PSU Integrated Cluster Project Proposal Form

Title: “Staging Clinical Performances”: Using Standardized/Simulated Patients for teaching and assessment in Allied Health Professions education programs.

Project Leadership: Kelly Legacy – Project Manager, Paul Mroczka – Facilitator & Course Developer, Mary Catherine Gennaro – Course Co-Developer

Project Description: This project is a cross-cluster, cross discipline collaborative between the Arts & Technology Cluster (Music/Theater/Dance Programs) & the Health & Human Enrichment Cluster (Physical Therapy, Nursing, Counselor Ed, Social Work, Athletic Training Programs). This project will work with faculty and external partners who possess medical and theater experiences, to train PSU students to act as standardized and simulated patients for Allied Health Profession programs to utilize for assessments (OSCEs) and educational tools with their “practitioners in training”. Standardized/Simulated Patient is an actor who performs the role of a patient 1.

Rationale and Impact:

Project Rationale and Impact Statement:

1. Specific to Physical Therapy
   - Physical Therapists in clinical practice are required to gain broad medical/science based knowledge with detailed understanding of how a variety of injuries and illnesses affect the way a person moves and functions in daily life, at work, and in recreation. The content knowledge is expansive for the profession. Emerging Physical Therapists need to be able to critically think through and assess complex, multi-system medical problems that have infiltrated the healthcare landscape with the growth of chronically ill patients. Additionally, they need to appreciate and appropriately respond to patients as persons. It’s vital that our future professionals understand and appreciate not only how the injury/illness affects daily function and how then to restore optimal function for the patient, but also how their ethics, values & beliefs, psychosocial considerations, and vocational & socioeconomic statuses impact the person’s ability to heal.
   - Each semester Plymouth State University’s new DPT program utilizes semester ending comprehensive OSCEs to assess students’ clinical competence across cognitive, psychomotor and affective domains of learning. Objective Structured Clinical Examinations (OSCEs) require students to interact with standardized/simulated patients (SSPs) in a variety of clinical scenarios under the observation of trained faculty/examiners. OSCEs have been used commonly in medical schools for years to assess students’ practical skills, however, the inauguration of OSCEs in physical therapy programs is still somewhat contemporary; particularly for assessing professionalism and psychosocial aspects of physical therapy practice. The Commission on Accreditation in Physical Therapy Education (CAPTE) mentions in their Summary of Action Report that they are not clear on how our DPT faculty will be prepared to assess these comprehensive skills with the OSCEs. We plan to utilize standardized/simulated patient cases to assess students’ practical skills application as well as their soft skills engagement in diverse “real world” scenarios. The Certificate Program in Standardized Patient Based Education offered through University of Illinois at Chicago College of Medicine offers instruction and training for:
- Writing cases for SSP encounter and train SSPs to portray the cases
- Training SSPs to provide feedback and debrief learners
- Developing effective SSP-based instructional activities and programs
- Integrating SSPs effectively in mannequin and procedural skills simulations
- Designing assessments and assessment instruments for SSP encounters
- Utilizing strategies to maximize the validity of SSP based exams and OSCEs

The education and training being requested for this cluster project would provide DPT faculty; and other Allied Health program faculty, an in-depth and thorough understanding of OSCEs that utilize SSPs to test students’ clinical competence, professionalism and psychosocial skills in physical therapy practice.

- Clinicians need to be able to choreograph the expansive didactic content of their disciplines with humanity, dignity, and integrity when working with all persons and respond thoughtfully, compassionately and competently in an effective manner that considers the impact of the whole individual when designing a care plan for the patient. By using Standardized/Simulated Patients (SSPs) in Integrated Clinical Experiences (pedagogical tool) and in OSCE’s (assessment tool) we project that students will more confidently and more competently be prepared to participate in clinical education experiences, which we hope makes them more desirable as future hires and as candidates for clinical site placement with our clinical partners.

