

SECTION I: SCENARIO OVERVIEW

Scenario Title:	Providing Care to an At-Risk Transgender Patient Original
Scenario Developer(s):	James Donovan DNP, MSN, RN, CNL
Date - original scenario	6/7/2014
Validation:	7/28/2014
Revision Dates:	9/14/2014, 12/1/2018
Pilot testing:	9/20/2014

Estimated Scenario Time: 20 Minutes

Estimated Debriefing time: 40 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 woman 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

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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 manor.
-	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 interactions.
-	Demonstrate nursing knowledge of transgender healthcare.
-	Demonstrate ability to provide culturally sensitive care to patient's who participates 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.

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B. PRE-SCENARIO LEARNER ACTIVITIES

Prerequisite Competencies
Required prior to participating in scenario

Knowledge	Skills/Attitudes
<p>Integrate understanding of multiple dimensions of patient centered care:</p> <ul style="list-style-type: none"> - Information, communication and education - Physical comfort and emotional support - Coordination and integration of care - Transition and continuity <p>-Examine nursing roles in assuring coordination, integration, and continuity of care.</p> <p>- Demonstrate comprehensive understanding of the concepts of pain and suffering including physiological models of pain and comfort.</p>	<ul style="list-style-type: none"> - Elicit patient values, preferences and expressed needs as part of clinical interview, implementation of care plan and evaluations 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 competence 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 to 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.

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 this is now preventing her from working.

B. Key contextual details

- Trans woman who works as a sex-worker 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 “the 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 checked="" 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	Actor
Nurse Practitioner	NP to receive report only	Actor

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Environment, Equipment, Essential props

Recommend standardized set ups for each commonly simulated environment

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

A fictional 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						

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. “The vital signs have already been charted on the RN History and Assessment Form by a health aide (see appendix D). Please complete the attached RN History and Assessment Form, determine if the patient needs to change into a hospital gown and provide a brief summary at the end of the simulation as if you were reporting to a NP about your patient. No physical assessment of the standardized patient is required for completing this simulation.”

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Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
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"> -Provide feedback on how the questions were asked. -Determine the comfort of the nurse asking gender identity questions. -Provide feedback on the learner's verbal and nonverbal communication.

Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
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.	<ul style="list-style-type: none"> Was the nurse able to consistently use the patient's preferred pronoun during the simulation? Is sexual reassignment surgery information necessary to evaluate this patient's condition?

Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
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.	

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Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
Lives with her boyfriend and his other roommates. No one else sick. Patient is a M2F sex-worker.	Sex-worker	RN to obtain a complete sex history. Last HIV and STD testing? Risk behaviors? Assess for risk of abuse or violence.	What type of medical conditions may be associated with the patient's current presentation? Did your view of the patient's profession change the way you viewed or treated the patient?

Participant Status: Desired Learner Action and Trigger to Move to Next State			
Participant Status	Triggers	Learner Actions	Debriefing Points
RN Completes initial assessment.	Report given to provider.	RN to determine if the patient needs a gown or not. RN gives a detailed report to the nurse practitioner that 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 t-shirt 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 sex-worker. <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 COMPETENCE		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 this is now preventing her from working.	
HIGHLIGHTED QSEN COMP/NPS GOALS PATIENT - CENTERED CARE			
SCENARIO OBJECTIVES <ul style="list-style-type: none">- Demonstrate verbal and non-verbal cultural competence during patient interaction.- Demonstrate nursing knowledge of transgender healthcare.- Demonstrate ability to provide culturally sensitive care to patient's who participate in risky health behaviors.		CRITICAL PERFORMANCE ELEMENTS <ul style="list-style-type: none">- Demonstrate ability to obtain a health history that includes history of present illness, social and sexual history in a culturally sensitive way.- Correlate risky health behaviors with presenting presentation.	
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		THIRD FRAME	

