Feedback & Discuss

Effective communication and collaboration between HCPs and PLHIV is crucial to make the most of consultations and achieve healthy living with HIV. However, several barriers to effective communication and shared decision making remain*

PRACTICAL RECOMMENDATIONS FOR HCPs
for improving communication and shared decision making in HIV care:

Pre consultations

Where possible, collect information/data (e.g. medical history and PROMs for the PLHIV) to save time and ensure the approach is personalised

Identify which health goals need improving to understand what decisions need to be made

During consultations

Consider key questions that PLHIV may have once interventions are identified

Set clear care plans with tailored goals for each PLHIV

Assess the level of shared decision making PLHIV wish to contribute and commit to

Use counselling approach through non-judgemental communication and active listening to support PLHIV to reach intervention decisions themselves

Use problem-solving approach by prioritising which issues to focus on during each consultation

Adapt communication style depending on consultation format (use direct, closed questions for virtual format and open questions for face-to-face format)

Ensure adequate time to address both disease and general health during consultation

Manage expectations in terms of which issues can be realistically discussed with infectious disease specialist

Allow PLHIV to make an audio recording/written notes of consultations to help inform shared decision making

Post consultations

Provide PLHIV with knowledge and information they need to make informed decisions (through electronic health records and consultation summaries)

Ensure post-visit communication suitable for PLHIV

Feedback & Discuss

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PRACTICAL RECOMMENDATIONS FOR PATIENTS
for improving communication and shared decision making in HIV care:

Pre consultations

Prepare 1–3 key questions or concerns to focus on during each consultation (defined by PLHIV or HCP)

Complete PROM questionnaires to identify priorities

During consultations

Do not assume an issue is insignificant – any factor that impacts your QoL should be shared with your HCP

Recognise that being open and sincere to your HCP about personal issues can be beneficial

Try to understand what HIV means for you personally and communicate this to your HCP at the beginning and throughout your care journey

Provide adequate and correct information to your HCP according to your set care plan

Be aware of your role and responsibility within the care relationship and what aspects you have the right to ask or challenge

Make an audio recording or written notes of consultations if desired to help shared decision making

Post consultations

Access electronic health records and/or consultation summaries provided by your HCP to inform care decisions

Once an intervention has been identified, ask yourself and/or your HCP three key questions (e.g. What are the possibilities with the intervention?; What are the advantages and disadvantages of the intervention?; What does that intervention mean personally for me given my situation?)

HCPs: healthcare professionals; **PLHIV**: people/person living with HIV; **PROMs**: patient reported outcome measures; **QoL:** quality of life.

*This is a supplementary material based on the *Expert Opinion Piece* developed by the Moving Fourth Steering Committee entitled '*Moving Fourth – Feedback & Discuss: Improving patient-healthcare professional dialogue and shared decision making*'. As such, this material is meant to be used in conjunction with the content given within the full document. Please refer to the full document for more detail around the *Feedback & Discuss* step of the *Health Goals for Me* framework and the practical recommendations proposed by the Steering Committee to implement it in clinical practice.

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