**Name:**

|  |
| --- |
|  |

**Date:**

|  |
| --- |
|  |

**Contextual Care Exercise[[1]](#footnote-1)**

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

*A note before you begin: It may be tempting to respond to questions below by saying that the physician would have done a better job if they’d had more time. While it may seem counter-intuitive, the length of time scheduled for an appointment has been demonstrated not to be relevant to the problems illustrated in the example below. There is research to show that when physicians explore, acknowledge, and respond to patients’ individual situations and address underlying needs, visits are not on average any longer. That is not to deny that longer visits would be beneficial, just that they are not a factor in accounting for why decision making is patient-centered in some encounters but not in others, under similar time constraints.*

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

**CASE Example:**

A 55-year old male Veteran with a history of untreated hypertension presented in clinic after having been recently diagnosed with diabetes following an eye exam for glasses that revealed retinopathy. He had not been in to see a primary care provider in over ten years.

*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?*

|  |
| --- |
|  |

**Example continued:**

The provider did not ask the patient why he hadn’t been in to see a primary care provider in so long.

*What are some reasons providers DON’T ask a patient why they aren’t seeing their primary care provider as recommended?*

|  |
| --- |
|  |

The patient went on to mention that he is the sole caregiver for his severely disabled adult brother and spends all of his time attending to his brother’s needs. He doesn’t feel he can leave the brother alone at home.

*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 did not address the patient’s situation. This was a missed opportunity for the provider to help the patient manage his own health while taking care of his brother. This is an example of a “Competing Responsibility” (see 12 domains below) impacting the patient’s ability to manage his health.

*Do you think the patient, with the interventions you propose, is now more likely to attend to his own care?*

|  |
| --- |
|  |

*Can you think of an example from your own work where a patient’s competing responsibility has impacted their ability to attend to their own health or health care?*

|  |
| --- |
|  |

|  |
| --- |
| **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. |
| *Center of Innovation for Complex Chronic Healthcare (CINCCH)Edward Hines Jr. VA Hospital/Jesse Brown VAMC* |

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. [↑](#footnote-ref-1)