

Engagement Strategies

The initial session is primarily used to meet the patient to address their stated concerns. This session may involve crisis intervention, support, advocacy, and/or information and referral. If it seems appropriate that the patient/family can benefit from more involvement in our program, further appointments will be set and clearer expectations will be discussed and established.

Opening Lines

1. Tell me why you are here today.
2. What do you want from your appointment/our meeting/our program?
3. How can I help you?
4. How are you hoping we can help?
5. What do you see as the most important issue for us to address today?
6. What is your biggest concern for your child?
7. Why do you think you are here talking with me today? (Use with kids/teens)

Use these types of questions to find out where the patient is at and what their expectations are for the appointment. From their responses, you take the next step. Use the first appointment to find “common ground”, to come together about what we can or can’t do for the patient/family.

It is important to find out what the patient’s goals are and then to gear your responses towards those goals. It is not the time to impose our own goals onto the patient – judging what we think they should deal with or care about. (Exception: When risk to the child is evident).

Potential Initial Patient Goals:

- Fix my child
- Fix me
- Punish the offender/prosecute
- Make my child behave/mind/be good
- Make my parents not bug me
- Keep my child away from the offender
- Prove SA happened to my child

Are these realistic goals for our program to accomplish with the patient? How do we address these with the patient/family? How do we respect their concerns while also redirecting these goals or helping them to establish more reasonable expectations?