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Your First Two Weeks With an Advocate: What to Expect

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KEY POINTS

- **Personalized start:** Your first two weeks are shaped around your goals, health concerns, and preferences rather than a fixed process.
- **Focused first call:** The initial conversation builds understanding, gathers your health history, and sets clear priorities for what to tackle first.
- **Action behind the scenes:** After you connect, your advocate begins coordinating care, addressing obstacles, and organizing next steps.
- **Foundation for long-term support:** The early phase establishes trust, direction, and a plan that can adapt as your needs change.

I've spent over a decade in healthcare, much of it working bedside in inpatient settings. While I cared deeply about my patients, I often felt that my ability to truly be a voice for them was lost in the institutional bureaucracy of hospital nursing. Time was limited, systems were rigid, and despite my best efforts, I wasn't always able to advocate in the way patients truly needed. I left many shifts feeling unfulfilled.

Patient advocacy feels different. Now, I'm able to really connect with patients—to slow down, listen to what's preventing them from reaching their goals, and speak up in a system that can feel overwhelming and impersonal. I can raise concerns, coordinate care, and make sure their voices are heard. I can finally drive meaningful change and see real results.

Healthcare advocacy means having an expert guide you through a complex healthcare system. Your advocate understands how the system works and is firmly in your corner—helping you avoid falling through the cracks and making sure your voice is heard.



What Is a Patient Advocate?

Patient advocates are professionals [who help you navigate your healthcare](#)—things like finding specialists, keeping providers coordinated, investigating care options, and managing insurance. Many come from clinical backgrounds such as nursing or social work, which gives advocates practical insight into how healthcare works and how to help patients.

Solace advocates are experts with an average of 16 years' experience in healthcare, from hospitals to home care.

What Happens During Your First Two Weeks Working With a Patient Advocate?

After you first sign up for Solace and your insurance is verified, [you speak with a Solace physician](#) who determines whether Solace is the right fit for your needs. From there, the physician pairs you with an advocate—like me—based on your specific goals, challenges, and preferences.

There's no rigid outline for what the first two weeks look like, because every patient is different. Some people come in with a single pressing issue, like a new diagnosis or sudden health concern, especially when they have questions about treatment options, second opinions, or what to do next. Others feel overwhelmed by years of fragmented care. Early on, we focus on understanding your situation and creating a path forward that feels manageable and aligned with what matters most to you.

Why the First Conversation With a Patient Advocate Matters

Much of the groundwork starts in our very first conversation, where trust is built. You'll have space to share your healthcare journey so far—what's worked, what hasn't, and where you feel stuck. I'll share my background and how I approach advocacy, and together we'll begin building a rapport.

Many patients come to Solace after years of dismissed symptoms or confusing treatment plans, and feeling frustrated by an overwhelming system full of gaps. My role is to make sure you don't fall through them. That first call helps me understand not just your medical needs, but how the system has impacted you as a person, and how I can best support you.



The First Patient Advocate Call: Laying the Foundation

Much of the early work starts here.

Typically, my first visit with a patient lasts about an hour. I introduce myself, explain my background and experience as a patient advocate, and walk through how advocacy works so you know exactly what to expect. I also set the tone for a professional, confidential, and patient-centered experience.

The most important part of that call is understanding you. My first question is always:

"I'd love to hear what brought you to Solace and what matters most to you right now in terms of your health?"

From there, it's about:

- **Sharing your story:** You'll talk through what's been happening, what's felt hardest, and what matters most right now.
- **Being fully heard:** I listen closely, ask follow-up questions, and focus on understanding your perspective before jumping to solutions.
- **Making sense of the situation:** Together, we review your care team, insurance concerns, open questions, and unresolved issues, including concerns about insurance plans or communication with your doctors.
- **Capturing the full picture:** I document key conditions, medications, allergies, recent hospitalizations, your primary care provider and specialists, and your overall satisfaction with care. We also talk about mental health needs, daily challenges, mobility risks, housing, finances, and social support, as well as whether you have a support network or caregivers involved in your care. All of these affect health.
- **Setting early priorities:** We decide what needs attention first and what can wait. I'll ask questions like: What are your goals? Where do you want to start? We also clarify how you prefer to communicate and outline next steps.

