Virtual Reality Simulation and Social Determinants of Health: A High-Tech Strategy to Improve Health Outcomes

Research Week 2019

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Acknowledgement

The Medicaid Equity Simulation Project is funded by the Ohio Department of Medicaid and administered by the Ohio Colleges of Medicine Government Resource Center. The views expressed in this presentation are solely those of the authors and do not represent the views of the state of Ohio or federal Medicaid programs.



Social Determinants of Health (SDH)

"...conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks."

Healthy People 2020



Social Determinants of Health

- Economic stability
- Demographics
- Social and community context
- Health and health care
- Neighborhood and built environment



Discrimination

"When stigma leads to social exclusion or discrimination ('experienced stigma'), it results in unequal access to resources that all people need to function well: educational opportunities, employment, a supportive community, including friends and family, and access to quality health care."

CDC (2012)



Training on SDH

- Didactic
- Standardized patients
- Clinical rotations
- Community visits



Medicaid Equity Simulation Project

- Grant from Ohio Department of Medicaid given to each Academic Health Center
- Create a product to assist in educating providers about the SDoH
- Targeted to Ohio Medicaid providers
 - Reduce implicit bias
 - Increase cultural competence
 - Recognize and address health disparities



Medicaid Equity Simulation Project

- Virtual Reality: Educating Medicaid Providers on Health Disparities
 - College of Nursing (Susan Brammer, Lead Principal Investigator, Gordon Gillespie, Co-PI)
 - College of Medicine (Saundra Regan, COM Principal Investigator)
 - UC Center for Simulations & Virtual Environments Research (UCSIM) (Chris Collins, Senior IT Manager)



Development of Simulations

- The scripts for the two virtual reality (VR) simulations were written by a communications expert and Medicaid Primary Care Providers
- Reviewed by "experts" physician and advanced practice nurse providers who work with Medicaid patients, as well as standardized patients who have worked with students about SDoH, and virtual reality experts
- Tested through phases by the experts on an iterative basis



Simulation #1: No Show



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Simulation #2: Schizophrenia





Simulation One

- No-Show
 - Depicted from the patient perspective.
 - Character is a middle-aged woman who is primarily Spanish-speaking.
 - She has several chronic diseases-CHF, HTN, Diabetes.
 - She has experienced several instances of being unable to make her primary care appointments due to lack of transportation.
 - She is headed to her appointment leaving her apartment and the elevator is out. She must climb down several flights of stairs and is not standing outside her building when her Medicaid transport bus arrives and they leave, she attempts to make it to the bus stop as the bus is pulling away.

University

- Walking back to her apartment she collapses from shortness of breath.

Simulation One

- She is taken to the ED and is evaluated for exacerbation of CHF.
- The discharge nurse reads through her discharge instructions which include dietary changes and a new medication. The nurse asks if she understands everything and has any questions.
- The character nods and signs but doesn't understand very well since everything is in English.
- When she gets home she calls the clinic for a new appointment and is informed that she has been discharged as a patient for 3 successive no-shows.



MEDICAID EQUITY SIMULATION PROJECT SCENE MODELING









MEDICAID EQUITY SIMULATION PROJECT CHARACTER AND SCENE MODELING





Simulation Two

- Schizophrenia
 - Depicted from the patient perspective
 - Character is a young man living with his mother in an apartment.
 - He has schizophrenia and has not been taking his medication because he doesn't like taking pills.
 - He is 45 minutes late to his appointment with the psychiatrist at the FQHC as he doesn't have a car and has to take several buses to get there.
 - The provider is rushed and isn't sure she can see him because he is so late and she has other patients waiting. She asks him some basic questions and writes his prescription. She asks him if would like to have case management.
 - He is suspicious about everyone knowing his business.

Simulation Two

- He heads out and misses his bus and walks home. The neighborhood shows signs of poverty and crime.
- He gets home to find overdue bills on his doorstep. There is nothing in the refrigerator.
- His mother is angry and yells at him complaining of his inability to find or keep a job.



MEDICAID EQUITY SIMULATION PROJECT CHARACTER MODELS







MEDICAID EQUITY SIMULATION PROJECT SCENE MODELING





Evaluation

- Evaluation will center on:
 - the use of the technology in educating providers about SDoH
 - how close the VR simulations are to the reality of the patients they see in daily situations
 - the patients in the simulation experience many types and forms of SDoH
 - how could facilitate better training of learners and providers
 - improvements that can be made to the simulations



Evaluation Timeline

February 2019	Practitioner and Standardized Patient
	Participant Assessment for Content Validity
February/March	Initial Expert Panel Critique
2019	
March 2019	Initial Expert Panel Assessment for
	Usability and Utilization/ Pilot Simulation 2
	at All-Ohio Psychiatry Annual Meeting
April 2019	Final Expert Panel Evaluation
April 2019	Pilot Testing
April/May/June	Evaluation of Learning Experience by
2019	Provider Participants of the Virtual Reality
	Simulations
May/June 2019	One Month Follow-up Evaluation
June 2019	Data Analysis / Evaluation
July 2019	Final Report



Take your VR content anywhere.

VR Suitcase for HTC Vive











Medical Providers and Learners Please evaluate our Virtual Reality Simulation developed so far.

<u>305 PROCTER HALL</u> <u>COLLEGE OF NURSING</u> <u>UNTIL 1 PM TODAY</u>

Thank you !



