

Clara – Social RN



Seeking increased mobility and decreased pain, so she may continue to do the activities she loves and stay active in life.

Brief Description

- Age: 62
- Gender: Female
- Race & Ethnicity: Non-Hispanic/Black
- Highest Education: Nursing
- Location: Urban New York
- Living Situation: Lives alone in an apartment in the Bronx
- Income: \$90,000 per year
- Insurance: Commercial Insurance through the FQHC

Client Story (Personality/Hobbies)

- Clara wakes up each morning for an early shift at the local federally qualified health center.
- She is on her feet for 12-hour shifts four days per week. Her shifts can change at a minute's notice, which has taken a toll on her physical and mental health.
- She is new to the area and is interested in meeting new people outside of work.
- Clara enjoys trying new restaurants, spending time at church, and being active in the community.
- She has not able to develop a social network in her new community given her long work days and the pain in her knees.
- She has started living a more sedentary lifestyle outside of work (binge watching TV and ordering in carry-out), causing depression and increase in blood sugars.
- After a long day at work, it can be hard to wind down and fall asleep or stay asleep, and her pain sometimes gets in the way.

Physical Activity

- Clara enjoys the company of others when being active.
- Although she recognizes the potential benefits of physical activity, she is always on her feet and has a hard time feeling motivated to exercise.

Health Status

- Osteoarthritis of the knee
- Depression
- Pre-diabetes

Pains

- Some days Clara gets home from work late and there isn't sufficient daylight to get outside for a walk.
- The area she lives is not always safe for a walk.
- She is sometimes called in to work on her days off to cover for other staff or is asked to be on-call from home on her days off.

Gains

- She could develop a friend circle through physical activity as a potential motivator, potentially with neighbors in her apartment community.
- Walk With Ease – Self Directed Enhanced (WWE-SDE) may help increase mobility at her own pace and provide social opportunities.
- The National Diabetes Prevention Program could help increase physical activity and improving nutrition.
- Program to Encourage Active Rewarding Lives (PEARLS) could help address depression.

Even though Clara was nervous about joining the walking group, she found the exercise and social interaction invigorating, and she wanted to get some clinical insight into how she can best incorporate additional movement given her situation.

Journey Map

| Stage of Journey | Before an Appointment | | | During an Appointment | | | | After an Appointment |
|--|--|---|---|---|---|---|--|--|
| | Identify Need | Scheduling | Waiting Period | Checking In | Vital Check | Visit With Clinician | After Clinician Visit | |
| | What prompted the patient to make an appointment? What was the patient hoping to achieve when they scheduled the appointment? What are the barriers and opportunities? | How was the appointment scheduled? Did the patient call? Was the appointment made online? What was the experience like? | After a patient makes an appointment, is there anything happening before their visit? Are there missed opportunities? | When a patient checks in, what is their experience? What is happening on the front and back end? | What is the patient experiencing when they are called back? Who are they interacting with? What processes are happening behind the scenes? | What is the experience like when they are interacting with the PCP? What is the patient experiencing? | What happens after the visit with the PCP is over? Do they talk to scheduling or billing? Do they talk with anyone about specific issues (e.g. a dietician)? Do they leave with any resources? | What happens after they leave the appointment? Do they get labs? Do they pick up prescriptions? Do they set up an appointment with a specialist or connect with an AAEBI? Is there any follow-up with the PCP? |
| What is the patient doing? | Clara gets a postcard from her PCP, and she decides she wants to make an appointment so she feels more comfortable introducing more movement and opportunities for social interaction. | Clara calls to make a wellness visit with her PCP, where she decides she wants to ask about the pain in her knees. | Clara walks a few times on her own, but it doesn't go as well. Her knees feel more pain. | There is a delay on the subway, and Clara hits traffic and is five minutes late to her appointment. She checks in and sits down to fill out her paperwork on an iPad. | Clara hears her name called and gathers her purse. She steps on the scale and then goes back to the exam room to have her blood pressure taken. She gives the MA updates on her medical history and confirms she isn't taking medication. | Clara has only seen her PCP once, as she is new to the area. She describes how she is largely sedentary but wants to be more active. They discuss a range of health behaviors, including physical activity. | Her doctor leaves her with a pamphlet on the Walk With Ease program and asks her to go downstairs to the lab to get her blood drawn. | Clara rushes to get her lab work done and puts the pamphlet in her purse, thinking she will read through it when she has time and energy. However, time goes on, and she loses motivation. She occasionally goes walking but isn't consistent. |
| What is the patient feeling? | Clara realizes she had let fear of pain keep her from doing things she enjoyed. She is feeling hopeful that she can decrease pain. | Clara feels a little embarrassed. Because she is a nurse, she feels like she should already have the answers. But she still feels hopeful that she can find a path forward. | Clara is feeling more anxious about the appointment and is doubting her resolve. As her appointment gets closer, she feels overwhelmed by one more thing to do. | Clara is embarrassed she was late and a little anxious, but still somewhat excited that she can get some answers today. | Clara enjoys chatting with the medical assistant. Talking about clinical information puts her at ease, but she does not like seeing her weight. | She wants to come across as knowledgeable to the doctor, and appreciates how her doctor speaks to Clara like a fellow clinician. The doctor puts her at ease as they discuss options. | Clara feels hopeful and motivated to connect with others. She is curious about the WWC program, and she's feeling optimistic. | Clara feels guilty that she isn't taking action but feels more and more complacent. While she had really wanted to address her knee pain, she didn't feel there was a lot of time to discuss or make a plan. |
| How are the care team members and patients interacting? | Clinic manager contacts past-patient Clara via general outreach campaign | The scheduler is juggling several phone calls and feels a bit rushed to schedule the appointment. She is able to find Clara's chart easily and make the appointment for a couple weeks out. | | The receptionist checks Clara in for her appointment by confirming her date of birth, mailing address, and her insurance information on file. The receptionist provides Clara with digital intake forms and lets her know she has plenty of time as the PCP is running 15 mins behind schedule. | The MA calls Clara back and chats about how her day is going as she takes her weight. The MA brings her to the exam room and enters vitals information into the EHR. | The PCP is aware that she has patients waiting and is running behind. Rather than discussing at length Clara's options, the PCP gives her a pamphlet on the Walk With Ease program and encourages to participate. | Clara greets the receptionist at the lab, and she is checked-in. She waits 15 minutes before she is seen, but the phlebotomist taking care of her was nice and the blood draw is quick and she soon leaves the clinic. | Clara gets a message that her patient information has been updated with notes from the visit and her lab results. |
| What infrastructure or method of interaction are they using? | Post card outreach | Phone call Scheduling software | Text message | Face-to-face iPad paperwork | EHR | Face-to-face Patient chart Pamphlets | Patient chart Order to lab requesting blood work | Patient portal |
| What is going on behind the scenes? | DHR identified Clara as someone due for an annual wellness visit. Clinic manager confirms Clara's mailing address using patient intake data. | Scheduling department ensures the appointment time is sufficient for conducting annual wellness visit with Clara's PCP. | An automated text message gets sent out reminding Clara of her appointment. | Receptionist enters Clara's patient record number to pre-populate digital intake forms with Clara's DOB, medication list, and personal/family medical history, for Clara to update. | The MA looks at Clara's record from the last visit to see how her current weight and blood pressure compare. She sees a significant increase and flags for the PCP to address. | | | Chart is entered into Clara's medical record. |