



# MidAtlantic AIDS Education and Training Center

## Lessons in Patient Assessment and Engagement

*Model for patient-centered approach for healthcare providers to comprehensively assess patients and provide linkage to care while prioritizing patient education and engagement.*



### OBJECTIVE:

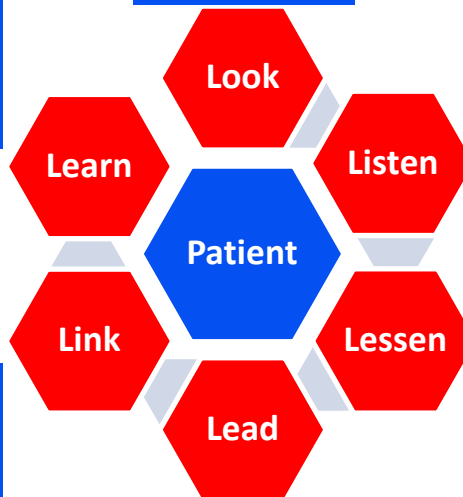
The “Lessons in Patient Assessment and Engagement Tool”, commonly known as the “L Schematic”, was created to focus on key concepts in improving communication between patients and health clinicians, and staff. Adopting a model for standardized patient centered assessment and engagement can positively impact the continuum of HIV care particularly the for hard to reach and vulnerable. The model offers a way to remember key strategies that are central to effective assessment and engagement.

**The six lessons that frame this model are: Lessen, Lead, Link, and Learn.**

- Chief complaint
- Success with current treatment
- Treatment preferences
- Sexual Health History
- Side effects, other barriers
- Behavioral co-morbidities
- Culture, values
- Family issues, dynamics
- Infectious co-morbidities
- Non-infectious co-morbidities
- Health literacy

- Immediate services
- Diagnostics
- Treatment
- Support services & groups
- Health & wellness services & resources
- Technology resources & assistance
- Transportation
- Financial assistance
- Harm reduction services

- Appearance
- Affect
- Behavior/Body language
- Mood Surroundings



- What they say
- How they say it
- What is not said
- Are there interruptions?
- Age and gender
- Where they are in their journey
- Empathy

- Fear of unknown
- Lack of information
- Anxiety about healthcare
- Concerns about access to healthcare and resources
- Inexperience with technology
- Medication side effects

- Knowledge of their HIV status and options
- Self-care
- Engagement in care
- Willingness to disclose barriers & challenges
- Educate support system

## LOOK

*The healthcare provider aims to observe a patient since any of these factors deemed significant can be an indicator for need of additional clinical, fiscal, or housing support from the team.*

- Look at general appearance, such as, neat, disheveled; proper personal hygiene
- Look for facial expression, such as, tense; sad; muted; poor eye contact?
- Look at mobility; such as, unsteady gait; poor coordination; tremors, shaking
- Look at attention: distracted; startled by sounds; restless, fidgeting

## LISTEN

*The healthcare provider aims to listen from start to finish and can make a better well-informed assessment and engage with the patient.*

- What is the chief complaint?
- Why did they come to care now?
- Does what they say consistent with the chart?
- What words does the patient choose?
- What is the tone of voice?
- How do they identify themselves: age, race, gender, sexual orientation?
- Does non-verbal and verbal expression match?
- Does the patient seem reluctant to share information about self?
- Does body language provide an indicator of comfort and discomfort?
- Does the patient ask questions?

## LESSEN

*The healthcare provider aims to lessen misinformation, fears, concerns and uncertainty.*

- Education of the patient on any aspect of the interaction is key: diagnosis, treatment, prevention
- Assurance that information they reveal is confidential from sessions and for their chart.
- Ask if information is clear, encourage the patient to ask questions about anything they don't know or cause them concern.

## LEAD

*The healthcare provider aims to lead the assessment and engagement with the patient.*

- Are they knowledgeable about their diagnosis?
- Do they know their treatment options?
- Are they familiar with self-care ?
- Are their barriers to prevention and treatment that should be addressed?.
- Do they know about HIV disease? Ask them to explain what they know.
- Encourage the patient to ask questions
- Facilitate patient involvement in decision making about their care and treatment.
- Provide information to patient about treatment and prevention
- Ask patient to repeat back information in their own words
- Use handouts and other visuals to help patient knowledge of the disease and treatment.
- Is informed consent documented as needed?

## LINK

*The healthcare provider aims to link the patient to any resources*

- Diagnostic services?
- Treatment for HIV ?
- Treatment of medical co-morbidities
- Treatment of psychosocial comorbidities
- Transportation?
- Fiscal and housing resources
- Provide print resources
- Provide links to on-line resources

All the above can broaden the patient's knowledge about the illness, treatment and support services that can impact adherence, and engagement in care.

## LEARN

*The healthcare provider aims to learning about the patient, their lived experience, family and social relationships since individuals are impacted by their human networks, social interactions, and environments.*

- Medical history
- Past treatment(s)?
- Psychosocial history?
- Sexual history?
- Challenge to adherence and treatment
- Views of health and wellness
- Family dynamics.
- Work history

## MIDATLANTIC AIDS EDUCATION AND TRAINING CENTER

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Please refer to the most recent guidelines  
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