Human Patient Simulation Scenario
Psychiatric and Mental Health Nursing

Using Therapeutic Communication

Main objective: Demonstrate appropriate therapeutic communication techniques via a 1:1.

Patient Description

The patient is a 20 year old single African American named Patrice who has been attending the local university for the last two years. The first year of college she lived in a dormitory. The second year she shared a house with 8 other students. Always a popular girl, Patrice had an active social life and earned good grades. In the winter of her sophomore year she became suspicious and paranoid of her housemates. Initially she stopped eating meals with them and ate by herself or skipped meals altogether. Then she began to isolate herself from her housemates and her friends. She stopped going to social events and eventually stopped attending classes. Her chemistry professor became concerned about her when she stopped showing up for her Work Study job in the lab- she’d never done this before. Subsequently Patrice barricaded herself in her room to protect herself from “people who want to hurt me and take my things.” Campus police were called by a housemate; they removed Patrice from the house and transported her to the nearest psychiatric inpatient unit.

Admitting Mental Status Examination (MSE)

20 year old woman who appears younger than her stated age with disheveled and dirty clothes. She is hyperactive and hypervigilant with eyes darting quickly around her space. Concentration is poor. She is guarded, defensive, and unable to answer questions; she frequently makes statements such as, “Why do you need to know that? Are you in on it with them?” Speech is slow and voice tone is low. Responses are slow and sometimes does not respond at all. Mood is anxious, affect is labile. Denies hallucinations but patient cocks her head from time-to-time as if she is hearing something. Paranoid delusions- roommates are trying to steal her belongings because they are jealous of her. Denies suicidal ideation. Thinking is tangential and thoughts are loose. O x 2- does not know time or situation. Insight and judgment are poor.

Course of Hospitalization

Patrice took several days to become acclimated to the unit. At times her suspicious behavior escalated and she would yell at other patients. Staff used a combination of distraction, keeping stimulation low and prn medication to help her calm down. In the mean time the physician began a course of anti-psychotic medication and a small dose of a benzodiazepine. By day 4 of Patrice’s hospitalization she was beginning to sleep through the night and minimally interact with staff. However, Patrice continued to have bouts of suspicion and paranoia. Now she was able to verbalize her calmly verbalize her thoughts to a staff member and discuss them rationally.

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Scenario

On day 7 of Patrice’s hospitalization, a family meeting is held with Patrice, her parents, the social worker, physician, a registered nurse, and a student nurse. Patrice would like to go right back to the university and pick up where she left off with her studies. Her parents and health care team would like her to go home for a time and possibly return to the university the next semester. By the end of the meeting it becomes clear to Patrice that she will not win this argument and she angrily storms out of the meeting. The student nurse follows her.

Note: This is the second week that the student has worked with Patrice.

Scenario Objectives

Students who successfully complete this scenario exercise will demonstrate their ability to:

1. Identify the goal of the 1:1.
2. Use a predominant amount of therapeutic versus non-therapeutic techniques in a 1:1.
3. Use empathy.
4. Recognize factors (environmental, physical, and social) that may impact the 1:1.
5. Utilize active listening.
6. Describe countertransference and transference issues as they occur in the context of the 1:1.

Checklist of Interventions

1. Ensures patient safety ______
2. Physically approaches the patient in a safe manner ______
3. Utilizes skills to decrease agitation ______
4. Sets the scene for a 1:1 to occur ______
5. Evaluates patient status in relation to the family meeting dynamics ______
6. Elicits feelings about the discharge plan ______
7. Establishes a plan of action with the patient ______
8. Reminds patient that they are a member of the health care team ______

Debriefing Guidelines

Student and Instructor Only
1. How would you evaluate yourself in this scenario?
2. What could you have done differently to enhance your effectiveness?
3. Was there any time during the interaction that you felt unable to respond?

Student Group and Instructor
1. What specific communication techniques were used?
2. Was there any subjects/feelings etc. that were not addressed?
3. What should be done as follow-up?