

## TIME AND TALK: STRUCTURING PATIENT-CENTERED COMMUNICATION

### PREPARE FOR ROLE-PLAY

This section provides suggestions on how you can effectively plan and run role-play sessions

#### **CREATING A SAFE ENVIRONMENT**

Workshop participants are more likely to share their experiences and feel comfortable in role-play situations when the learning takes place in a safe environment.

As a facilitator, you can help create this environment by setting ground rules early on in the learning session. This will help participants feel at ease during role-play and feedback situations.

Ground rules to help establish a safe learning environment may include:

- Confidentiality (what happens in the group stays in the group)
- Observing is just as important as role-playing
- Respect each other
- Do not interrupt each other
- The group takes joint responsibility for each role-play session
- Give constructive, non-judgmental feedback
- Freely ask for support from the group

#### **WORKING WITH SIMULATED PATIENTS**

A role-play session will typically, at a minimum, involve two characters: A patient and a hearing care professional. The patient can either be played by one of the participants in the group or you can choose to use an outside individual or an actor as a simulated patient. Such simulated patients can either be a member of the community without a formal acting background or an actor (professional or amateur) who has been trained to portray patients. All simulated patients, regardless of their own experience, bring a 'non-medical' patient perspective to the scenario.

Sometimes, the scenario involves one or more additional characters such as relatives, caretakers, or other individuals who play a part in the patient's life. Simulated patients can also help play these parts and may contribute to discussions among students and tutors about the different perspectives of the characters involved. Role-plays can also be done with scenarios based on communication with colleagues, e.g., asking for advice about a client or challenging a decision.

Using simulated patients who are not associated with the hearing care community can be very valuable, since they offer an outside perspective of the appointment. Simulated patients, who have acting experience, may also find it easier to re-enact emotionally difficult situations than other group participants.