Session Observed

Welcome to the iCELS SP Quality Assurance Form

Before You Start

- To see an Overview of All QAs done so far
  Visit [https://ql.tc/7RdkH9](https://ql.tc/7RdkH9) using the Access Code

- To watch an encounter
  - **Live onsite:** Go to [learningspace.umassmed.edu](https://learningspace.umassmed.edu) Legacy Login > "Recording" tab > Start a new # tab > Drag and drop relevant Rooms into the new # tab > Under individual camera, roll mouse over the "Settings" icon which looks like a gear > Turn on volume
  - **Live on Zoom:** Go to the Zoom link as found in your assignment email > name yourself as "Observer (Your Name)" > Ensure that your microphone is muted and camera turned off
  - **Pre-recorded:** Go to [learningspace.umassmed.edu](https://learningspace.umassmed.edu) Legacy Login > "Video Review" tab > search for the relevant session or select from the list shown

- To compare the QA Observer's score with the SP's score
  Open a new browser window > go to [learningspace.umassmed.edu](https://learningspace.umassmed.edu) Legacy Login > "Report" tab > "Preset Reports" tab > Select Activity, Case & Learner > "Individual Performance" column > "Individual Checklist"

FYI, upon the completion of this SP QA Form:

- The SP will receive a summarized report about their History/Content, Portrayal/Affect, PE, Scoring and Feedback as observed at this session. The report does NOT contain comments about Professionalism and Openness to Receive Feedback.
The Trainer and QA Observer (if the latter is different from Trainer) will receive a full report which also includes comments about Professionalism and Openness to Receive Feedback.

Sylvia Stanhope and Melissa Puliafico will be notified if there are 1) Concerns on Professionalism 2) Concerns on Openness to Receive Feedback 3) Recommendation for Quality Assurance Review 4) Recommendation for a Follow-up Discussion with iCELS leadership.

The Event Manager will be notified 1) To help update Checklist Score in LearningSpace, if requested to do so through this form 2) To schedule an Individual Quality Assurance Review, Follow-up Discussion and/or Re-training, if recommended so through this form.

iCELS SP Quality Assurance Form

Event Date

February 16, 2023

Event Name

If the Event Name is not found in the dropdown list above, please indicate here:

Round # (e.g. 3/8)

Case # (If # is not available, please insert a case name)

Standardized Patient

For Test Run, please select your own name.
For New SP whose name is not on this list, please choose "(New)".

Please indicate the SP's name as it is not available in the current listing yet. iCELS Staff will receive a copy of this QA Report and forward it to the SP. Thereafter, the SP's email will be added into the system for future use.
Case Trainer

Quality Assurance Observer

Is the Quality Assurance Observer the Trainer too?
- No
- Yes

Event Manager

This case has the following sections
If this is an observed assignment, you MUST select all sections that are relevant.
If this is a Professionalism-only submission, you do not have to select any section.
- Case portrayal/Affect
- History and Content
- Physical Exam
- Feedback
- Scoring Items

Case Portrayal / Affect

Case Portrayal/Affect

How standardized was the SP’s Case Portrayal/Affect?
- Not standardized: 3 or more differences from case expectation
  - 
- Partially standardized: 1-2 differences from case expectation
  - 
- Completely standardized: No difference from case expectation
  - 
How would you describe the SP’s **Case Portrayal/Affect**?

- [ ] Well done! You appear to be thoroughly familiar with the role, delivering an emotionally-authentic and compelling portrayal throughout this encounter. Keep up your excellent portrayal!
- [ ] There is room for the affect to be finetuned for consistency throughout the encounter.
- [ ] Keeping in mind that our bigger mission is for all SPs to expose different learners to the same standardized scenario, we’d recommend a finetuning of the affect seen at this encounter.

What else would you recommend to the SP in order to completely standardize this **Case Portrayal/Affect**?

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**History and Content**

**History and Content**

How standardized was the SP’s **History and Content** delivery?

- [ ] Not standardized: 3 or more differences from case materials
- [ ] Partially standardized: 1-2 differences from case materials
- [ ] Completely standardized: No difference from case materials

How would you describe the SP’s **History and Content** delivery?

