

SECTION I: SCENARIO OVERVIEW

Scenario Title:	Scenario 5 - Providing care to an at risk transgender patient	
Original Scenario Developer(s):	James Donovan DNP(c), MSN, RN, CNL	
Date - original scenario	6/7/2014	
Validation:	Stephan Rowniack, PhD, RN, FNP; KT Waxman DNP, MBA, RN, CNL, CENP, CHSE; Marjorie Miller, MA, RN, CHSE	
Revision Dates:		
Pilot testing:	9/20/2014	
Estimated Scenario Time: 20 minutes Estimated Debriefing time: 20 minutes		
Target group: Nursing learners seeking knowledge on providing culturally sensitive nursing care to transgender patients.		
QSEN Competencies: Patient-Centered Care		
Brief Summary of Cases:		
Tonya Jones a 22 year old trans women presents to city clinic complaining of a rash to her chest and flu like symptoms for the last several weeks. The symptoms are interfering with her ability to work.		
EVIDENCE BASE / REFERENCES (APA Format)		
<p>Bockting, W. O., Miner, M. H., Swinburne Romine, R. E., Hamilton, A., & Coleman, E. (2013). Stigma, Mental Health, and Resilience in an Online Sample of the US Transgender Population. <i>American journal of public health, 103</i>(5), 943-951. Retrieved from http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2013.301241</p> <p>Grant, J. M., Mottet, L. A., Tanis, J., Herman, J. L., Harrison, J., & Keisling, M. (2010). National Transgender Discrimination Survey Report on Health and Health Care. Retrieved from http://transequality.org/PDFs/NTDSReportonHealth_final.pdf</p> <p>Institute of Medicine (2011). The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding. Retrieved from http://www.ncbi.nlm.nih.gov/books/NBK64806/pdf/TOC.pdf</p> <p>Pettinato, M. (2012). Providing care for GLBTQ patients. <i>Nursing, 42</i>(12). doi:10.1097/01.NURSE.0000422641.75759.d7</p> <p>Polly, R., & Nicole, J. (2011). Understanding the transsexual patient: culturally sensitive care in emergency nursing practice. <i>Advanced emergency nursing journal, 33</i>(1), 55-64. Retrieved from http://journals.lww.com/aenjournal/Abstract/2011/01000/Understanding_the_Transsexual_Patient__Culturally.8.aspx</p> <p>Poteat, T., Reisner, S. L., & Radix, A. (2013). HIV epidemics among transgender women. <i>Current opinion in HIV and AIDS</i>. Retrieved from http://europepmc.org/abstract/MED/24322537</p> <p>Rotondi, N. K., Bauer, G. R., Scanlon, K., Kaay, M., Travers, R., & Travers, A. (2013). Nonprescribed Hormone Use and Self-Performed Surgeries: "Do-It-Yourself" Transitions in Transgender Communities in Ontario, Canada. <i>American journal of public health, 103</i>(10), 1830-1836. Retrieved from http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2013.301348</p> <p>Singh, A. A., Hays, D. G., & Watson, L. S. (2011). Strength in the face of adversity: Resilience strategies of transgender individuals. <i>Journal of Counseling & Development, 89</i>(1), 20-27. Retrieved from http://onlinelibrary.wiley.com/doi/10.1002/j.1556-6678.2011.tb00057.x/abstract</p> <p>Testa, R. J., Sciacca, L. M., Wang, F., Hendricks, M. L., Goldblum, P., Bradford, J. et al. (2012). Effects of violence on transgender people. <i>Professional Psychology: Research and Practice, 43</i>(5), 452. Retrieved from http://psycnet.apa.org/journals/pro/43/5/452/</p> <p>Wallace, P. M. (2010). Finding self: a qualitative study of transgender, transitioning, and adulterated silicone. <i>Health Education Journal, 69</i>(4), 439-446. Retrieved from http://www.researchgate.net/publication/228097842_Finding_self_A_qualitative_study_of_transgender_transitioning_and_adulterated_silicone/file/d912f4ff3329507016.pdf</p>		

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SECTION II: CURRICULUM INTEGRATION

A. SCENARIO LEARNING OBJECTIVES

Learning Outcomes

- Demonstrate ability to obtain health history information from a transgender patient in a culturally sensitive manner.
- Correlate social history with the signs and symptoms.
- Demonstrate knowledge of risk factors associated with transgender individuals.

Specific Learning Objectives

- Demonstrate verbal and non-verbal cultural sensitivity during patient interaction.
- Demonstrate nursing knowledge of transgender healthcare
- Demonstrate ability to provide culturally sensitive care to patients who participate in risky health behaviors.

Critical Learner Actions

- Demonstrate ability to obtain a health history that includes present illness, social and sexual history in a culturally sensitive way.
- Correlate risky health behaviors with presenting presentation.

