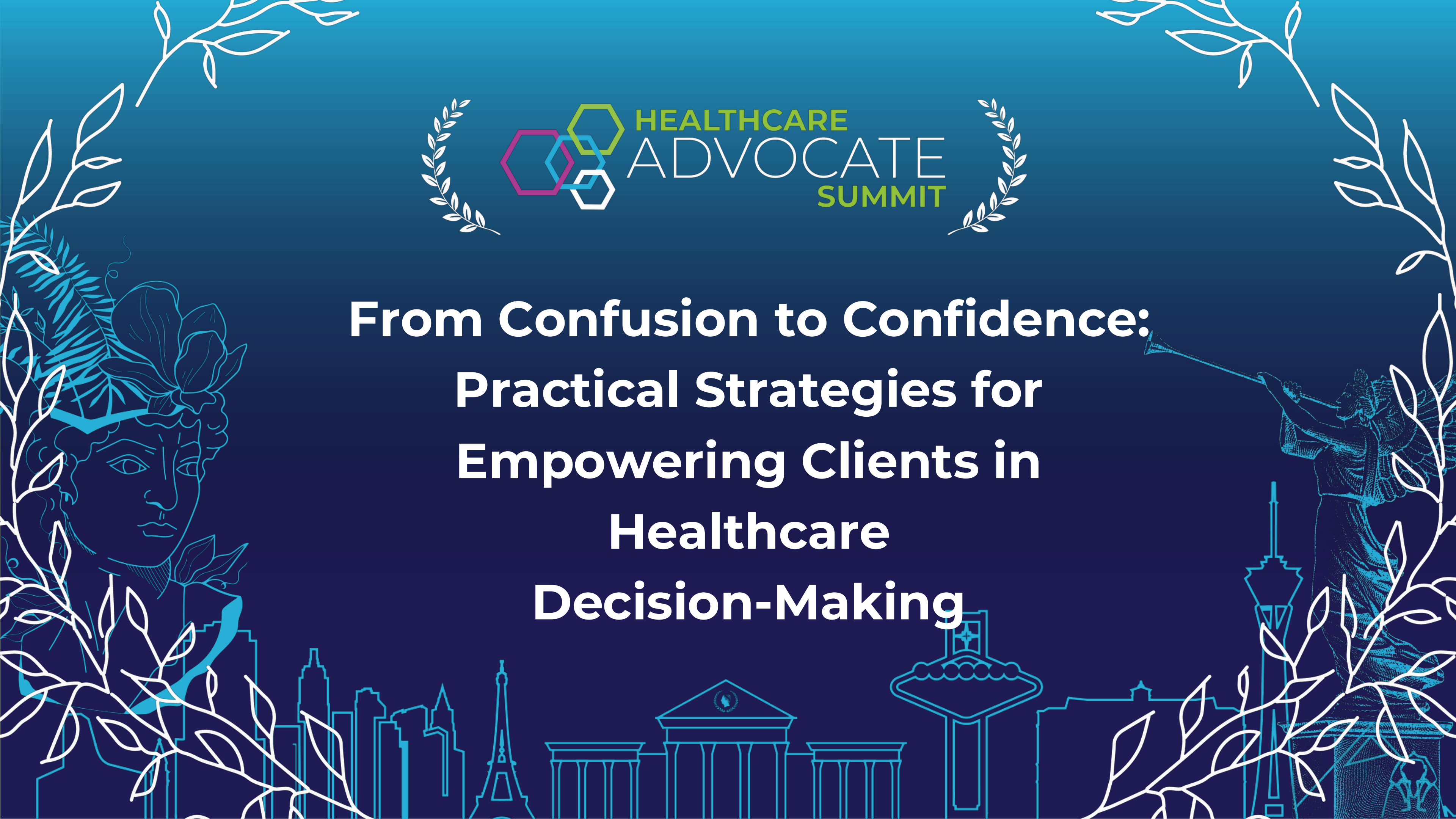




**From Confusion to Confidence:  
Practical Strategies for  
Empowering Clients in  
Healthcare  
Decision-Making**





**Equipping Clients to Navigate  
with Clarity, Communicate  
Effectively  
& Take Control of Their  
Healthcare Journey**