After the first call, I develop a care plan, turning your healthcare needs into clear goals and actionable tasks.

For example, a patient living with chronic pain might have this goal: "[navigate complex care coordination for chronic pain management.](#)"

Tasks may include:

- [Obtaining medical records](#) and comprehensive medication list from primary care provider
- Scheduling and tracking pain management appointments
- Coordinating reliable non-emergency medical transportation
- Facilitating referrals to physical therapy, home health services, and mental health support

Because I have a background as a registered nurse, I'm always clear about boundaries. I can support, explain, and inform—but I don't give medical advice or make medical decisions.

I hope choices always remain yours.

I typically wrap up the first call by making sure we're aligned and asking:

- Is there anything we didn't discuss today that feels important for me to know?
- What's the best way to contact you, and what days or times work best?
- Of everything we discussed, which goals feel most important to you right now?

What a Patient Advocate Does After Your First Call

The work continues between conversations.

After the first call, I don't wait for the next scheduled check-in to begin. I start working through what we discussed, identifying what needs attention first and where delays or confusion could slow progress. Much of my work happens behind the scenes.

- **Following up on key threads:** I start addressing obstacles, clarifying details, and coordinating next steps behind the scenes.
- **Staying connected:** Typically, I meet with patients weekly, with follow-ups in between as needed.
- **Reducing extra work:** Solace advocates have a "no homework" philosophy. You should never have to research specialists, decode medical jargon, or chase down answers on your own—unless you want to. If there's confusion about a treatment, eligibility for a clinical trial, dissatisfaction with a provider, or uncertainty about next steps, I step in to take that burden off you.
- **Explaining what's unclear:** I help break down medical language, processes, and decisions as they come up so you can make informed choices with confidence.

What often surprises patients is how much forward motion can happen between calls. Advocacy isn't limited to scheduled conversations.



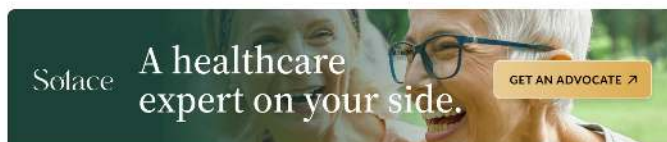
How Ongoing Check-Ins Support Your Care Plan

You'll stay in touch and usually connect at least weekly early on.

- **Staying aligned:** Follow-up conversations build on our initial plan as new information comes in.
- **Using the care plan as a guide:** I think of the care plan as our "north star," helping us stay focused on your goals—even as things evolve.
- **Adjusting as needed:** Healthcare journeys are rarely linear. Goals change, and we adapt without starting over.

I once worked with a patient who initially came to Solace for chronic pain. Once we successfully coordinated care with a new pain specialist and their pain was managed, new challenges surfaced—specifically financial barriers to affording medications.

Advocacy didn't stop once pain was managed. We shifted focus to [securing financial support and exploring patient assistance programs](#), because [social and financial factors affect every aspect of health](#).



What to Expect in the Early Weeks With a Patient Advocate

- **What it is:** Foundational, responsive, and shaped entirely by your real needs.

- **What it's not:** A rigid timeline or a promise that everything will be resolved in two weeks.
- **Boundaries:** Your advocate doesn't replace your care team or make medical decisions—but we do navigate systems, communicate across providers, and advocate for your needs.


Healthcare advocates practice with compassion and a commitment to promoting patient safety, autonomy, and rights. We guide and support you in decision-making while honoring your values and beliefs.

We always work within our scope and connect you with additional expertise when needed, so you're receiving the best possible support.

Looking Ahead

The first two weeks establish trust and direction, not a finish line. Advocacy is built through ongoing conversation, follow-through, and partnership. It's about having someone who understands the system, sees the whole picture, and stays in your corner over time.