2. **Specific to Counselor Education & Psych**

- Counseling students work throughout their training to sharpen their use of interpersonal and theoretical counseling skills while gaining the confidence needed to effectively work with clients. For these growth areas, in-class instruction and role-play experiences are not completely effective, and students can often experience a steep initial learning curve upon entering clinical field experiences. The use of simulated clients will provide counseling students with an effective "bridge" experience between their in-class work and their clinical work with real-world clients. With these clients, they will have the opportunity to practice their skills in life-like counseling situations using simulated mental health issues. This will result in students who are better prepared to enter clinical experiences, and should have an overall positive impact on the experience with Plymouth State University counseling interns for school and clinical sites in the region.

3. **Specific to Nursing**

- The baccalaureate nursing curriculum provides a foundation for our students to practice nursing within the healthcare system. Students demonstrate accountability within established moral, legal, ethical, regulatory, and humanistic principles. The use of simulated clients will enhance the educational experience by supporting decision-making. It will allow the students the ability to identify, evaluate, and use the best current evidence coupled with clinical expertise and consideration of patients’ preferences, experience and values to make practice decisions. The simulated patient experience will assist the students to function effectively within nursing and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning, and development. It will allow delivery of holistic nursing care and advocate for health promotion and disease prevention strategies at the individual, family, and community levels. The patient simulated experience will also allow the students to learn and practice
effective communication skills with clients that foster mutual respect and shared decision making to enhance patient satisfaction and health outcomes.

4. **Specific to Music/Theater & Dance**
   - In working with the Health and Human Enrichment Cluster (HHE), the Theatre Program, which is part of the Arts and Technology Cluster (AT) will be aiding in the implementation of the Simulated/Standardized Patient Cluster Project. This cross-discipline project will benefit numerous departments and majors at PSU, as students from the Theatre and Dance disciplines are trained to be simulated/standardized patients (SSP) and then, after their training is complete, they will work with various majors and departments as SSPs, helping to train those students in clinical situations.
   - We plan on offering a specific program focused on training students to be SSPs. This program will lead to a certificate Simulated/Standardized Patient Training. After that training is complete, which we anticipate occurring in a student’s junior year, those who are trained will then be hired to work as SSPs for various programs at PSU as outlined in the project description.
   - Along with benefitting various PSU disciplines and departments, SSP training will benefit Theatre and Dance Majors in various ways. These include:
     1. Training and certification as a SSP
     2. Access to SSP jobs at hospitals, teaching and training institutions, in degree programs and other areas
     3. Development of acting skills related to the industrial film industry, which requires actors who understand and can recreate situations in which doctors, nurses, caregivers, and others interact with patients. (These may be promotional films or training films.)
     4. Better understanding and enhanced development of skills in character portrayal, improvisation, and staying in the moment (All of which are useful in any type of acting.)
   - The SSP Cluster Project actively reflects the Theatre Program’s philosophy regarding the training of students to become theatre professionals. It does so in that our program strongly believes that those who want a career in the theatre should:
     - Have a keen understanding of many disciplines outside of theatre and the arts, and they should utilize these areas of knowledge actively
     - Develop skills that are connected to theatre but that can be used in other areas and disciplines
     - Possess a world view that is inclusive and that constantly demands that they continue to develop as dedicated professionals and as caring and empathetic human beings

**Dance-Specific Connections:**

1) **Students as standardized patients**
   - Advanced dance students seeking dance minor or Interdisciplinary degree options are a target group for standardized patient training.
   - This program would strengthen current dance program options.
   - Mechanism for recruitment and retention in the dance program.

2) **Somatic Connections – Experiential Anatomy Exploration**
   - As part of the dance coursework, students explore somatic connections in the body, which create a strong foundation for practice as standardized patients.
• In dance, the term “somatic” refers to techniques based on the dancer’s internal sensation, in contrast with "performative techniques," such as ballet or modern dance, which emphasize the external observation of movement by an audience. Somatic techniques may be used in bodywork, psychotherapy, dance, or spiritual practices.