B. PRE-SCENARIO LEARNER ACTIVITIES

Prerequisite Competencies required prior to participating in scenario

Knowledge	Skills/Attitudes
<ul style="list-style-type: none"> ❑ Integrate understanding of multiple dimensions of patient centered care: <ul style="list-style-type: none"> ○ Information, communication and education ○ Physical comfort and emotional support ○ Coordination and integration of care ○ Transition and continuity ❑ Examine nursing roles in assuring coordination, integration, and continuity of care. ❑ Understand comprehensive understanding of the concepts of pain and suffering including physiological models of pain and comfort. 	<ul style="list-style-type: none"> ❑ Elicit patient values, preferences/expressed needs as part of clinical interview, implementation & evaluation of care ❑ Value seeing health care situations “through patients’ eyes” ❑ Respect and encourage individual expression of patient values, preferences and expressed needs. ❑ Communicate patient values, preferences and expressed needs to other members of the health care team. ❑ Provide patient-centered care with sensitivity and respect for the diversity of human experience. ❑ Value the patient’s expertise with own health and symptoms. ❑ Recognize personally held attitudes about working with patients from different ethnic, cultural and social backgrounds. ❑ Willing support patient-centered care for individuals and groups whose values differ from own. ❑ Participate in building consensus or resolving conflict in the context of patient care. ❑ Communicate care provided and needed at each transition in care. ❑ Assess levels of physical and emotional comfort. ❑ Assess presence and extent of pain and suffering. ❑ Recognize that patient expectations influence outcomes in management of pain or suffering.

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SECTION III: SCENARIO SCRIPT

A. Case summary

Tonya Jones is a 22 year old trans woman who presents today at a free city clinic with a worsening chest rash for one month that is progressive. The patient states that over the last two weeks she felt like she had a cold and that is no longer able to work.

B. Key contextual details

- Trans woman who works as a prostitute and engages in receiving anal sex from men. Uses condoms with her Johns but unprotected sex with her boyfriend/pimp.
- No history of bottom surgery. She has had silicone injections to feminize her face, hips and chest.
- Lives with her “boyfriend” and other roommates in a small apartment in the (low income) part of town.
- Buys estrogen on the street.
- Has not received any healthcare services or evaluations in over three years, before she moved to (big city).
- She admits to recreational drug use including shooting up heroin when she can afford it.
- She is unaware of her HIV or Hepatitis status.

C. Scenario Cast

Leader/Others	<input type="checkbox"/> High fidelity simulator	
	<input type="checkbox"/> Mid-level simulator	
	<input type="checkbox"/> Task trainer	
	<input type="checkbox"/> Hybrid (Blended simulator)	
	<input type="checkbox"/> Standardized patient	
Role	Brief Descriptor (Optional)	Actor/Confederate (A/C) or Learner (L)
Nurse	City Clinic RN	Learner
Ms Tonya Jones	22 yo trans female African American	Actor
Nurse Practitioner	NP to receive report only	Actor

Environment, Equipment, Essential props

Recommend standardized set ups for each commonly simulated environment

1. Scenario setting: (example: office, board room, patient room,)

City Clinic patient exam room.

2. Equipment, supplies, monitors

(In simulation action room or available in adjacent core storage rooms)

Chair x 2	Pen	Clip board w/ paper	Hospital gown
Table			

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Case Flow / Trigger / Scenario Development States			
Initiation of Scenario: The scene begins with the patient sitting in a chair in a city clinic exam room.			
Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
1. Tonya (actor) is in an exam room with a clinic RN (learner).	Tonya looks pale and a bit disheveled.	The nurse must ask the patient's name, birth sex and gender identity questions.	<ul style="list-style-type: none"> <input type="checkbox"/> Provide feedback on how the questions were asked. <input type="checkbox"/> Determine the comfort of the nurse asking gender identity questions. <input type="checkbox"/> Provide feedback on the learner's verbal/nonverbal communication.
2. Tonya is a trans woman who prefers that the nurse use a female pronoun for this visit. The nurse asks her why she is seeking health care today.	Tonya states she has a rash on her chest. She denies fever, but is complaining of night sweats and poor appetite. She has a red patchy rash on her chest. She states it is interfering with her ability to work.	Learner should obtain a complete history of present illness and past medical history.	<p>Was the nurse able to consistently use the patient's preferred pronoun during the simulation?</p> <p>Is sexual reassignment surgery information necessary to evaluate this patient's condition?</p>
3. Patient complains that she is unable to work, so she is not making money.	Unable to work.	Learner should obtain a social history including work history.	
4. Live with her BF and his other roommates. No one else sick. Patient is a M2F prostitute.	Prostitute	RN to obtain a complete sex history. Last HIV and STD testing? Risk behaviors? Assess for risk of abuse or violence.	<p>What type of medical conditions may be associated with the patient's current presentation?</p> <p>Did your view of the patient's profession change the way you viewed or treated the patient?</p>

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Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
5. RN Completes initial assessment.	Report to provider.	RN to determine if the patient needs a gown or not. RN gives a detailed report to the nurse practitioner who will be treating the patient. The nurse will provide concern and possible causes for the patient's condition.	Does the patient need to be fully undressed or only need to take her top for the exam, why?

