

ONCE HIGH RISK PATIENT IS IDENTIFIED, HP TEAM SCHEDULES A "COUNSELING SESSION" WITH CARETAKER AND HOUSEHOLD, AT COMPOUND:

PRESENTS THE PROBLEM
(While reviewing basic concepts of lead poisoning)

FACILITATES A REFLEXIVE DIALOGUE ABOUT THE PROBLEM
(use of counseling approach)

WHY DO YOU THINK THIS IS HAPPENING?
(high BLL)

HOW CAN WE MAKE THIS BETTER?
(decrease BLL)

WHO NEEDS TO BE INVOLVED?

REVISE ACTION PLAN AND FINDINGS OF SESSION

POSSIBLE RISK FACTORS

PLAN F-UP

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graph TD; A[ONCE HIGH RISK PATIENT IS IDENTIFIED, HP TEAM SCHEDULES A "COUNSELING SESSION" WITH CARETAKER AND HOUSEHOLD, AT COMPOUND:] --> B[PRESENTS THE PROBLEM<br/>(While reviewing basic concepts of lead poisoning)]; B --> C[FACILITATES A REFLEXIVE DIALOGUE ABOUT THE PROBLEM<br/>(use of counseling approach)]; C --> D[WHY DO YOU THINK THIS IS HAPPENING?<br/>(high BLL)]; C --> E[HOW CAN WE MAKE THIS BETTER?<br/>(decrease BLL)]; C --> F[WHO NEEDS TO BE INVOLVED?]; C --> G[REVISE ACTION PLAN AND FINDINGS OF SESSION]; D --> H[POSSIBLE RISK FACTORS]; E --> H; F --> H; G --> H; H --> I[PLAN F-UP];
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Not to fatigue them, is important to be creative about the tools/approaches used on several sessions, change the facilitator from time to time as well as give some time for the family. Counseling sessions for positive feed-back are also important.

