**THE EXPERIENCE OF PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES INVOLVED AS PATIENT EDUCATORS**

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**Objectives:** This in-progress study aims to research how people with Intellectual and Developmental Disabilities (IDD) are impacted when they participate as Patient Educators (PEs) in roleplay scenarios.

Roleplay is a widely-used pedagogical method in medical schools, and research has shown that roleplayers (those trained to simulate an encounter with medical students) benefit personally from this work. They develop a greater understanding of their own health, and demonstrate improved confidence when interacting with health professionals. Despite the fact that some medical schools are engaging people with IDD as roleplayers/Patient Educators, there is an absence of research specific to how these simulation experiences impact PEs.

We hypothesize that PEs will benefit from these simulations, particularly when they are allowed to fully participate in assessment initiatives.

**Methods:** We are developing a six-station Objective Structured Clinical Exam (OSCE) with 6 PEs recruited from the Niagara region. An OSCE is a widely accepted way of assessing the clinical and communication skills of medical students through a circuit of short, one-on-one simulated interviews. Together, the researchers and the PEs will develop simulation scenarios that may include PE experiences, adjusted to ensure anonymity. Each PE will be trained in skills for roleplaying. We will recruit 30 medical students from McMaster University who, through five iterations of the OSCE, will interact with the 6 PEs. The PEs will provide feedback on the interactions with the medical student (focusing on communication skills).

We will use qualitative research methods to explore the experiences of PEs when they are co-creating simulation roles and participating in an OSCE. We will use pre/post questionnaires and analyze PE responses using a semantic differential scale. Domains to be investigated include: perceptions of health, healthcare interactions and self (eg. self-confidence, skill/abilities, independence). Semi-structured individual interviews four months post-session will be conducted. Narrative content will be analyzed to ascertain whether the PE experience was associated with changes in perceptions of health, healthcare and self-advocacy.

**Results:** This research will determine the degree to which simulation work enhances the perceptions and well-being of people with IDD and what, if any, detrimental effects result from this work.

Limits of this work include the small cohort size and the focus on a single assessment process. Prospective data will be confined to a four-month time period.

**Discussion/Conclusion:** People with IDD, as a population, have more than average physical and mental health needs yet they experience barriers to care, including inadequate training of medical professionals. This study will add to the literature that includes patients and their input in medical education. The PEs through this pilot study will contribute to a better understanding of experiences of PEs in simulation work. Results from this pilot study may illustrate new processes in designing medical student assessments. This pilot study may also provide guidance for educators, curriculum developers and researchers concerned about the ethics of including people with IDD into medical education.

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