



Case Study 2

Moderate Engagement

Care navigation and hospital mishap

*All names have been changed to respect the privacy of the patients, family, and care providers.

Jen, 27 years old, contacted me because she was overwhelmed by her rare and challenging condition, Complex Regional Pain Syndrome. Prior to this, she was very productive attending an MBA program while working full-time. Unfortunately, she tripped and fell at work several months ago. Her 'minor' leg injury, for unknown reason, turned into this major medical condition over a few months. She was now wheelchair-



bound with a dismal quality of life, and her mental state also had been seriously affected. She told me she was turned down by another advocate due to the rarity of the condition. I admitted to her that I had no experience with her condition, but I was willing to research and help her find a path to recovery that's right for her.

Luckily for me, she already did her research and found a top doctor who could treat her condition, so our initial goal was to get the most out of the upcoming appointment with the doctor. I identified several evidence-based treatment options as well as clinical trials. As we discussed her options, I listened closely to her preferences and

anxieties with certain treatments so that I could advocate for her in front of the doctor.

The appointment went well. The doctor initially recommended the most invasive treatment but when we explained how she felt about it, he supported her preferred treatment choice (temporary relief). We then

discussed her next possible steps and ways for her to learn about the invasive but much longer-lasting treatment procedure, so she would be ready when the time was right. I also asked the doctor to order her home health therapy and an aide so that she would get additional support without incurring more costs.

Jen received the treatment a few weeks later, which went very well. She didn't need me for a while...but one day Jen called me from the hospital. She apparently had a mental health crisis and been admitted to the psychiatric unit. She told me she was treated very poorly by staff and could use my help. Because I already had all her information as an established client, I was able to arrive at the hospital quickly. Jen was miserable and needed better care there.



As I walked around the unit, I noticed there was another unit with bigger rooms which seemed more suitable for Jen, who was in a wheelchair. I politely asked the charge nurse if they could move her to the unit for her safety. But she simply gave me excuses why that could not be done anytime soon. I knew right away that to rectify the situation, I had to move the problem up in the chain of command quickly.

I left the unit and found a way to get a hold of the administrator on call in the lobby. I left a voicemail explaining the situation and requesting them to move Jen to the better unit for her safety. The administrator called me back within 5 minutes and Jen was transported to a much bigger and nicer room within an hour! I made sure she was well situated in the new unit and also introduced myself to the new nursing staff. I thanked them for their help and shared some information about Jen so that she would be given the best care possible. I called the unit the next day to make sure things were going well for Jen. She stayed in the unit for a few more days, received good care, and was discharged home in much better spirits.

