

Name:

Date:

Contextual Care Exercise¹

What is the best next thing for this patient at this time?

The following case exercise is intended to facilitate reflection on the challenges of adapting Veterans' care to their individual needs and circumstances, or context. It is constructed from audio recorded encounters between clinicians and Veterans. This exercise will count toward both category 1 CME credit and ABIM Maintenance of Certification (MOC) Credit for physicians participating in the Quality Improvement Project to Reduce Contextual Errors.

Please read each of the examples below and respond to the questions (type your answers in the boxes below).

CASE Example:

A patient had recently recovered from facial burns after a lighter he had been holding exploded, leaving him with facial scars. When his provider suggested a referral to plastic surgery, the patient declined.

What clue(s) suggest this patient might be facing life challenges ("contextual factors") that are relevant to their health or health care?

What would be your next step?

¹ These materials have been developed with support from the Department of Veterans Affairs. Any views expressed are those of the authors and do not necessarily reflect the position or policy of the U.S. Department of Veterans Affairs or the United States government.

Example continued:

The provider in our example did not ask the patient why he didn't want to see a specialist. Later in the visit, however, the patient went on to say, "If I am a Marine, I should look like a Marine. That's what they taught me when I was in the service." The patient also mentioned that "civilians" are weak and he didn't want to become weak.

What contextual issue did the patient just reveal?

How would you adapt your plan of care to incorporate this patient's life context?

Example continued:

The provider in this example then spent time addressing the patient's attitude towards his condition. The provider explained that seeing a specialist for the type of injury he had was not the same as people seeking cosmetic care for anti-aging purposes. The provider encouraged the patient to not think of seeing the specialist as "cosmetic" but as addressing an injury. This is an example of addressing a deficit in the contextual domain of "Attitude Towards Illness" (see 12 domains below)

Do you think the patient will follow-up with the plastic surgeon?

Can you think of an example from your own work where a patient's attitude could have adversely impacted their health outcomes, and how you responded?

CONTEXTUALIZING CARE DOMAINS OF CONTEXT	
1.	Access to Care The patient's ability to receive care in a timely manner.
2.	Competing Responsibility An obligation or commitment the patient has that impacts their ability to manage their health care.
3.	Social Support A patient's access to a supportive network of individual(s) able to assist if needed.
4.	Financial Situation The patient's ability to afford health and health care needs.
5.	Environment The physical and social setting that encompasses a patient.
6.	Resources The possessions and materials available to a patient that can facilitate a person's ability to manage their care.
7.	Skills, Abilities and Knowledge A patient's intellectual understanding and physical ability to manage health care.
8.	Emotional State The emotional condition of a patient as it relates to their ability to manage their health care.
9.	Cultural Perspective/Spiritual Beliefs The customs or a faith-based practice a patient has that impacts health care.
10.	Attitude Towards Illness The feelings a patient has towards their condition that impacts their ability to manage it.
11.	Attitude Towards Health Care Provider and System The patient's feelings and attitudes towards their providers and the health care system that impact their ability to manage their health care.
12.	Health Behavior The patient's actions and lifestyle choices that impact their health care.