Scenario End Point:
<p>Suggestions to <u>decrease</u> complexity:</p> <ul style="list-style-type: none"> - The patient is not a prostitute. <p>Suggestions to <u>increase</u> complexity:</p> <ul style="list-style-type: none"> - The patient is being abused by her boyfriend/pimp. - The patient is 17 years or less.

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APPENDIX A: Storyboards for Planning.

Identified Problem/Scenario topic: Transgender Cultural Sensitivity		Case Summary Tonya Jones is a 22 year old trans woman who presents today at a free city clinic with a worsening chest rash for one month that is progressive. The patient states that over the last two weeks she felt like she had a cold and that is no longer able to work.	
Highlighted QSEN Comp/NPS Goals Patient - Centered Care			
Scenario Objectives 1. Demonstrate verbal and non-verbal cultural sensitivity during patient interaction. 2. Demonstrate nursing knowledge of transgender healthcare. 3. Demonstrate ability to provide culturally sensitive care to patients who participate in risky health behaviors.		Critical performance elements 1. Demonstrate ability to obtain a health history that includes history of present illness, social and sexual history in a culturally sensitive way. 2. Correlate risky health behaviors with presenting presentation.	
Case Flow (20 minute simulation time maximum)			
Initiation of Scenario The scenario begins with the nurse introducing his/herself to the patient in one of the City Clinic exam rooms. The patient's appearance is disheveled and pale.	→ →	First Frame The nurse must obtain name, chief complaint and gender identity information from the patient. Patient admits to be a trans woman who prefers to be addressed by the name Tonya and use female pronouns.	→ →
Second Frame The nurse must obtain a history of the present illness & past medical history. <ul style="list-style-type: none"> ❑ worsening rash on her chest for the last month. Partially visible while clothed. ❑ denies fever; complaining of night sweats & poor appetite x 1 week. ❑ has not been able to work for the last week because of how tired and ugly her rash looks. ❑ buys hormones on the street ❑ currently not connected to a primary care provider. ❑ Has been injected with silicone into her lips, chest and hips to make them look more feminine by a non-licensed person at a local silicone party. Her last injection was two months ago. 	→ →	Third Frame The nurse must obtain social history. The patient is a <ul style="list-style-type: none"> ❑ M2F prostitute who works for her boyfriend/pimp. She denies being the victim of violence. ❑ uses street drugs including heroin when she can afford it. ❑ did not complete high school and moved to the (big city) 3 years ago from the mid-West. ❑ no family support; resides with boyfriend and many roommates in an apartment in a low-income neighborhood. ❑ skin condition is preventing her from being able to work the streets. 	→ →

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<p>Fourth Frame Obtain sexual history from the patient.</p> <ul style="list-style-type: none"> ❑ working as a M2F prostitute for ~2 years. ❑ only performs oral sex and receives anal sex from her johns. ❑ unprotected sex with her boyfriend who has no s/s ❑ has not been tested for HIV, STDs or been evaluated by a medical professional in three years. ❑ old track mark scars visible but no fresh tracks of either arm. 	<p>→ →</p>	<p>Scenario End Point</p> <ul style="list-style-type: none"> ❑ explains to the patient that she will need to take her top off and get into a hospital gown. ❑ explains that the provider may also want to look at other areas of your body, but that he/she will discuss that with you if it becomes necessary. ❑ provides the patient the gown and leaves the room. ❑ gives a report to the clinic NP. 	<p>D E B R I E F</p>
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APPENDIX B: DEBRIEFING GUIDE

General Debriefing Plan			
<input type="checkbox"/> Individual	<input type="checkbox"/> Group	<input type="checkbox"/> With Video	<input type="checkbox"/> Without Video
Debriefing Materials			
<input type="checkbox"/> Debriefing Guide	<input type="checkbox"/> Objectives	<input type="checkbox"/> Debriefing Points	<input type="checkbox"/> Core
Core Competencies to consider for debriefing scenarios			
<input type="checkbox"/> Leadership	<input type="checkbox"/> Communication	<input type="checkbox"/> Evidence-based Practice	
<input type="checkbox"/> Human Factors	<input type="checkbox"/> Team Work (if applicable)	<input type="checkbox"/> Systems Utilization	
Sample Questions for Debriefing			
<ol style="list-style-type: none"> 1. Did you have the knowledge and skills to meet the learning objectives of the scenario? 2. What GAPS did you identify in your own knowledge base and/or preparation for the simulations experience? 3. What relevant information was missing from the scenario that impacted your performance? What did your attempt to fill in the GAP? 4. How would you handle the scenario differently if you could? 5. In what ways did you perform well? 6. What three factors were most significant that you will transfer to your leadership/management setting? 7. Discuss how roles and responsibilities might vary under different circumstances. 			
Notes for future sessions:			

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