Objective Structured Clinical Examinations III:
Quality Assurance of Standardized Patients
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Lesson Objectives

By the end of this lesson, you will be able to:

- Explain the importance of implementing a quality assurance approach for standardized patients during objective structured clinical examinations (OSCEs)
- Develop case-specific quality assurance monitoring checklists

Introduction

You are administering an OSCE. You’ve recruited and trained the standardized patients and scheduled the students; your OSCE is apparently running smoothly. But are you certain that the standardized patients are performing as expected? Standardized patients must be consistent in their:

- Portrayal of the patient across examinees
- Delivery of information related to the case across examinees
- Scoring/rating of examinees (if required to participate in the evaluation of examinees)

Quality Assurance

Quality assurance for standardized patients is crucial to ensure an OSCE is reliable and fair to all examinees. A quality assurance approach should identify underachieving standardized patients who need retraining and should also provide positive reinforcement to those performing well. It is important to establish a culture in which feedback about performance is expected and welcomed by standardized patients.

Standardized patients have a complex job. They must:

- Portray all the physicality of the patient
- Provide accurate information about the case at the appropriate time
- Carefully observe the behavior of the examinee (if the standardized patient is responsible for completing a checklist to aid evaluation of the examinee)

This lesson will address each of these three areas.

Physical Portrayal

The first role of the standardized patient is to portray all the physicality of the patient. The standardized patient should match the case materials with regard to the patient’s:
• Appearance
• Posture
• Affect
• Use of props
• Behavior
• Responses to the physical examination

Accuracy of Information

The second role of the standardized patient is to deliver accurate and consistent information about the case. The accuracy of the information given by the standardized patient can impact the way in which the student thinks about the case. This may affect the diagnoses the student considers when writing up the post-encounter exercise. This would consequently impact the student’s score on the OSCE. Standardized patients might provide inaccurate information to the student by:

• Providing incorrect information about important medical history details such as location, duration, and onset of pain
• Neglecting to share important information when asked
• Volunteering information without being cued to do so
• Providing too much detail in their responses
• Inadvertently providing information from another case they play or their own personal information instead of the patient’s story (“case crossover”)
• Inappropriately handling situations that are not in the training materials (standardized patients can be trained to provide neutral answers to any questions not covered in the case materials)

Monitoring

To ensure the quality of standardized patients, they must be monitored on their portrayal of the patient and the accuracy of the information they provide during a live examination. Monitoring can be done with checklists that allow any discrepancies between the standardized patient’s portrayal and the case materials to be noted. Checklists are case-specific and include the key patient behaviors described in the case materials. The monitor then records whether or not the standardized patient performs each of these behaviors as described.

Providing Feedback

Monitoring checklists can be used to provide the standardized patient with specific feedback on his/her performance. This can be done immediately after the encounter or later with a review of the video. When using video, it is helpful to note the time of the issue on the checklist to help you locate it during the review. To ensure feedback is effective:

• **Focus on what the standardized patient did well, in addition to the errors.** Standardized patients are often surprised to learn about their errors, and it can make a powerful impression.
• Be specific.
  
  o Describe the issue in detail.
  o Reference the case materials.
  o Suggest a solution.

This written feedback example references time stamps during the encounter so the standardized patient can review the videotape, cites specific case materials, and suggests a solution to improve portrayal:

*You responded with lengthy answers (see video: 2:35, 5:15, 8:00).*

*Case materials (pg 2) state the patient is to speak in short sentences to illustrate the patient’s problems breathing.*

*Pause between each word or two*

**Rating Students**

In some instances, standardized patients are required to score or rate student performance using checklists. It is also important to develop a quality assurance approach around standardized patients’ recording accuracy of student performance. Standardized patients may:

- **Over score**: Give credit for a behavior or task that is not done by the student
- **Under score**: Neglect to award credit when credit is earned by the student

A checklist similar to the one the standardized patient will use to assess the student’s performance is used by a monitor to independently assess the student’s performance. The two completed checklists are then compared to evaluate the standardized patient’s recording accuracy. It is helpful to review a video of the performance, preferably with the standardized patient, when discrepancies are noted to make sure the monitor is correct.

**Developing Checklists**

Checklists are developed that specifically target the skills to be evaluated. If the standardized patients are completing history checklists and/or communication skills scales, the checklists should list the desired student behaviors in those areas.

**Who Should Monitor?**

Standardized patients should be monitored for their portrayal and recording accuracy at some point during each exam administration. Monitors should be chosen for their knowledge of the exam and case materials. For example:

- Another standardized patient playing the same case
- Medical director and/or standardized patient educator
• Authors of the case (eg, faculty member)
• Administrative staff familiar with the case

Monitors should understand and maintain confidentiality of student and standardized patient performance, as well as knowledge of the exam and case materials.

When Should Feedback be Given?

After monitoring the standardized patient’s performance and recording accuracy, when is the best time to give the standardized patient feedback on his/her performance? Ideally, feedback should be delivered as soon as possible after the encounter, especially if you need the standardized patient to adjust any behavior before the next encounter. However, given the short amount of time available between encounters, this isn’t always possible. The next best time is immediately following the exam or just prior to the beginning of the next exam. Standardized patients requiring retraining will need time for remediation prior to working in the live exam setting again.

Performance Standards

Standardized patients may be given brief, focused feedback between encounters; however, standardized patients who are not performing in a standardized manner or are not demonstrating accurate portrayal and recording must be immediately removed from the exam and given additional training.

Acceptable standards should be predetermined with a threshold at which a standardized patient will be removed from an exam. For example, standardized patients must be at least 90% accurate when compared to the monitor, or the standardized patient must perform without making an error that drastically changes the portrayal of the case. For example, a standardized patient who reports right-sided arm and chest pain instead of left-sided arm and chest pain will incorrectly influence an examinee’s thinking about the differential diagnosis.

A Quality Assurance Approach

Quality assurance checks should be conducted on a routine basis in order to determine patterns in standardized patients’ performance over time. Further, this signals to the standardized patients that performance feedback is a routine part of the job. Performance expectations should be communicated to the standardized patients as part of the hiring process and reinforced with routine quality assurance reports.

Keep careful records that provide a longitudinal assessment of an individual’s ability to carry out the role of a standardized patient in an OSCE. A standardized patient who does not meet the predetermined minimum should be removed from the exam immediately.

Take-Home Messages

• Provide standardized patients with positive, as well as negative, feedback on a routine basis.
• Use case-specific monitoring forms to ensure the standardized patient is portraying the case physicality, providing accurate information, and producing accurate ratings/scorings.
• Communicate performance expectations to the standardized patients and reinforce these regularly with feedback.

Resources


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