• “Experiential Anatomy” in dance refers to the practice of combining a variety of mechanisms for learning to explore physical information in the body. Through information, personal stories, evocative and descriptive images, and guided movement exploration dancers discover how structure and posture is a choice.

3) Future Connections

• First step in developing more connections between DPT Program, HHP curricula and dance program.

• Visionary ideas include programs/certificates or preparatory study in:
  ➢ Dance Medicine
  ➢ Dance Therapy
  ➢ Expressive Therapies
  ➢ Dance and Wellness

Project Goals and Outcomes:

1) Create high impact learning opportunities for students in all programs & disciplines.

a. By affording students in the allied health and clinical sciences opportunities to integrate clinical knowledge and “soft skills” early and often through exposures in simulated clinical practice environments, working with standardized and simulated patients (SSPs), we hypothesize that students will be more mindful of the impact that high fidelity clinical situations may have on their ability to respond, critically think, and make sound clinical decisions. Standardized patient interactions (scripted case situations), such as with the OSCE’s (Objective Structured Clinical Exams), allow for faculty to assess the psychomotor skill competence of the students and their ability to demonstrate, analyze, and synthesize knowledge learned over the course of the semester, followed by a debriefing session that allows students to reflect upon and appraise their performance to use those experiences to improve encounters with patients in the future. Simulated Patient experiences (improvisational case situations) emphasize assessment and learning within the affective domain where students recognize and respond to various socially and culturally challenging encounters, followed by a debriefing session for metacognitive appraisal.

b. The demand for standardized and simulated patients affords MTD/acting students opportunity to gain specialty certification that opens new doors for their future careers. This project affords the MTD students opportunities to practice and get appraisal of their performance techniques, as well as improvisational techniques where they can exercise some freedom in creating their character and acting out a variety of emotional/social challenges for clinical allied health students to respond to as they would need to in real world clinical experiences and jobs.

2) Cross-Disciplinary Faculty/Staff Alignment leveraging strengths in Service, Scholarship/Research
a. Multi-disciplinary & Cross –Cluster team involvement in service outcomes to the community through improved patient/client management and care in the allied health professions. MTD professionals gain certification to act as standardized/simulated patients in several settings (film, plays, hospitals, academic centers).

b. Scholarship opportunities investigating what impact the use of routine standardized/simulated patient encounters has on clinical preparation, practice and outcomes.

c. After completing the requested educational training, faculty will be Certified Standardized Patient Educators able to sponsor/host professional development opportunities for other organizations. DHMC in Lebanon expressed interest in working with PSU to assist them in revamping their SP education program.

3) Community Partners, Stakeholders, and Team Alignment

a. Numerous DPT program clinical partner affiliations have expressed evolving difficulties with student attitudes and critical thinking ability during clinical education experiences. The expressed “blemish” in the professionalism of DPT students, combined with the strife of healthcare clinics and organizations related to numerous regulatory changes has presented issues of access to quality clinical education experiences for academic institutions. The DPT program partners have entered preliminary affiliations with Plymouth State University based on the strong emphasis in our curriculum on clinical readiness. The use of standardized and simulated patient encounters is a pedagogical tool that affords us the opportunity to train and assess students’ abilities in a replicated clinical environment to enhance clinical readiness.

b. Dr. Mary Catherine Gennaro, educator, retired physician, and thespian in our community, is interested in working with PSU to bridge the gap between MTD and the Allied Clinical Health Science programs by using her medical knowledge and background and her theater experience to help design and implement a training certification program where MTD students are trained and become certified to act as standardized/simulated patients.

