Involving everyone, agendas, and helping identify ‘the question’
WACAAP Lesson 1 April, 2020

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A primary care model for mental health
- Patient/family feels “true” concerns are heard and understood
  - This is the heart of therapy
- Level of concern reduced
  - Often just because now they have a partner who understands
- Agreement on plan for immediate help
  - Includes familiar pediatric advice and counselling
- Agreement on plan for further treatment and evaluation
  - Assurance of partnership going forward
  - How will we know that things are better?
  - What else will we have to do to understand more?

Involve everyone in the visit
- Mental health problems have multigenerational impact
- Make it clear you are there to understand and help
- Children typically have little substantive participation
  - When children are involved they are more likely to be adherent to treatment and their parents are more likely to be satisfied with the visit
- Difficulty with family dialogue and feelings of exclusion underlie or exacerbate many mental health problems
- Important for prevention of risk behaviors and management of chronic conditions

Starting from the greeting*
- Introduce yourself and your role/title
- Greet each person individually
- Use each person’s name or ask for it
- Offer a handshake or some other appropriate body language
- Use this moment to demonstrate respect and attention
- Tone is friendly but mid-range
- Give room for a range of answers

Explain what will happen
- Emphasize choice and that can modify plans to suit their needs as you understand them
• Children especially usually need orientation
  o What is likely to happen at this visit?
  o How long will it take
  o Who will do what
• Work up to open-ended questions
• Children appreciate a “warm up” of easy questions

Show you expect to hear from both parties
• Show both parent and child that you want to hear from them and appreciate their concerns
• Active eliciting in first open-ended question
• “I want to make sure I hear from you both”
• “Who wants to go first?”
• Body language that includes all parties

Getting the full list of concerns
• First issue broached frequently not most important
• Special problems with social and emotional issues
• Not sure if appropriate for “medical” visit
• Concerns about stigma, privacy
• Problem not really formulated yet
• May assume you already know

Consequences of not getting full list
• May assume you don’t care
• “Doorknob” question
• Resistance or lack of adherence to off-target plan
• Come back with another concern
• Don’t come back at all
• Accept harmful or inappropriate treatment

Skills for getting full list
• Listen to your team; pre-session huddles; quick glance at chart
• Don’t presume “chief complaint” is sole reason for visit
• Acknowledge but add an open-ended question
• Avoid specific follow-up questions until after full agenda elicited
• Checking with all parties for “Anything else?”

Setting the agenda for the visit
• Frequently more to talk about than will fit in visit
• Why do it collaboratively?
  o Agreement on agenda enhances “buy in”
  o Discussing agenda a check to make sure main concern is addressed

Common issues in agenda setting
• Parent and child/youth have different priorities or opinions
• Family priorities not same as yours’
• Opportunities for additional visits are limited
• You really do want to accomplish more than you have time for!

Skills for agenda setting
• Making sure this process is clear to patient/parent
• Make a clear transition to this step
• Ask for permission to sum up the concerns and think about what to accomplish
• Playing back the list of concerns
• Asking for priorities
• Openly and collaboratively problem solve about limitations on time or follow-up visits

Rambling and digression
• A risk of the “open-ended” approach
• That’s why we shy away from it!
• Some rambling can be the patient’s attempt to formulate the problem – thinking out loud
• Your interruptions can help if they promote focus in a non-leading way
• Just when to break in is a matter of your style and the amount of time you have

Skills for rambling
• “I want to make sure we don’t run out of time…”
• Summarize your understanding and ask for additional concerns
• Specifically ask for focus
• “Which one of those is hardest?”
• “Pick one of those to start with.”
• Ask for a specific example

Things to try in your upcoming visits
• A ‘script’ for talking about yourself and what will happen for new visits or new situations
• Asking ‘anything else’ before moving on to setting an agenda for a visit
• Thinking of ways to break in and help someone organize a story
• Summarizing what you heard and asking for corrections, additions, agreement
• Asking for priorities

/wacaaplesson1handout