# Why This Matters



**Overloaded.**

**Unheard.**

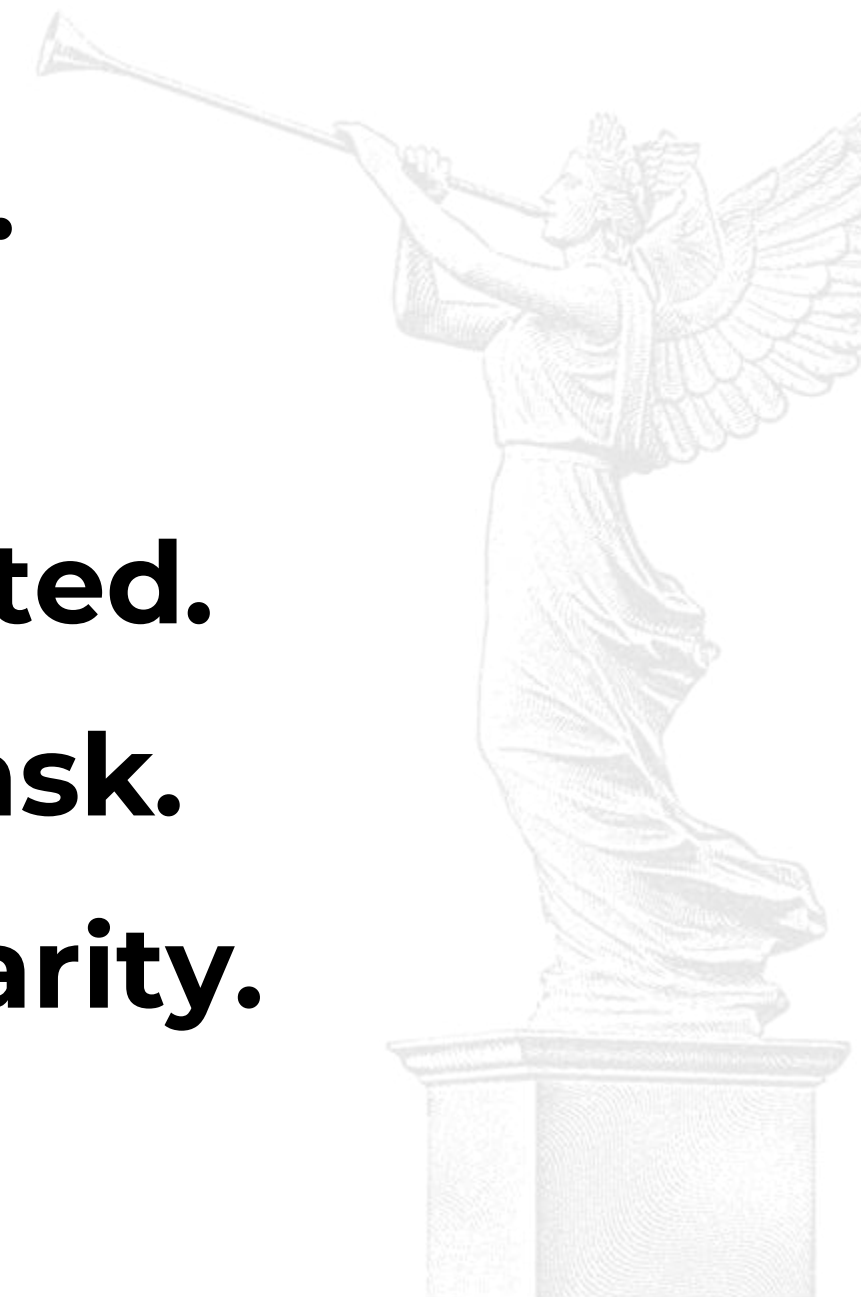
**Uncertain.**

**Confused.**

**Unsupported.**

**Afraid to ask.**

**Lack of clarity.**



# Barriers to Informed Decisions

## Rushed Appointments

- Patients often leave with unresolved questions.
- Patient fear or intimidation.

## Emotional Overload

- Our brains struggle to retain or weigh new information when when flooded with fear, grief or anxiety.
- Ineffective communication results in patients feeling unsupported and confused.

