPs need to be incorporated and any changes required need to be adapted.

#IMSH2021

Research Question

Primary Research Question:

As a simulated patient in a hybrid simulation, how do SPs describe their subjective lived experience?

Secondary Research Questions:

- What practical insights can be gained from this experience?
- How can these experiences contribute to SP training in hybrid simulation?
- Is there anything different, SPs want to do during the hybrid experience?

Method

Qualitative Approach – Phenomenology

Face to face interviews and phone interviews were done in this study. Interviews were focused on simulated patient's experience. It was minimally structured to allow the information and themes to be as true as possible to their experience in accordance with phenomenological methodology. The Questions were in depth addressing the participants' experience, feeling, emotions and belief. 9 SPs participated in the study.

A brief information on hybrid simulation session for reproductive system examination:

Male/Female reproductive system examination trainer along with a torso was kept on the couch dressed in patient gown. This part task trainer was covered with blanket.

A simulated patient [SP] was positioned at the head end of the couch which gave the impression that the SP is an extension of the torso.

The students were encouraged to do the examination on the part task trainer while communicating with the simulated patient. Patient centeredness is emphasized with this approach.

The part task trainers used in our sessions were female pelvic examination simulator, male rectal examination simulator and female breast examination simulator.

Analysis and Summary of Themes

Figure (3) : Extraction of themes

