

Let's Talk: A Fun Approach to Physician Education

PALLIATIVE CARE AT LONG BEACH MEMORIAL

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The Challenge

Increase proficiency and comfort of physicians and nurse practitioners in communicating with patients and families about difficult topics.

The Idea

Partner with local professional actors to provide high quality simulations of patient/family encounters.

It Only Takes an Hour

Since physicians have limited time, each role play only took one hour.

- 5 minutes – Pre-meeting huddle with interdisciplinary team to review case and make a plan
- 20-30 minutes – Role play with actors
- 25-35 minutes – Debrief

Key Elements

- Thorough preparation of case studies, including some scripted responses for actors.
- Partnership with local acting coach who recruited the actors, coached them, and provided valuable insight during the debriefs.
- Physician participants who want to learn and are willing to try something new.
- Experienced debriefers to provide feedback on content, pacing, body language, and best practices.
- Basic recording equipment, including tripods, plus the ability to share the videos for continued learning (e.g., private YouTube channel).

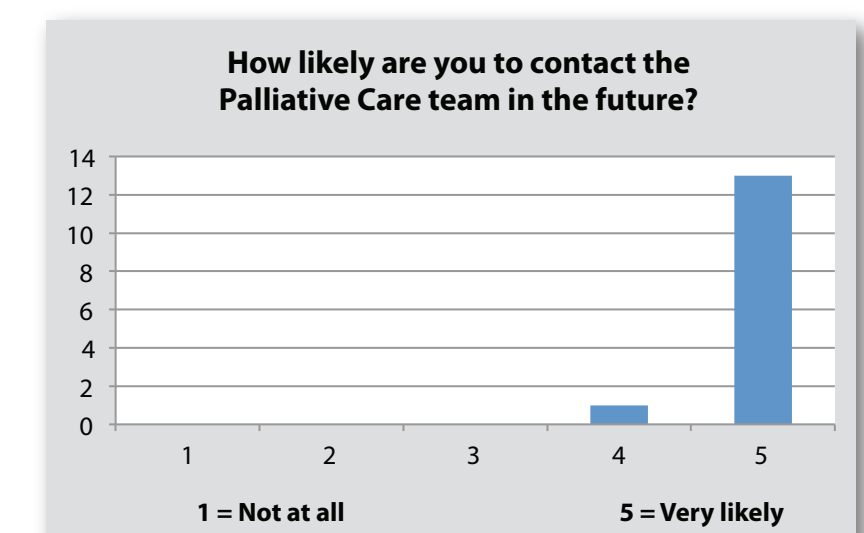
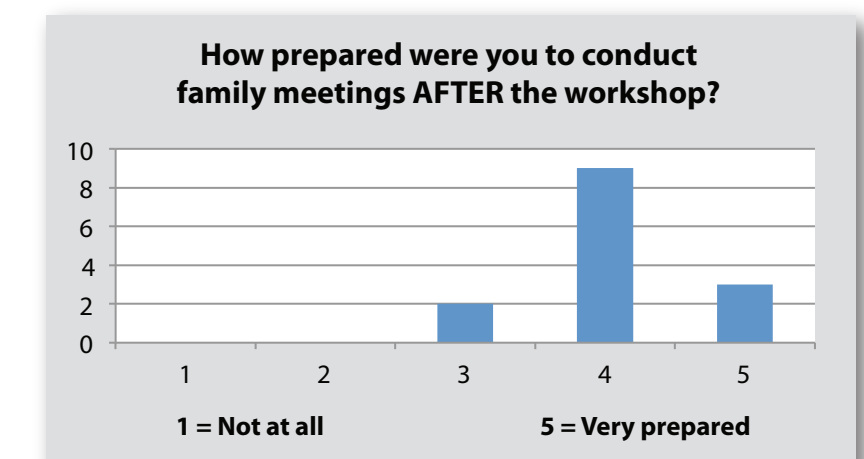
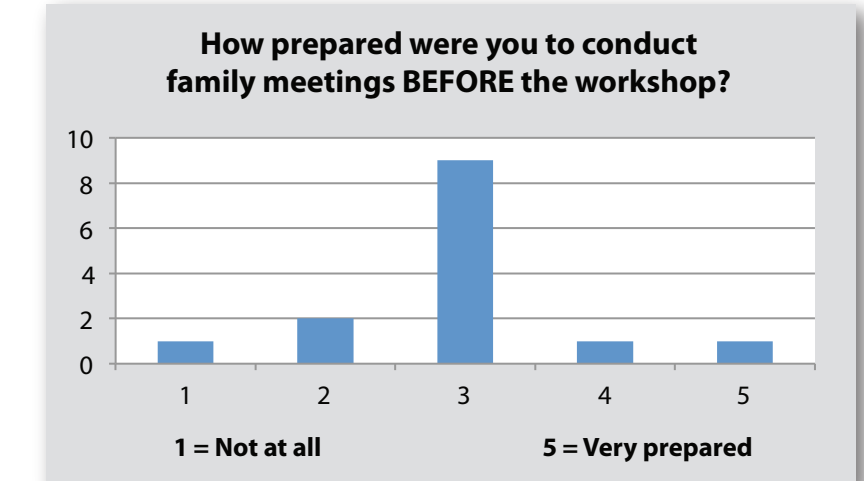
Lessons Learned

- Don't underestimate the power of the team — the meetings were more successful when the chaplain or social worker spoke up early and often.
- Maximum of 3-4 role plays in one day — it's exhausting for the actors
- Observers learned a lot too — it's good to have an audience.
- Camera batteries run out quickly — be sure to have extras on hand.

Stop and Start?

In scenarios with an interdisciplinary team, we did not pause the role play to give direction or feedback. This allowed them to support each other and recover from difficult or awkward moments. In scenarios with only one clinician, however, it was sometimes helpful to pause and give them a different phrase or question to try in the moment.

Family Medicine Resident Workshop Evaluations



Role Play



Case Studies

- ICU family meeting to change code status | MD/NP, chaplain/social worker, 2 family members
- Primary care office visit to deliver bad news | MD and patient
- ED visit to clarify goals of care and avert ICU admission | MD, patient, family member

Coming soon!

- ICU family meeting to inform family of death by neurologic criteria | MD, 2 family members