4) Resource Alignment

a. This is projected as a multi-year project, but much of the anticipated funding is being requested for this fiscal year to support the following:
   i. Cost of hosting Certificate Program in Standardized Patient Based Education for up to 16 people at PSU = $12000. (3 different modules totaling 6 days @ $2000/day)
   ii. Travel costs for instructors from University of Illinois at Chicago College of Medicine = $1800 (3 RT flights Chicago Midway to Manchester estimated at $600 ea)
   iii. Lodging costs for instructors = $800 (rates estimated from https://www.gsa.gov/portal/category/100120)
   iv. Food costs = $2600 (Sodexo catering for all day event at 26.31pp x 16 ppl x 6 days)

5) Student Alignment
a. MTD students are provided active and engaging experiential learning opportunities through service and applied learning through a Standardized Patient Certification Program that will be integrated into the existing MTD curriculum.

b. Allied Clinical Health Science students (PT, AT, Counselor Ed, Nursing, social Work) are provided active and engaging experiential learning opportunities through applied learning and integration with clinical education courses.

6) Project Theme Alignment

a. It is critical that allied health professionals understand and value the pathology of injuries and conditions, but can treat the whole person. Cognitive, psychomotor, and affective domains of professional behavior need to amalgamate into competent and compassionate care that lead persons with injury/illness toward health and improved societal contribution. With the medical backdrop of the 21st century shifting to the treatment of chronic illness and mental health crises, our future clinical education system must also shift for our future clinicians to effectively and holistically treat problems and promote health. To facilitate these qualities in practitioners, we need to integrate acquisition of clinical aptitudes into the curriculum early and often versus a more traditional approach of waiting for students to head outside of the Institution’s walls to try to pull it all together.

7) Self-Reinforcing & Sustainability – develop skills, knowledge, and experiences to be reapplied in future activities

a. The skills, knowledge and experiences that this project facilitates are self-reinforcing for allied health students in the capacity that they will be able to use their experiences to reflect upon and draw parallels with current clinical challenges both as part of their clinical education but also when they are practitioners in the real world.

b. Programs utilizing SSPs within their curriculum will continue to incorporate their use into assessment and learning activities that can easily be transformed to address emerging societal needs.

c. Students will broaden their acting portfolios through this process and can market themselves more broadly in the professional world.

d. Professional development opportunities to a growing network of external partners who use SSPs to augment health professions education and training.

8) Project Scalability & Sustainability

a. **Phase I** of this project is to develop and formalize a Standardized Patient Certificate Program for MTD students who can then be hired to work as SP’s for allied clinical health science programs, utilizing Dr. Mary Catherine Gennaro as the SP trainer. We will first need to train the trainer and then have Dr. Gennaro train the MTD faculty to be SP’s. We will shoot to pilot the project using Standardized Patients with students in the Counselor Ed training program and as part of the OSCE exam to assess students in the DPT program.

b. In **phase II** of this project, Social Work, Counselor Ed, Athletic Training, Physical Therapy, Nursing and Communications will plan to hire Standardized Patient students from MTD to
act as a “virtual client” where they will be videotaped as the patient in a complex medical, interdisciplinary case. Allied Health Profession students will utilize the virtual case in semester long projects to solve complex medical problems using the principles of Interprofessional Education.

c. The use of Standardized Patients in phase III of this project will cross multiple disciplines and multiple clusters. Phase III plans involve the development of disaster preparedness/emergency management that would draw in numerous external partners from the community. A campus/community wide emergency scenario would be created and a plan to respond to the situation would require involvement of MTD students as standardized patients/victims (Arts & Technology Cluster), Health Communications, Nursing, Counselor Ed, Social Work, PT, AT (HHE Cluster), Communications, Social Sciences, Educators, Community (Education, Democracy & Social Change Cluster), Criminal Justice, Social Sciences (Justice & Security Cluster), and Business Admin, Information Technologies, Education Leadership (Innovation & Entrepreneurship Cluster). External partners would be extensive and would include working with The Central NH Health Partnership on their Community Health Improvement Plan 2015–2020. Taken directly from their Plan: “The Central NH Health Partnership supports and convenes a Regional Coordinating Committee for public health emergency planning and response including town officials, health officers, emergency management directors, fire/rescue workers, police, schools/university and others to plan for public health emergencies to limit illness and death, preserve continuity of government/business, minimize social disruption and minimize economic loss.”


