INCREASING STUDENTS’ SELF-CONFIDENCE IN PATIENT INTERACTION THROUGH STANDARDIZED PATIENT SIMULATIONS

Flor Culpa-Bondal, PhD, RN
Georgia College and State University

The speaker has no conflicts of interest to disclose
Objectives

1. Consider the value of using standardized patient simulations to augment students’ clinical experiences
2. Discuss the process of selecting clinical scenarios and preparing standardized patients to meet students’ learning needs
3. Understand the challenges in the overall process of setting up, facilitating and evaluating standardized patient simulations
Problem Background

- Students reported anxiety and the lack of confidence to approach patients
- Students fear to say something that may jeopardize the nurse-patient rapport or sets the patient off (Ganzer & Zauderer, 2013)
- Stigma and stereotyping plays a major part but lack of self-confidence is also a factor (Karimollahi, 2012)
- Lack of self-confidence undermines the skills and attitudinal learning process (Geoffrion et al., 2013; Porter, Morphet, Missen, & Raymond, 2013)
Simulation exercises are:

- Venues for students to practice their communication skills and receive feedback
- Less threatening and a safe place to truly apply their knowledge.
- Allow students to make mistakes, be corrected and learn from their mistakes and apply new approaches.

These cyclic processes potentially boast students’ self-confidence and transfer learning in the clinical area (Blum, Borglund, & Parcells, 2010; Smith & Roehrs, 2009)
Research Question

- What is the impact of standardized patient simulations on students’ self-confidence in patient interaction
- What is the difference in students’ self-confidence before and after SP encounters?
Study Design

- Quasi-experimental pre-test/post-test design
  - A pretest self-confidence questionnaire before exposure to the standardized patients
  - Students completed a posttest self-confidence questionnaire after the second exposure.
- Confidential – random numbers given to identify questionnaires for paired analysis
Pre-intervention Student Preparation

- Three-hour communication classroom lab prior to the exercises
  - Lecture on therapeutic communication techniques and skills
  - Students observation of a role play of a patient interview by faculty
  - Practice communication techniques with each other and complete a process recording exercise.
  - Students also had another 3-hour assessment lab where they learn the nursing process as it applies to psychiatric patients.
The Intervention: Standardized Patient

- The standardized patient (SP) scenario used in the exercise was adapted with permission.
- The standard case scenario included the patient presentations, history and a standard script of responses.
- The SP’s were theater major students from the Theater department.
- SP’s were given the case and the script, briefed about the scenario and the encounters.
- SP’s were instructed about: what to evaluate and what feedback to give.
The Intervention: SP Encounters

- 2 encounters per student
  - The same scenario, different actors
- Each encounter is approximately 7-10 minutes
- Feedback from the SP is provided after the first encounter.
- After feedback is received, the student begins the second SP encounter.
- Instructor debriefing after exercises and post-test
The Instrument

- 10-item Likert Scale of 1 to 5, strongly disagree, disagree, neutral, agree and strongly agree.
- The measurement was an adaptation from the questionnaire used in the Athletic Training Department Standardized Patient Study.
- Content experts in the Athletic Department and the School of Nursing reviewed the Confidence Questionnaire.
- The internal consistency, Cronbach’s Alpha = 0.89.
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<th>1. I am confident in my abilities to identify what questions to ask while obtaining a patient history</th>
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<td>2. I am confident in my abilities to generate follow-up questions to a patient’s response ......</td>
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<td>3. I am confident knowing when I have obtained enough information from a patient history ..........</td>
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<td>4. I am confident dealing with difficult patients (e.g., difficult diagnoses, personalities) ..........</td>
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<td>5. I am confident evaluating and treating diverse patient populations (e.g., gender, age, race, culture)</td>
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<td>6. I am confident using appropriate verbal communication</td>
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<td>7. I am confident using appropriate non-verbal communication</td>
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<td>8. I am confident in using appropriate professional language when interacting with patients</td>
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<td>9. I am confident in my abilities to evaluate a patient holistically (e.g., treating individuals as biopsychosocial beings)</td>
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<td>10. I am confident in knowing my abilities and limitations, and refer patients to appropriate medical professionals as needed</td>
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Sample and Data Collection

- 5 semesters: Summer 2012, Fall 2012, Spring 2013, Fall 2013 and Spring 2014.
- Convenient sample
  - First semester psychiatric nursing students
  - First clinical experience
- A total of 234 students consented to participate.
The university has an average annual enrollment of 6500 and the School of Nursing admits an average of 55 students every semester.

Establishment of a new nursing laboratory

- Need for a clinical experience equitable among nursing students.
- Need to add a clinical site and augment clinical experience

Part of a bigger standardized patients (SP) study at GC CoHS

IRB Approval
Data Analysis

- SPSS, version 22 for Windows (SPSS, Chicago, IL, USA)
- A paired sample t-test for differences between the pre- and post-test self-confidence scores
- Bonferroni corrections for multiple testing applied
  - Dividing the alpha value of 5% by 2, yielding a significance level of .025.
- The 2-dependent samples Cohen’s $d$ for the effect size of the total pre and post self-confidence scores and for each individual item (Newton & Rudestam, 1999).
- Missing data were excluded from the analysis.
230 students were included in the analysis

Mean total self-confidence
- Pre-test was 31.62 (sd=5.45)
- Posttest was 39.48 (sd=7.94)

T-test
- t = -14.40, df = 231, p < .01

The overall effect size, d=-1.1

Significant changes were found on every item in the questionnaire
Results

- Pre-encounter self-confidence in assessing patients’ history (items 1,2, 3 & 4)
  - Pre-encounter $M=2.76$, disagree to neutral
  - Post-encounter $M = 3.55$, $d=-1.4$

- Students’ confidence in interacting with patients using therapeutic communication techniques and seeing patients holistically (items 5-9)
  - Pre-encounter, $M = 3.48$, neutral to agree.
  - Post-encounter, $M = 4.2$, $d=-.99$
Conclusion and Discussion

- Lack of self-reported self-confidence before SP encounters
- Self-reported self-confidence significantly increased; SP encounters showed large impact
- Self-confidence in assessment abilities needs close monitoring
- Self-confidence in using therapeutic skills needs to be reinforced
- Standardized patient encounters cultivates students’ self-confidence for future learning
Discussions

- SP not only augments the clinical component of the course, but also improved students’ clinical skills.
- Standardized patient simulations allow students to practice, make mistakes and be given feedback before practicing in the real world.
- Standardized patient simulations provide rich, well-controlled, and effective clinical experience equitably among nursing students.
Limitations and Challenges

- Time Limitations
- Convenient sampling
- Scheduling conflict with SP and students
- Assessment at end of semester and nursing program
- Further studies using different scenarios and assessment measures
QUESTIONS?

flor.culpabondal@gcsu.edu