## Poor Communication

- Misunderstandings Between Patients and Providers
- Limited health literacy, Medical Jargon, Provider Bias



# Case Study: Delayed Diagnosis Due to Bias

Initial Visit

Multiple  
Missed  
Symptoms

Escalation & ER  
Admission

**“They said it was anxiety...over and over.  
But it wasn’t.”**



# What Was Missed

EKG:

NO

Troponin Lab  
Work:

NO

Family History  
Taken:

NO

Referral to  
Cardiology:

NO

Symptoms  
dismissed  
as  
“anxiety”



# The Turning Point

Before



After



# Red Flags of Bias in Healthcare

Skipping diagnostics



“Let’s wait and see.”



Symptoms attributed to weight, anxiety, or substance use without workup



“You’re too young for that.”



Patient not asked about goals or preferences



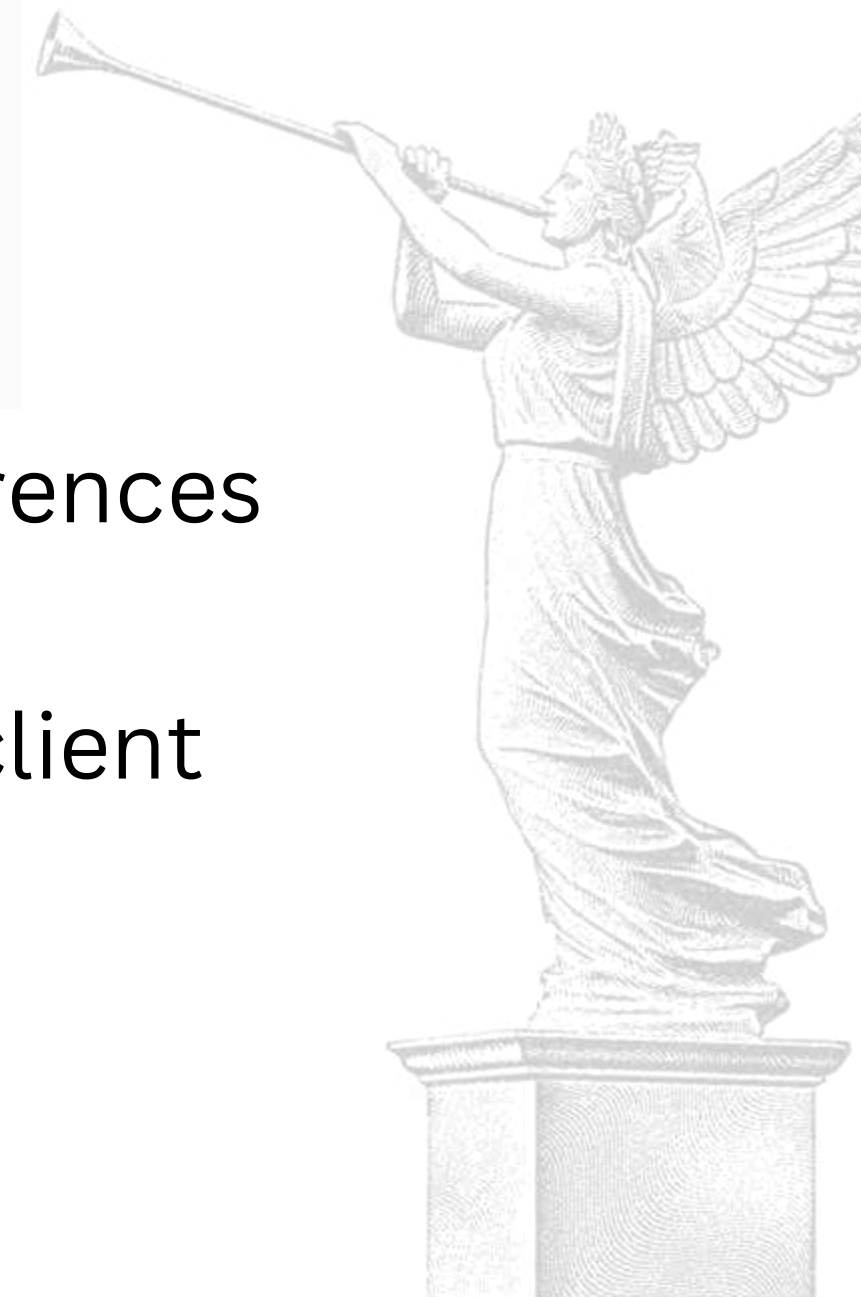
“It’s probably just stress.”



