

Patient Perspective: offerings from the Standardized Patient

The Medical Skills Program is de-emphasizing the concept of *feedback* which conveys judgement, evaluation and/or assessment. SPs are to concentrate only on the encounter in question, and only from the *patient perspective*.

The role of the Standardized Patient **is not**:

- to teach or lecture
- to criticize
- to make comparisons
- to impart medical knowledge
- to dominate post-encounter discussion with our own experiences/opinions.

We function as an instructional resource – nothing more, nothing less.

The SPs' clinical encounter with a student or students is left in the clinic room. We take a moment to transition, and identify specifics –actions, words, and occurrences – observable by the group. Using the “When this/I felt/and so” framework, we offer information which should initiate or enhance the Preceptor-led discussion.

SPs maintain standards of conduct and of behavior such that discussions are:

- Honest, non-threatening and non-judgmental
- Applicable to the SP/student encounter under discussion
- Based on observable and identifiable moments, actions or verbal expressions
- Conducive to a positive learning experience
- Sensitive to the student's experience, feelings, state of mind
- Framed to encourage rather than stymie open discussion

It is never appropriate for an SP to:

- Impose their own experiences, values or beliefs on students
- Criticize the choices or actions of a student
- Disparage the beliefs, values, race, religion or cultural norms of students
- Comment on clothing, ornamentation (tattoos, piercings, etc.), chosen accessories (hair color, jewelry, cologne, etc) that students have chosen as a personal style.
- Comment on personal hygiene, deportment or any factor beyond a person's control – physical features, disabilities, impediments, and involuntary actions.

There may be occasions where an SP should speak to the preceptor privately and leave it to them as to whether information should be communicated to a student, such as:

- Poor personal hygiene or overuse of a scent triggering an SP's involuntary response.
- A student being arrogant, dismissive, confrontational or unreasonable.
- Vocal affectations, habits or expressions undermining the students' performance of the task.
- Factors that could interfere with an encounter, i.e. long fingernails for a PE.
- Appearance of being under influence of drugs or alcohol

If an SP is unable to confer with a Preceptor in such a case, they can convey the information (either directly or via a trainer) to Rainer, who can follow up with the preceptor and/or the course chair as appropriate in the circumstance.