Our mission is to empower patients, improve health outcomes, and help restore what healthcare should feel like—human, supportive, and centered on you. If you're curious what this kind of support could look like for you, the next step is to book an [intake call with a Solace physician](#).



A healthcare expert on your side.

[Get An Advocate ↗](#)

Frequently Asked Questions About Working With a Patient Advocate

What happens before I'm matched with an advocate?

After you sign up for Solace and your insurance is verified, you speak with a physician to determine whether Solace is the right fit for your needs. If it is, the physician helps pair you with an advocate based on your specific goals, challenges, and preferences.

What is the first call with my advocate like?

The first call typically lasts about an hour. Your advocate will introduce themselves, explain their background and how advocacy works, and set expectations for a professional and confidential experience. Most of the call focuses on understanding you. You'll share what brought you to Solace, what's felt hardest in your healthcare journey, and what matters most right now. Together, you'll review your care team, insurance concerns, open questions, and unresolved issues. Your advocate will also gather important details such as your medical conditions, medications, allergies, recent hospitalizations, providers, and overall satisfaction with care, along with factors like mental health needs, daily challenges, mobility risks, housing, finances, and social support.

What is a care plan, and how is it created?

After the first call, your advocate develops a care plan that turns your healthcare needs into clear goals and actionable tasks. For example, if you're living with chronic pain, a goal might be navigating complex care coordination. Tasks could include obtaining medical records, scheduling appointments, coordinating transportation, and facilitating referrals. The care plan helps organize next steps and keeps your work together focused and aligned with your priorities.

What does my advocate do between calls?

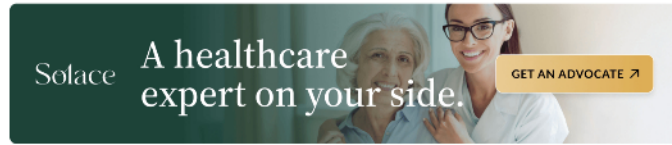
Advocacy continues between conversations. Your advocate follows up on obstacles, clarifies details, and coordinates next steps behind the scenes. You'll typically connect weekly early on, with follow-ups in between as needed. Advocates take on much of the logistical work so you don't have to research specialists or decode medical language on your own unless you want to. They also help explain treatments, processes, and decisions so you can make informed choices.

What should I expect during the first two weeks—and what shouldn't I?

The first two weeks are about building trust, understanding your situation, and setting priorities. The process is responsive and shaped by your real needs, not a rigid timeline. Your advocate does not replace your care team or make medical decisions. Instead, they

help navigate systems, communicate across providers, and advocate for your needs while honoring your values and preferences. The goal of this early phase is to establish direction and partnership, not to resolve everything immediately.

This article is for informational purposes only and does not replace medical advice. Information is subject to change. For medical guidance, consult your healthcare provider.



Charli Seibert, Lead Advocate, MSN, RN, CNL

Charli Seibert, MSN, RN, CNL is a Lead Advocate at Solace Health with nearly a decade of nursing experience and a deep commitment to giving patients a voice. Charli earned a BA in Psychology from UCLA and an MSN through a Clinical Nurse Leader program at the University of San Francisco. Her clinical background includes trauma care at Zuckerberg San Francisco General Hospital, cardiac care at John Muir Medical Center, as well as experience in float pool nursing and home health case management.

Through her work, Charli has witnessed firsthand how often patients—particularly those from underserved communities—struggle to access the care they need. These experiences fuel her passion for patient advocacy and her dedication to improving patient outcomes. When she's not helping patients navigate the healthcare system, Charli enjoys spending time outdoors with her husband and daughter, hiking with her two pitbull mixes, traveling, listening to live music, and curating her vinyl record collection.



Solace

Solace puts an advocate in your corner—someone who's spent years in healthcare, knows the system, and takes on the toughest parts of your care. Don't do this alone.



Eligibility varies by plan. Advocates do not provide medical or legal advice or services.

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