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<p>The nurse must obtain a history of the present illness and past medical history. Tonya states that she has a worsening rash on her chest for the last month. She denies fever but is complaining of night sweats and a poor appetite for the last week. The rash is partially visible without the patient taking off her clothing. The patient states that she has not been able to work for the last two weeks because of how ugly her rash looks. Patient buys hormones on the street and currently not connected to a primary care provider. The patient admits to being 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.</p>	→→	<p>The nurse must obtain social history. The patient is a M2F sex-worker who works for her boyfriend/pimp. She denies being the victim of violence. She does use street drugs including heroin when she can afford it. She did not complete high school and moved to the “big city” three-years-ago from the mid-West. She has no family support. She resides with her boyfriend and his many roommates in an apartment in a low-income neighborhood. Her skin condition is preventing her from being able to work the streets.</p>	→→
<p>FOURTH FRAME Obtain sexual history from the patient. The patient has been working as a M2F sex-worker for ~2 years. She states she performs oral sex and receives anal sex (with condoms) from her Johns. She does have unprotected sex with her boyfriend. He is not complaining of any signs or symptoms. She has not been tested for HIV, STDs or been evaluated by a medical professional in three years. The patient does have some old track mark scars, but no fresh tracks on either of her two visible arms.</p>	→→	<p>SCENARIO END POINT The nurse explains to the patient that she will need to take her top off and get into a hospital gown. The nurse goes on to explain 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. The nurse provides the patient the gown and leaves the room. The nurse will then give a report to the clinic NP.</p>	<p>D E B R I E F</p>

DEBRIEFING GUIDE

APPENDIX: **C

Health Information for the Actor Playing the Patient

Patient Name: Tonya Jones

Age : 22 years old

DOB: (fictional DOB)

Gender Identity: Transgender woman

Chief Complain: Chest Rash

Hx of resent illness: The patient noticed a rash on her chest approximately one month ago that has progressively gotten worse. In addition to the rash, she is complaining of having a cold for the last two weeks. She feels rundown. The patient describes the rash as dark patches that appear on the skin, each about the size of a penny first noticed on the chest but appears to be spreading. She states that she also has a sore on her left foot. The rash is not itchy or painful but “looks gross.” Patient denies a fever but admits she does not have a thermometer. She does complain of some night sweats. She states she is unable to work because of the rash and feeling so tired. Patient denies headache, nausea, vomiting or diarrhea. Patient has regular bowel movements of normal shape and color. Denies urinary frequency, discharge or discomfort.

Medications: Estrogen – she buys it on the street when she has the money

Allergies: NKDA

Social: Grew up and lived in Florida with her family until she was 19. Moved here 3 years ago to transition to a woman. She lives with her boyfriend and his roommates in a small apartment in a seedy part of town, no one else in the home is sick. She works as a sex-worker, receiving anal sex and provides oral sex for money. Her boyfriend acts as her manager. She claims to only engage in protected sex with her johns but will admit to having unprotected sex with her boyfriend. She admits to injecting heroin when she can afford it but hasn't been using in the last month. She smokes cigarettes (10 pack year history: 1 – 2 pack a day for seven years). She occasionally drinks vodka (1 x week). The majority of her food intake is from fast food locations; there are no real grocery stores in her neighborhood. She does not own a car. When she is not working she is mostly at home getting high and playing video games on her PS4 with her boyfriend. Barely completed high school but has not attended college or any vocational type of training.

Past Hx: Denies past medical history.

Childhood: Several suicide attempts when she was in high school. If asked, she stopped taking her antidepressants (Prozac) years ago when she came to the big city. She does not feel she needs them any longer now that she is a woman. No congenital abnormalities or childhood diseases.

Adult illnesses: Denies, DM, HTN, or HIV (last tested three years ago)

Surgeries: Denies physician performed surgeries but admits to having received injections of silicone in her breast and hips to feminize her appearance. The patient still has a penis but wants to have gender reassignment surgery when she can afford it.

Health maintenance: Patient does not have a primary care provider.

Appearance: Mildly pale and low BMI. Patient has some old track mark scars on her arm.

Patient's overall appearance is a bit disheveled. The patient has enlarged breasts and female hip shape.

Background for Dialog: The patient is a bit anxious (not aggressive). She wants to get a shot or some pills to clear up her rash and cold so she can go back to work. She is not interested in discussing her drug use or smoking. She is open to getting tested for STDs if the RN asks. She

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wants the visit to go quickly. Her boyfriend did not accompany the client with her to the clinic. Denies intimate partner abuse.

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APPENDIX: **D

RN History and Assessment Form

Patient Names: _____ Ms. Tonya Williams _____

Age: 22 DOB: _____

Birth Sex: _____ Gender: _____ Preferred Pronoun _____

Vital Signs (vital signs completed by triage nurse in advanced)

P :100 BP :140/90 Temp: 38.0 C RR: 14 SaO2:98%

Allergies: _____

Medication: _____

Chief Complaint: _____

Hx Present Illness: _____

Past Medical Hx: _____

Tobacco: _____

Alcohol/Drug: _____

Personal and Social Hx: _____
