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Abstract submission

Two Innovative Simulated Patient Methodologies to Assess Health Behavior Counseling Skills

Needs:

Students must demonstrate core competencies in counseling skills to facilitate lifestyle change in patients with chronic illness or risk behaviors including poor nutrition, sedentary lifestyles, substance abuse, and poor compliance. A Health Behavioral Counseling course for Allied Health students teaches Motivational Interviewing (MI) "spirit" and skills to explore and resolve patients' ambivalence to change behavior; these can be articulated, taught, and reliably measured. Piloted simulated-patient (SP) assessment strategies that sample learners' counseling skills on site and remotely extend the reach of our teaching and assessment to geographically distant clinical sites and prospectively even beyond graduation.

Description:

The first innovation engages SPs who are trained in mental health disciplines to provide sophisticated feedback to students in videotaped Simulation Center encounters, in real time, on behavioral counseling skills and attitudinal factors. The second innovation, being piloted, audio-records pre-scheduled telephone SP encounters between learners and non-professional SPs who portray behavioral risk factors but do not provide feedback; these encounters can occur even for students on remote clinical rotations. Trained coders review videos and audiotapes using reliable measures of specific communication skills and attitudinal dimensions of patient-centered care; the student and course instructor can also review and evaluate recordings.

Discussion:

Learners consistently report highly favorable responses to the immediate feedback from SPs trained in mental health and attribute sometimes profound learning to these encounters. Less expensive telephone encounters being piloted now use free downloadable recording software rather than a Simulation Laboratory, and use undergraduate SPs who receive research course credit instead of reimbursement. A future fusion of these methods will test the use of telephone SPs who are professionals, to reduce costs but retain high-quality immediate feedback. If successful, the telephone methodology could be used for long-term follow-up training or assessment of remote students, graduates, or CME participants learning patient communication skills.