# SHARED DECISION-MAKING



- ➔ **Seek**      Seek your client's participation
- ➔ **Help**      Help your client explore options
- ➔ **Assess**      Assess your client's values and preferences
- ➔ **Reach**      Reach a decision together with your client
- ➔ **Evaluate**      Evaluate your client's decision



# Empowering Language Questions that Shift the Conversation



Effective advocacy leads to  
better patient outcomes

“What else do you think this  
could be?”

“Can you walk me through the  
options?”

“What are the risks if we wait?”

“What would you do if it was  
your family member?”

“I’d like to pause before  
deciding - can I follow up  
tomorrow?”



- **Checklist for medical visits**

**Before the visit. During the visit. After the visit.**

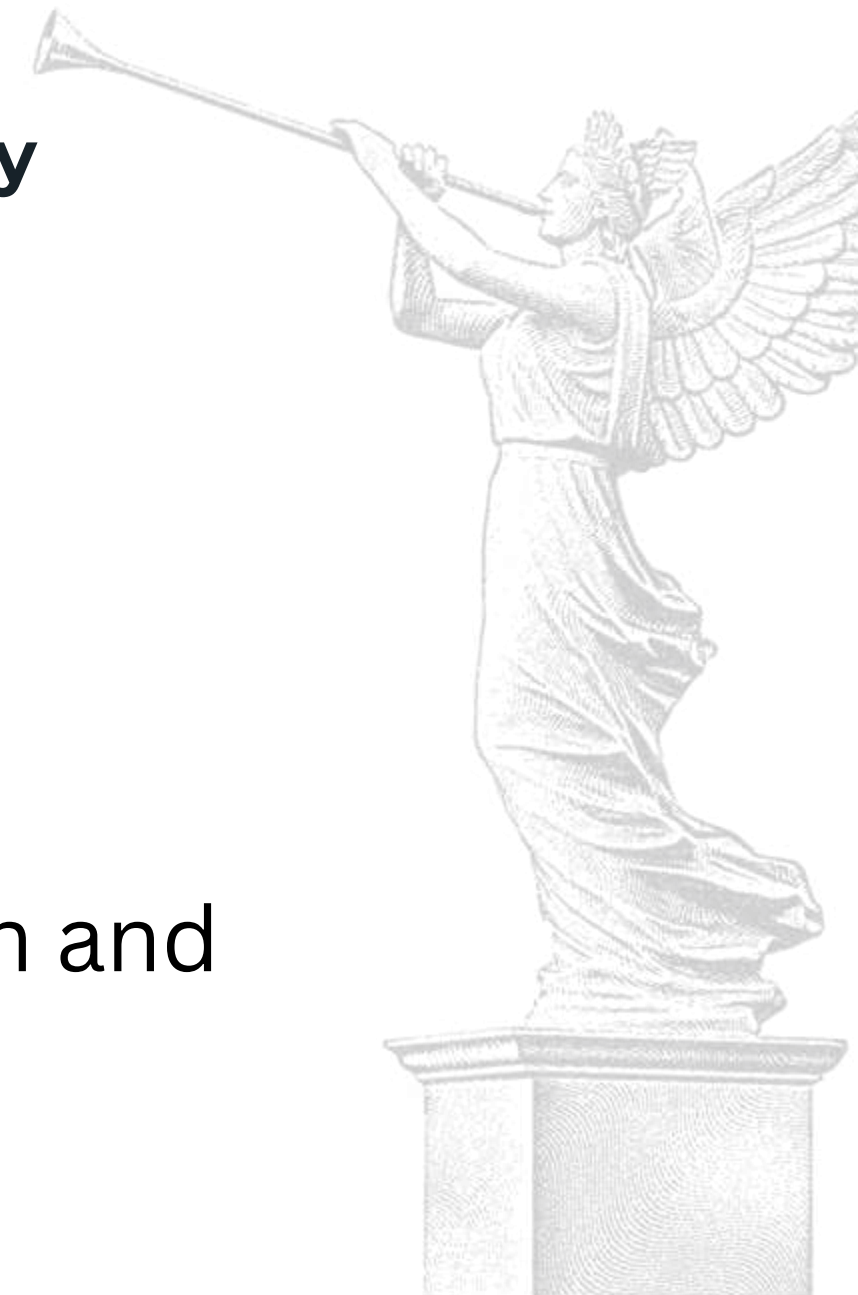
- **Values & Priorities Clarification Guide**

**My Priorities in Care; What I Need My Healthcare Team to Know; My Definition of Quality of Life & Final Note: Who Will Speak for Me?**

- **Decision Prep Worksheet**

**Available as downloadable handouts.**

“Empowered patients are the best advocates for their own health and well-being in today’s complex system.”