9) Supports and Acts Upon PSU Vision and Mission and Cluster Mission

The above listed project goals outline and reflect all dimensions of PSU’s vision and Mission as well as the Mission of the HHE cluster, all stated below.

a. “Plymouth State University serves the state of New Hampshire and the world beyond by transforming our students through advanced practices where engaged learning produces well-educated undergraduates and by providing graduate education that deepens and advances knowledge and enhances professional development. With distinction, we connect with community and business partners for economic development, technological advances, healthier living, and cultural enrichment with a special commitment of service to the North Country and Lakes Region of New Hampshire.”

b. “Plymouth State University is a visionary institution at the hub of an ever-growing creative community where students, faculty, staff, and alumni are actively transforming themselves and the region. We produce society’s global leaders within interdisciplinary integrated clusters, open labs, partnerships, and through entrepreneurial innovations and experiential learning.”

c. “The mission of the Health and Human Enrichment cluster is to support, promote, and enhance quality of life for all through education, research, and partnerships. Integrative approaches are applied to project-based education, research, evidence-based practices, and transdisciplinary exploration advancing the art, science, and ethical awareness of human potential.”
# Project Team

**PSU Project Participants** (essential core team participants including faculty and staff)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position/ Title</th>
<th>Project Role</th>
<th>Discipline/ Specialty</th>
<th>Email</th>
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<tbody>
<tr>
<td>Kelly Legacy</td>
<td>Project Manager, Faculty Liaison – DPT Program</td>
<td>Integrate use of SSPs into program experiences</td>
<td>Physical Therapy</td>
<td><a href="mailto:kmlegacy@plymouth.edu">kmlegacy@plymouth.edu</a></td>
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<tr>
<td></td>
<td><em>HHE Cluster</em></td>
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<tr>
<td>Paul Mroczka</td>
<td>Facilitator, SSP Course Developer, Faculty Liaison – MTD Programs</td>
<td>SSP Trainer/Trainee, SSP Curriculum Design,</td>
<td>MTD</td>
<td><a href="mailto:pmroczka@plymouth.edu">pmroczka@plymouth.edu</a></td>
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<td></td>
<td><em>A&amp;T Cluster</em></td>
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<tr>
<td>Mary Catherine Gennaro</td>
<td>SSP Course Co-developer, Interdisciplinary Liaison, External Partner</td>
<td>SSP Trainer/Trainee, SSP Curriculum Co-designer, Coordinate SSP needs across disciplines</td>
<td>Medicine &amp; Theater</td>
<td><a href="mailto:mcgennaro@plymouth.edu">mcgennaro@plymouth.edu</a></td>
</tr>
<tr>
<td>Amanda Whitworth</td>
<td>Faculty Liaison – Dance Program</td>
<td>Integrate use of SSPs into program experiences</td>
<td>Dance</td>
<td><a href="mailto:aewhitworth@plymouth.edu">aewhitworth@plymouth.edu</a></td>
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<td><em>A&amp;T Cluster</em></td>
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<tr>
<td>Elizabeth Daily</td>
<td>Faculty Liaison – Theater Program</td>
<td>Integrate use of SSPs into program experiences</td>
<td>MTD</td>
<td><a href="mailto:eadaily@plymouth.edu">eadaily@plymouth.edu</a></td>
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<td><em>A&amp;T Cluster</em></td>
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<tr>
<td>Michael Mariska</td>
<td>Faculty Liaison – Counselor Ed Program</td>
<td>Integrate use of SSPs into program experiences</td>
<td>Counselor Ed</td>
<td><a href="mailto:mamariska@plymouth.edu">mamariska@plymouth.edu</a></td>
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<td><em>HHE Cluster</em></td>
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Donna Driscoll  
Faculty Liason – Nursing Program  
*HHE Cluster* 
Integrate use of SSPs into program experiences  
Nursing  
dldriscoll@plymouth.edu

Annette Holba  
Faculty Liason – Communications, *HHE Cluster Guide* 
Guide project and Integrate use of SSPs into program experiences  
Communication  
aholba@plymouth.edu

