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Standardised Patients versus Student Role Players in the Teaching of Undergraduate Medicine Communication Skills

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Abstract

Communication skills are essential in producing a good doctor. Many medical schools nowadays strive hard to impart good communication skills teachings within their curriculum. There are two known methods in carrying out the teaching of communication skills for undergraduate medical students: using Standardised Patients and Role Players. This study was conducted in Newcastle University Malaysian branch campus with the aim to look at which method is deemed effective by comparing the percentage of failures at the end-of-stage OSCEs. It involved 3rd year medical students in two different years, 2014 and 2015. It is found that using standardised patients or student role players may not significantly affect the pass rate at the end-of-stage OSCEs.

Key Words

Communication skills; OSCE; Role play; Simulated patient; Standardised patient.

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Introduction

Communication skills are imperative in optimising the doctor-patient relationship and ensuring effective functioning among health care professionals.

Doctors with good communication skills are less likely to face malpractice suits, but more importantly have been shown to have patients with improved compliance to therapies and greater satisfaction.

There are two well-established methods in carrying out the communication skills training in modern medical schools: using standardised patients (SP) and using students as role players (RP).

“Standardised patient” is a general term used to describe training professionals to simulate a patient’s illness or having actual patients trained to present their own illness in a standardised way to facilitate information gathering.

A student role player can be described as a student who plays the role of the patient while another student is the attending doctor. Student role players are a more cost-effective and less labour-intensive method of communication skills training delivery in the undergraduate curriculum.

Previous studies in the West have looked at using standardised versus student role players in communication skills teaching. To our knowledge, there are no studies making this comparison in South East Asia.

In this study, we aim to quantitatively measure the effectiveness of standardised and student role players using the end-of-stage examination results for communication skills OSCE stations.

Objective

In this study, we aim to quantitatively measure the effectiveness of students and standardised role players using the end of stage examination results for communication skills OSCE stations.

Methodology

This study involved 3rd year medical students from Newcastle University Medicine Malaysia which compared the outcome of the Foundation of Clinical Practice (FoCP) OSCE results for the years 2014 and 2015.

In 2014, there were 98 medical students who were trained using the Calgary-Cambridge model using SP. They had the communication training twice weekly.

In 2015, there were 131 medical students who were trained using the Calgary-Cambridge model using RP. They had the communication training twice weekly.

Students in both years have the same entry requirement to medical school, having progressed through Stages 1 and 2 of 'pre-clinical' training and passed the standard set to be in Stage III, making both cohorts similar in ability.

At the end of 15 FoCP weeks of training, these students were assessed using a standardised assessment form set by the University.

To minimise bias, these students from both years were given the same quality of teaching and teaching materials by the same cohort of lecturers. The hospitals used for teaching have remained unchanged.

A chi-squared statistical analysis was then done using the R Environment for Statistical Computing software and the significance threshold of $p<0.05$.

Results

The failure rate for the 4 communication stations in the OSCE for 2014 and 2015 were 30%, 7%, 11%, and 12%, as compared to 23%, 10%, 8%, and 8%, indicating no significant difference in student examination outcomes using student or standardised professional role players ($p=0.2456$).

Discussion

There is a reduction in terms of percentage of failures when both cohorts were compared.

However, this difference is not significant to draw a valid conclusion. Furthermore, this study only looks at two cohorts of students.

Further studies need to be done. These should be done on a larger scale and account for the number of students, type of questions, pre-test knowledge and post-test knowledge.

Conclusion

Training and using professional role players for undergraduate communication skills training may not be a cost effective teaching strategy as doing so does not result in increased communication skill examination pass rates compared to using student role players.

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