

Tab 2
Problem Solving Skills Domain

The core elements of the intervention include a 4-step approach involving the “three Os”:

- 1. Developing focus and identifying the problem** or situation that potentially interferes with keeping clinic appointments. Patients may experience multiple problems or situations that need attention.
- 2. Generate Options:** In a strengths-based fashion, patients are asked to generate options that may be useful in addressing the problem or situation. Patients are asked to think back to similar problems they may have experienced, identify prior successful strategies, and think about how they might be applied to the current situation.
- 3. Think about Outcomes:** Patients are encouraged to think about the possible outcomes or consequences of specific options. “If I do this, what is the most likely result?”
- 4. Rank order the Options:** Put each identified option into a preferred order, e.g., first to try, second, third.

The interventionists will present the patient with real-world situations (problems) that they may experience and that may interfere with clinic attendance. Patients will be asked to work through the 4-step process above with respect to the scenario. This process may be applied easily to other skill areas that need attention such as communication, organization, and navigation.

Tab 3
Patient Communication Skills Domain
Five Strategies for Effective Patient Communication Skills

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- (1) **Acknowledge that communication is important.** The doctors and health care staff at this clinic want you to ask questions and be informed about your health and medical care. You know your body and your health best; the doctors and health care staff need to hear from you.
- (2) **Acknowledge that talking to the doctor can be intimidating.** Many patients have trouble speaking up or are afraid of asking questions when they are with their health care providers. The health care providers at this clinic want you to feel comfortable talking about any concerns you may have, and they want you to feel comfortable asking questions about your HIV, medications you are taking, or anything else related to your HIV care and treatment.
- (3) **Encourage patient to be an active participant in their health care** - follow the ABCs: **A**sk questions, **B**e prepared, and **C**ommunicate concerns [adapted from AHRQ-sponsored “How to Talk to Your Doctor” training initiative (Tran et al., 2004)]
- (4) **Encourage the patient to bring a friend or family member with to their visit.** Having someone else hear what the health care provider has to say can help you remember the important things that were discussed at your visit.
- (5) **Coach the patient how to overcome common barriers to patient-physician communication** such as embarrassment, fear of feeling foolish, or not knowing how to express anger or other negative emotions. Encourage patient to rehearse out loud the question he/she wants to ask. Teach the patient to communicate negative feelings appropriately.

Tab 4

Organizational Skills Domain

To enhance organizational skills, the interventionist will use the following activities:

- (1) **Teach the patient how to use the calendar and notebook together to keep track of appointments and record important information** like phone messages, directions to places, and to-do list items. The interventionist will teach the patient skills such as how to record appointments in the calendar, what types of information to record in the notebook, and where to keep the calendar/notebook so that it will be used daily.

- (2) **Prioritizing activities and tasks associated with HIV care.** The interventionist will work with the patient on a strategy for prioritizing which tasks need to be completed first before other tasks can be successfully completed. For example, a series of tasks might need to be completed before the patient can schedule their first primary care visit (obtain documentation of financial income, proof of residency, and insurance documents → attend case manager appointment → present all required documentation to case manager → schedule HIV primary care visit). The patient needs to understand that they need to complete certain tasks prior to meeting with their case manager, and they need to meet with their case manager and present complete documentation prior to obtaining an HIV primary care appointment. A useful strategy for prioritizing is to assign a priority rating to each task (for example “A”, “B”, and “C”). The interventionist will encourage the patient to come up with a strategy to make sure that they prioritize which tasks should be completed first.

- (3) **Teach patient how to develop a filing system for papers.** Patients will accumulate much paperwork as part of their medical care (appointment visit information, results of lab work, case manager referrals, referrals for support services, prescriptions, disability forms, etc.). Without a filing system in place, paperwork can easily get lost. The interventionist will work with the patient to set up a filing system for organizing the most important paperwork related to their HIV medical care. The interventionist and patient should work together to set up a filing system where they could create main categories and subcategories for their various visits. For example, a main category could be Case Management and sub-category files could be set up for Transportation Referrals or Housing Referrals.