- [ ] Your History and Content were completely in line with the case materials. You seem well-prepared and delivered medically accurate responses. Keep up the great work!
- [ ] The standardized follow-up line (after the opening line) needs to be delivered so that every learner receives the same level of information at the beginning. We understand that the conversation does not always flow this way but would encourage giving out the standardized follow-up line next time.
- [ ] The learner asked to rate the pain on a scale of 1-10, but did not define the pain scale. Remember to ask the learner what “10” means the next time.
- [ ] The medical accuracy of some responses can be fine-tuned to help the learner ascertain the patient’s situation more accurately.
- [ ] Important case details were withheld.
- [ ] Important case details were volunteered.
What else would you recommend to the SP in order to completely standardize this **History and Content** delivery?

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**Physical Exam**

**Physical Exam**

How standardized was the SP’s **Physical Exam** portrayal?

- Not standardized: 3 differences or more from case description
  - ☐
- Partially standardized: 1-2 differences from case description
  - ☐
- Completely standardized: No difference from case description
  - ☐

How would you describe the SP’s **Physical Exam** portrayal?

- ☐ Your Physical Exam portrayal was completely in line with what's required for this session. You seem well-prepared and familiar with the case. Keep up the great work!
- ☐ Thank you for giving appropriate responses as the PE was conducted.
- ☐ A response from the SP was required during the PE. Your response needs to be fine-tuned so that the learner at this stage can recognize, diagnose and report this patient's situation more accurately.
- ☐ For this case, you can keep asking the learner what they are testing or looking for.

What else would you recommend to the SP in order to completely standardize this **Physical Exam** portrayal?

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**Feedback**

**Feedback**
How much **time** was available for Feedback?

Examples of

Short (1-3 minutes) sessions: DCS, OSTI

Medium (4-7 minutes) sessions: ObGyn and Surgery Clerkships

Standard (8-12 minutes) sessions: Neurology and Medicine Clerkships, GSN

Long (>12 minutes) sessions: Adult Interviews

<table>
<thead>
<tr>
<th>Short Timeframe (1-3 min)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medium Timeframe (4-7 min)</td>
</tr>
<tr>
<td>Standard Timeframe (8-12 min)</td>
</tr>
<tr>
<td>Long Timeframe (&gt;12 min)</td>
</tr>
</tbody>
</table>

How standardized was the SP’s **Feedback for the time allotted**?

- Not standardized
- Partially standardized
- Completely standardized

How would you describe the SP’s **Feedback**?

- You demonstrated many techniques of providing a good feedback, including: the SP’s self-introduction, the learner’s self-evaluation (on the Alphas/Pluses/What Went Well and Deltas/What Could Be Fine-tuned), stimulating the learner’s reflections by asking questions, providing learner-centered suggestions for improvements, quoting specific examples, offering deliberate practice and providing an opportunity for the learner to summarize the feedback session’s takeaways. Feedback is an important part of learning through simulation, so thank you for the great work as we provide this service to our learners.

- You demonstrated many techniques of providing a good feedback within the short timeframe available, including: the SP’s self-introduction, covering what was done well (Alphas/Pluses) and what could be fine-tuned (Delta), quoting specific examples, and ending with a positive encouragement. Feedback is an important part of learning through simulation, so thank you for the great work as we provide this service to our learners.
There is room for improvement in the SP's self-introduction / opening to the feedback session.

There is room for improvement in the SP's encouragement of learner reflections and self-evaluation to facilitate learning.

There is room for improvement in the SP's approach to providing the learner with specific examples when discussing Alphas/Pluses/What Went Well as well as Deltas/What Could Be Fine-tuned that would make for a more effective learning experience for the learner.

There is room for improvement in the SP's focus on feedback to the learner regarding their approach/process as seen from a patient's perspective, leaving medical decisions/policy to the discretion of the faculty.

There is room for improvement in the SP's approach to giving the learner an opportunity to reflect on the takeaway as an excellent way to close the feedback session.

There is room for improvement in the SP encouraging full use of the time allotted to feedback. For example, you can ask the learner, "What else would you like feedback on?" or "What other questions do you have for me about this encounter?"

What else would you recommend to the SP in order to completely standardize the approach of this Feedback?

Scoring Items

Scoring

Scoring: How many total items are there in this checklist?

Scoring: How many scoring differences are there between the SP and the QA Observer?

For CCCA Only: Please indicate the SP's Inter-rater Reliability Standard

According to CCCA Requirement

>2 Differences = Below professional benchmark
1-2 Differences = Within professional benchmark
0 Differences = Completely reliable

Below professional benchmark
Within professional benchmark
Completely reliable

Please indicate the Checklist Item #, Section, SP's Score, Observer's Score (along with any explanation as necessary), and a period at the end of each line.
As an example:
#5 History = SP answered Yes, Observer answers No (Reason: The Learner did not ask about Severity).
#20 PE = SP answered Performed Correctly, Observer answers Not Performed (Reason: The learner must auscultate 4 areas of the heart on the skin, not over the exam gown).
#40 Communications = SP answered 5, Observer answers 3 (Reason: The learner did not give the patient a 2nd opportunity to ask any questions).