# Mini-Case Snapshot: What Advocacy Looks Like Across the System

## Case Type

## Snapshot Summary

## Takeaway

### Pain Bias

Client labeled as drug-seeking: Turned out to have a ruptured disc

Bias *delays* care - advocacy restores credibility

### Rehab Breakdown

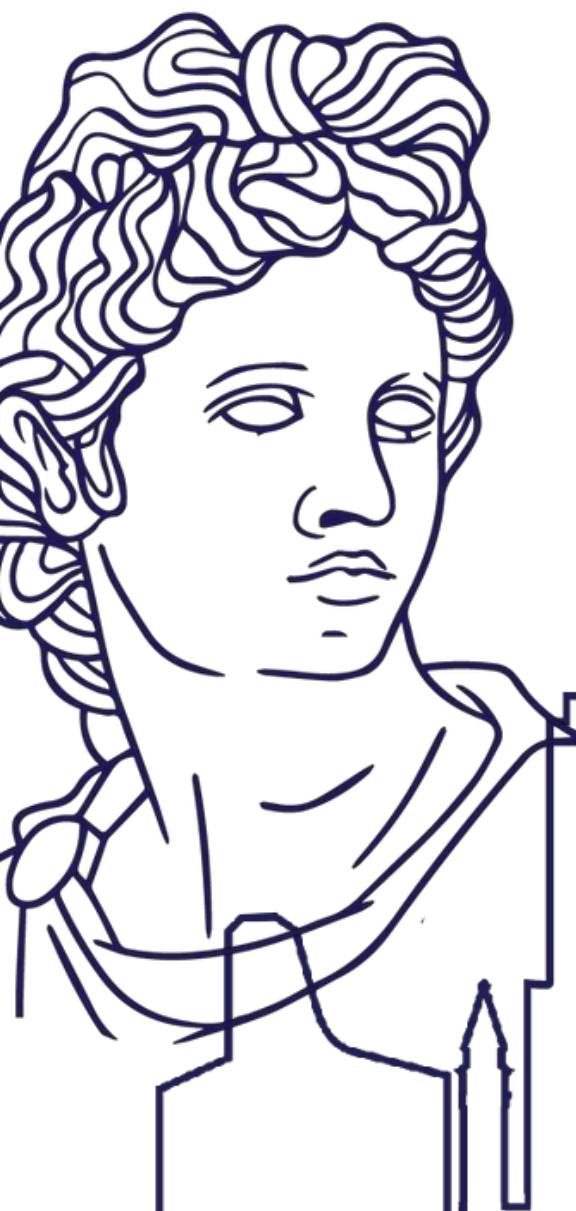
Stroke patient discharged too early

Advocacy ensures continuity & coordination

### Coverage Denial access

Client; Patient denied chemo drug due to insurer delay

Advocacy escalates & unlocks urgent



# What Advocacy Looks Like in Action

## Before Advocacy

- Rushed Discharge: Sent home with no understanding of follow-up, meds or with red flags.
- Overlooked Pain: Complaints of pain dismissed as exaggeration or anxiety.
- Mental Health Mislabeled: Symptoms of confusion labeled as depression or grief.
- Medication Denial: Staff assumed substance use, delayed treatment.
- Emergency Room Bias: Staff assumed substance use, delayed treatment.
- Unsafe Home Discharge: Patient planned to return home alone post-op with stairs and no support.

## After Advocacy

- Discharge delayed, home care arranged, client/patient educated, PCP notified of follow-up.
- Pain re-evaluated, appropriate diagnosis ordered, condition properly treated.
- Further testing revealed UTI + medication side effect; psychiatric consult canceled.
- Advocacy team appealed, coordinated with the prescriber, and secured an assistance program.
- Advocate clarified medical history, demand for full workup led to urgent diagnosis.
- Temporary rehab placement secured with therapy, followed by an in-home safety eval.