**Non-PSU Project Participants** (stakeholders; partners; academic institution; etc.)

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Project Role</th>
<th>Discipline/ Specialty</th>
<th>Email</th>
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<tbody>
<tr>
<td>Mary Catherine Gennaro</td>
<td>Self/PSU</td>
<td>Medical Consultant, SSP Trainer</td>
<td>Family Medicine &amp; Theater</td>
<td><a href="mailto:mcgennaro@plymouth.edu">mcgennaro@plymouth.edu</a></td>
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**Student Participant Profile** (Identify the student population/s to be engaged in the project. Identify if this has been or is planned to be incorporated into curricula)

<table>
<thead>
<tr>
<th>Class/ Student Organization/ Individuals</th>
<th>Role in Project</th>
<th>Academic Level (Undergraduate or Graduate)</th>
<th>Academic Discipline</th>
<th>Total Student Population</th>
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<tbody>
<tr>
<td>MTD</td>
<td>SSP</td>
<td>UG</td>
<td>MTD</td>
<td>10 per semester plus non-MTD acting students</td>
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<tr>
<td>DPT</td>
<td>Student Clinician</td>
<td>Grad</td>
<td>PT</td>
<td>30 per semester</td>
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<td>Counselor Ed</td>
<td>Student Clinician</td>
<td>Grad</td>
<td>Counselor Ed</td>
<td>10 per semester</td>
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<tr>
<td>Nursing</td>
<td>Student Clinician</td>
<td>UG</td>
<td>Nursing</td>
<td>30 per semester</td>
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IRB (Institutional Review Board) Compliance

IRB Compliance: [http://www.plymouth.edu/office/institutional-review-board/](http://www.plymouth.edu/office/institutional-review-board/)

☒ This project DOES NOT require IRB compliance (not initially...IRB compliance may be required for specific scholarship activities drawing from this project)
☐ This project DOES require IRB compliance (complete below)

IRB Approval Status: Select an Option

IRB Approval Date: Click here to enter a date.

Any funding approvals of IRB-required projects are contingent on obtaining IRB approval.

Project Management: Timeline and Milestones

Identify the timeline for the project including start, completion, and major project milestones. A closing report will be required as a part of the project funding process.

Project Start Date: Click here to enter a date.
Project Complete Date: Click here to enter a date.

<table>
<thead>
<tr>
<th>Project Milestone</th>
<th>Milestone Description</th>
<th>Target Completion Date</th>
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<tbody>
<tr>
<td>Project Submission</td>
<td>Complete Project Proposal Forms</td>
<td>12/30/2016</td>
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<tr>
<td>Training the Trainer</td>
<td>Complete Webinar or live SSP training course</td>
<td>6/30/2017</td>
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<tr>
<td>Implement Pilot Program</td>
<td>SSPs will be used in Counselor Ed for student training and in PT for 1st OSCE</td>
<td>8/18/17</td>
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<tr>
<td>Debrief for Future Planning</td>
<td>All project participants review and debrief for strategic future planning</td>
<td>8/25/17</td>
</tr>
<tr>
<td>Develop Course</td>
<td>After getting trained as SSP – faculty will develop a course in MTD programs to train and certify students to become SSPs</td>
<td>8/30/2017</td>
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<tr>
<td>ID MTD students for SSP training</td>
<td>Students from MTD to be selected for SSP certificate program</td>
<td>8/30/2017</td>
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<tr>
<td>Assessment/Review/</td>
<td>Assess discipline specific needs for SSPs, review preparedness/training and plan for</td>
<td>8/30/2017</td>
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</table>
Please identify any pre-project education or training for students, faculty, and staff that would be helpful for your project team to have in advance to begin work on a strong footing (e.g., skill training, concepts), and identify any training and education that you are willing to help provide during the preparatory period for the project team before team work formally begins.

Faculty & Student Education/Training Requirements:

- Certificate Program in Standardized Patient Based Education ($12,000)
- Course development for students to become SSPs following Acting I & II courses already in place
References