Would you like the Event Manager to update these scores in LearningSpace? 
(If yes, the Event Manager would receive a copy of the note above for action)

No  Yes

The SP’s Inter-rater Reliability Score is {Invalid Expression} %

Please indicate the SP’s Inter-rater Reliability Standard
According to professional benchmark
<80% = Significantly below professional benchmark
80-89% = Slightly below professional benchmark
90-99% = Within professional benchmark
100% = Completely reliable

☐ Significantly below professional benchmark
☐ Slightly below professional benchmark
☐ Within professional benchmark
☐ Completely reliable

SP’s Professionalism

OVERALL: SP’s Professionalism & Conduct

According to the iCELS SP Standards of Professionalism:

- Punctuality
- Dependability for assignment
- Respect for co-workers
- Upholding program confidentiality
- Dressing appropriately for the assignment
- Avoiding cell phone use during assignment
- Maintaining appropriate interaction with the learner
- Free from the influence of drugs and alcohol during work
- Avoiding conflict of interest

- For full details please refer to the SP Standards of Professionalism document available on iCELS Website "For SPs" Section or CLICK HERE for PDF

- Concerns will be investigated. Where the findings are substantiated, iCELS leadership will take appropriate actions with the SP.

Concern  No concern
○  ○

What happened, and how may the SP improve on **professionalism and conduct**?

INITIAL ACTION: Have you given the SP any feedback about their History/Content, Portrayal/Affect, PE, Scoring, Feedback or Professionalism at this assignment?

No  Yes
○  ○

**Action Plan**

**Action Plan**

Do you have any concerns about the SP's openness to receive feedback?

Concern  No concern
○  ○

If you have concerns, please describe what happened, and how the SP may improve on **openness to receive feedback**

As a reminder on the next steps:
The SP will receive an automatic email report which only describes their History/Content, Portrayal/Affect, PE, Scoring and Feedback.

The Trainer (and QA Observer, if different from the Trainer) will receive a full report including comments on the SP’s Professionalism and Openness to Feedback.

Sylvia Stanhope and Melissa Puliafico will be notified if there are Concerns raised on the SP’s Professionalism, Openness to Receive Feedback, and if any QA Review or Follow-up Discussions are recommended.

**Further Action 1: Is a Quality Assurance Review recommended?**

IF YES:

1) A discussion between the SP and iCELS (Sylvia S and Melissa P as well as you, if preferred) will take place first
2) A QA Review will take place whereby the SP and the Case Trainer will go through case materials, review videos, and discuss ways to meet this case's education goals as set forth by the faculty/client.
3) Trainer must observe the SP's performance at the first assignment following this QA Review.
4) If all standards are met with no more concerns, the SP will return to receiving further assignments.

- A QUALITY ASSURANCE REVIEW IS RECOMMENDED FOR THIS SP. Note to Event Manager: Please schedule this SP for a half hour Zoom session with iCELS (Sylvia S & Melissa P as well as QA Person, if indicated so); followed by a 2-hour Zoom session between the SP and Trainer at the earliest date available. Thank you!

**Further Action 2: Is a Follow-up Discussion recommended?**

IF YES: The goal would be to support and enhance the effectiveness of the SP community at iCELS. The SP will continue to receive all assignments.

- A FOLLOW-UP DISCUSSION BETWEEN SYLVIA STANHOPE & THE SP IS RECOMMENDED. Note to Event Manager: Please schedule this SP for a half hour Zoom session with Sylvia S & Melissa P. Thank you!

What points of discussion would you suggest for this session?

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**Further Action 3: Is a Case Re-training recommended?**

IF YES: The SP will continue to receive all assignments.

- A CASE RE-TRAINING IS RECOMMENDED. Note to Event Manager: Please include this SP at a training session for this case about 1 week before the next assignment. Thank you!
When iCELS (Sylvia S & Melissa P) discusses areas of improvement with this SP, your presence could boost the effectiveness of this discussion because you would be able to provide additional input/clarifications. Would you be comfortable to attend, if need to?

☐ No
☐ Yes

Any other notes to iCELS (Sylvia S & Melissa P)

Please click on the ">" button below to submit your completed form.
SP's Performance Score (in %) will be displayed on the next page.