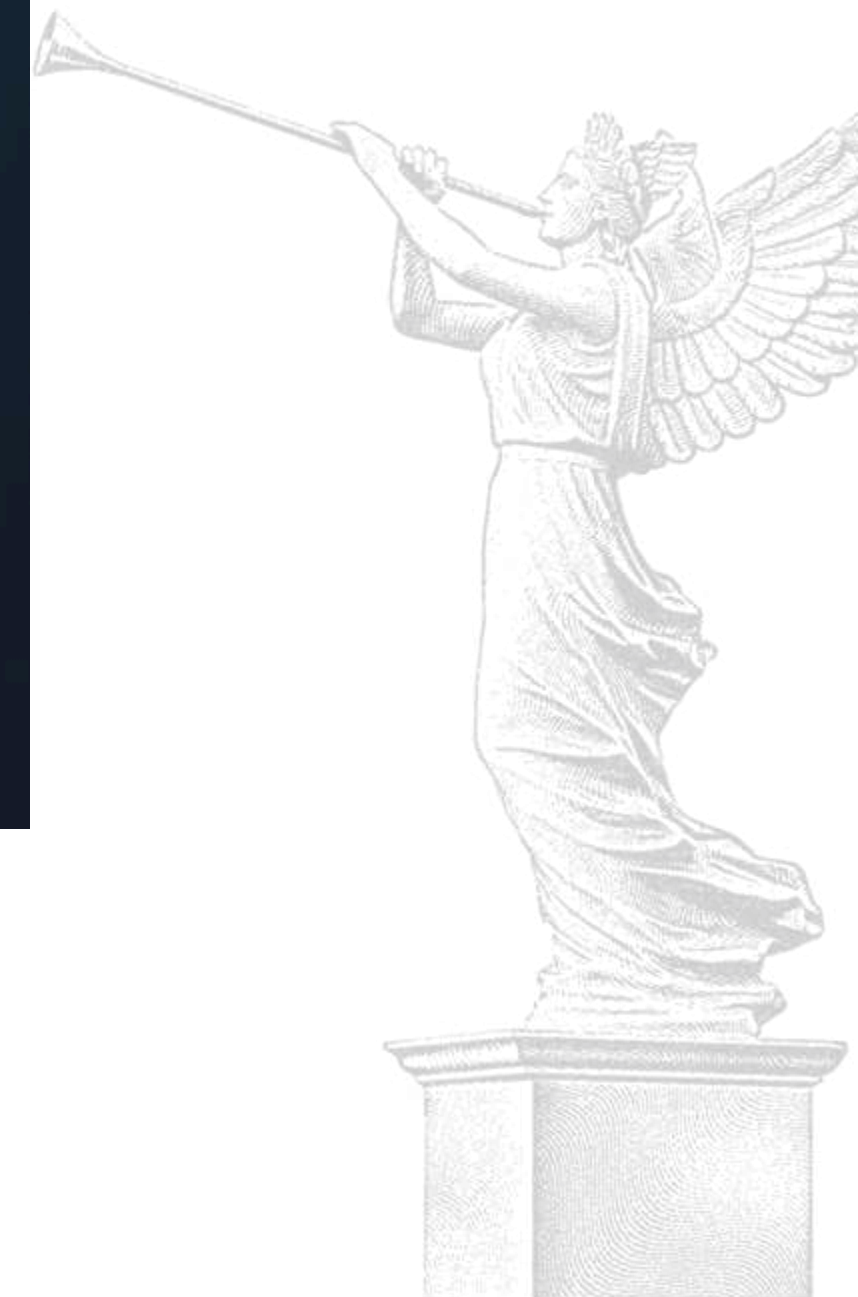
**Clarity**

**Empowered  
Decision-Making**

**Confidence**

**Trust**





**“Clarity is the first step to empowered healthcare decisions.” - CarolAnne Dube, MSc, BCPA**

**Thank You and Q&A**  
**CarolAnne Dube, MSc, BCPA**  
**Patient Advocates of Southwest FL, llc.**  
**(PAoSWFL)**  
**carolanne@patientadvocatesofswfl.com**  
**www.patientadvocatesofswfl.com**  
**LinkedIn: [Linkedin.com/in/carolannedube](https://www.linkedin.com/in/carolannedube)**

***When the system creates roadblocks,  
Advocacy builds the bridge.***

