

Chapter 7

Counseling and Education



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Interviewing / Counseling Format

The client interview is crucial to the case management process. It includes educating the client patient on her condition and reassuring her that competent health care workers will coordinate case management services for her, her infant(s), and her contacts ≤ 24 months of age. Contacts > 24 months of age will be referred to a provider for health care evaluation. In addition, the personal information that she shares with public health staff will be kept confidential, as allowable by law. When a case manager initially contacts the client and she makes it known that that is an inconvenient time for her, the case manager should inquire about a more convenient day or time to reach her to conduct the interview. The initial interview must include the following:

- Introduction of public health staff;
- Role of the public health staff and the public health department (DSHS HSR or LHD) that will be managing her case;
- Discussion with the client that her case managers are trained public health care professionals and have experience assisting persons with hepatitis B in understanding and managing their disease;
- Review the PHBPP and case management services provided by the program; and
- Discuss with the client that part of your job is to ensure that her medical information remains confidential, as permitted by law.

Patient Education, Assessment, and Counseling

The purpose for patient assessment and education is to establish rapport, get the client accustomed to talking comfortably with you, addressing the client's concerns so that they do not interfere with the rest of the process, gathering information that can be used in later sessions, and giving the client sufficient information to support disease intervention behaviors. Targeted medical information presented by the provider or program staff can reduce or eliminate inappropriate strategies the client may develop to handle the diagnosis. Additionally, during the interview, clients may reveal perceived barriers which can be used as motivation or benchmarks against inconsistencies identified later on in the interview / counseling session. To conduct the assessment, the following should be done:

- Ask the client what she knows about hepatitis B.
- Provide information and education to the client regarding the disease including:
 - Signs and symptoms of disease progression*
 - Preventing progression of liver disease
 - Avoid or limit alcohol consumption
 - Consult health care provider before beginning any medicine, including herbal remedies and over-the-counter (OTC) medications
 - Obtain vaccination against hepatitis A
 - Transmission*
 - Work and school exclusions not necessary
 - Testing and treatment

* More detailed information regarding transmission can be found in Chapter 2 of this manual.

- Ask the client about problems or questions regarding hepatitis B and offer clarification on misconceptions.
- Discuss the meaning of the client's test result(s), and the possible need for additional testing. Give her time to ask questions.
- Encourage the client to get involved with a support group to help her cope with her HBV infection.
- Explain that all household members ≤ 24 months of age will be tested for hepatitis B, vaccine will be given if there is no valid vaccine record and the contact is susceptible. In addition, these contacts will be case managed by the PHBPP until the vaccination series and PVST have been completed (may require two series of vaccine).
- All contacts > 24 months of age should be referred to providers for medical evaluation.

Program Compliance

It is important that the client understands the importance of the hepatitis B vaccine series and PVST in order to prevent infection of her infant(s). The case manager should reinforce messages expressed by the health care provider and verify that the patient understands and intends to comply with the program. The case manager should:

- Instruct the client to remind the delivery facility and care providers that she is a carrier of the HBV and that her infant(s) needs to receive HBIG and hepatitis B vaccine at birth.
- Educate the client regarding the importance for the newborn(s) and other children in the household ≤ 24 months of age to comply with timely completion of the hepatitis B vaccine series and subsequent PVST.
- Encourage the client to keep scheduled appointments and to notify the case manager when it is necessary to cancel or reschedule appointments.
- Encourage the client to contact the case manager when with any changes to contact information or care providers (infant or mother).

Patient Education

- A critical aspect of the PHBPP is patient education. It is extremely important that program staff explain to HBsAg-positive pregnant women and new mothers about the serious consequences of HBV infection (found in Chapter 2), the lifesaving importance of hepatitis B biologics (HBIG and hepatitis B vaccine) administered to their infants, and the necessity of PVST after completing the vaccine series.
- The DSHS Immunization Branch PHBPP has developed educational materials for HBsAg-positive women and their health care providers. Materials can be found at www.texasperinatalhepb.org.

Concluding the Interview

- Ask the client what questions or problems remain.
- Briefly review and reinforce all components of the PHBPP.
- Reinforce the need to communicate her HBsAg status to her contacts > 24 months of age and the need for a medical evaluation.

- Make arrangements for the next communication, if indicated.
- Provide culturally sensitive and easy to understand educational information on hepatitis B along with your contact information in case she has any further questions for you.

Tip: *In order to build a trusting relationship with the client, follow-up within a week of your initial interview to answer any questions or address any concerns she may have. Make note of this in your case management notes.*

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