

How to Facilitate a *Caring for Challenging Patients* Workshop: Jail Health Service

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Overview

1. Identify target audience
2. Consider logistics such as time, size of group, and space
3. Create objectives and plan structure
4. Prepare for challenges
5. Facilitate session

Potential Audiences

1. Medical students – pre-clinical and clinical
2. Residents
3. Faculty
4. Nurses/Counselors/Staff

Workshop Objectives:

1. To discuss patient interactions that might make you feel uncomfortable.
2. To provide an opportunity to reflect on your own feelings and values about people who are in the criminal justice system.
3. To use this awareness of judgment to identify strategies for maintaining a therapeutic relationship with patients who make decisions about health or life with which you may disagree.

Structure of Discussion

1. Small Group (<10) offers an opportunity to talk through each of areas in detail
2. Large Group (>=10) has special challenges
 - a) Consider breaking into pairs or trios to discuss
 - b) May only touch on the principles without going through details

Facilitator Notes: Setting the tone

1. State your primary objective up front, as well as ground rules.

Example: “We are going to talk about situations in which patients’ behaviors have made us feel uncomfortable. It is natural for us to feel judgmental or to react to patients’ behaviors that push our buttons. It is important for us to be aware of when we feel uncomfortable or judgmental and be prepared to handle it so that we can maintain a therapeutic relationship with the patient and provide patient-centered care.”

2. Address confidentiality.
3. Openly share your own points of discomfort.
4. Practice so that you don’t react to students who say things with which you don’t agree.

I: General feelings about women in criminal justice system

Section I in the CCP-Jail Health Service Learner Handout

1. I am comfortable taking care of a woman who was arrested for suspected:
 - Shoplifting
 - Drug possession- marijuana
 - Drug possession- crack/cocaine
 - Child abuse
 - Sex work
 - Murder
 - Car theft
 - Stabbing her abusive partner
 - Driving while intoxicated and killing a pedestrian
 - Robbery

2. I am comfortable taking care of a pregnant woman who is in jail and who was arrested for suspected:
 - Shoplifting
 - Drug possession- marijuana
 - Drug possession- crack/cocaine
 - Child abuse
 - Sex work
 - Murder
 - Car theft
 - Stabbing her abusive partner
 - Driving while intoxicated and killing a pedestrian
 - Robbery

Facilitator Notes: General feelings about women in criminal justice system

1. Ask: *“Was anyone surprised by their reactions to this question?”*
2. Ask: *“Were there any discrepancies? Did you find yourself more comfortable in the setting of stabbing her abusive partner than others? What about child abuse?”*
3. It’s okay to challenge students.
 - If a student says she thinks it’s selfish to use drugs in pregnancy, ask: *“What are some of the reasons she might be using drugs?”*
4. Repeat the discussion for the scenario of a pregnant woman in jail.
5. If there are interesting discrepancies with some students being judgmental about a pregnant woman in jail compared with others, discuss.

II. Challenging Cases

Section II in the CCP-Jail Health Service Learner Handout

Facilitator Notes: Challenging Cases

1. Begin by asking participants: *“What were your reactions? How does the scenario make us feel? How might our reactions and/or feelings come across to the patient?”*
2. For each scenario discuss strategies for dealing with our reactions: *“Three strategies are useful to managing these reactions: **Empathy, Compassion and Acceptance.**”*
 - *Empathy: Try to put yourself in the patient’s shoes.*
 - *Compassion: If you can’t put yourself in his/her shoes, can you at least understand that they are suffering?*
 - *Acceptance: If these fail, can you simply accept their behavior?*
 - *If all of these fail, you may need to refer care.”*
3. Discuss: *“Let’s explore the patient’s perspective. What kinds of questions could we ask the patient? What are the reasons in general that a patient might have behaved this way?”*
4. Ask: *“What strategies can we come up with to maintain a healthy relationship with the patient? What could we do next time you interact with a similar patient?”*
5. Ask: *“What can we do to recover from a judgmental moment with a patient?”*
6. As before, it is important to emphasize the normalcy of reacting and feeling judgmental.

1. You are seeing a 26 year old woman at 34 weeks gestation, for prenatal care in jail. The only other care she received this pregnancy was one visit to triage at SFGH. When she is not in jail, she uses crack or heroin almost daily.

- *How do you feel about her approach to prenatal care?*
- *Should she be kept in jail while she is pregnant, since she’ll get prenatal care?*

2. You are seeing a woman who is HIV+ with a history of dysplasia. Outside of jail, she hasn’t followed up for pap smears or colposcopy. While in jail this time, you diagnosed her with CIN2 on a biopsy and you arrange for a LEEP at SF General. On the morning of the procedure, she “refuses” the transport from the jail to SF General.

- *How does it make you feel?*
- *What are some reasons she might have “refused”?*
- *Are there similarities to other health care situations out of jail?*

3. Your patient tells you about her history of depression and her history of ongoing abuse from her partner, who is also incarcerated. She is very tearful and asks for your help. She also asks you for a “chrono” for a bottom bunk and some medicine stronger than Tylenol for her chronic pelvic pain.

- *Do you think she is taking advantage of you?*
- *Is she “drug seeking”?*

III. Expectations of Patients

Section III in the CCP-Jail Health Service Learner Handout

1. You are seeing a 30 year old G7P4Ab3 patient who was arrested one week ago. She comes to you reporting vaginal discharge. She does not have custody of any of her 4 children. As part of your routine counseling you talk to her about contraception. She is not currently using any method of birth control.

Facilitator Notes: Patient Expectations

1. This is an opportunity to discuss our expectations of how patients will act.
Example: Women who have lost custody of their children should be trying to avoid becoming pregnant
2. I approach this discussion by asking what might be going on with this patient.
 - Does it bother you that she is not using birth control?
 - *Should* she be on birth control?
 - Why do you think she is not using contraception?
 - How does this help us think about our own ideas of how patients should think about pregnancy?
3. How can we improve our comfort with women having a diversity of reactions and affects?

IV: Discussion Questions

Section IV in the CCP-Jail Health Service Learner Handout

- How do these scenarios make us feel? What are our reactions?
- How might our feelings come across to the patient?
 - Verbal and nonverbal cues?
- What strategies can we come up with to maintain a healthy relationship with the patient?
- How can we recover from a judgmental moment with a patient?

Facilitator Notes: Strategies for Handling Difficult Discussions

1. Isn't it amazing how judgmental we can be? It's fascinating!
2. Direct questioning:
 - *Thank you for sharing your opinions about why this behavior is wrong. Now, I want to ask you to talk about how you will handle a patient telling you she wants to do something with which you don't agree.*
3. Throw it back to the group:
 - *What does everyone think?*
 - *This is a really important issue. If someone feels that a behavior is wrong, what are their obligations to a patient in terms of counseling?*
 - *What are their choices about how to handle it?*

4. Take a deep breath and don't react (while you think, "I cannot believe she just said that.")
5. Usual facilitation techniques if someone is dominating:
 - *Can I hear what someone else thinks about that?*
 - *Thank you for sharing. I'm sorry, but we have limited time. We need to move on.*