We Can Do THIS: Difficult Conversations

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OBJECTIVES

- Describe communication processes and challenges in the setting of serious illness
- Define important elements to ongoing communication and factors that influence communication with participants and families
- Identify techniques for communicating difficult news and discussing goals of care with participants and families
Case Study

Yours or mine?
Case Study #1- Jerri

- Jerri is 80 years old. She lives alone in a Senior Apartment building. She has one daughter, Sally, who lives near by. Sally is 55, married, has 2 adult daughters, works full time as a project manager.

- Jerri’s medical history includes advancing Alzheimer disease, CHF, CVA w/facial droop, anxiety & depression, osteoarthritis of knees, CKD II, IBS w/diarrhea, R Torn rotator cuff, R knee torn ACL

- Interests: crossword puzzles, word search, BINGO
Hip Fracture
Goals of Communication

- Convey Respect
  How?
- Convey Genuine Care
  How?
- Share & Encourage Hope
  How?
Factors Influencing Communication

- Cultural – curious questions
- Verbal & Non-Verbal skills – words, body language, tone (60/30/10)
- Environment for Conversations - quiet
- Use of Open Ended Questions, Reflective Statements, Intuitive Knowledge, Empathic Statements
- Previous Experience – The Good, the Bad & the Ugly
Factors Influencing Communication

- Power of Deep Listening
- Recognize Emotions
- Practitioner Self Assessment of Bias & Fears
Challenges/Barriers to Communication

- Assuming the health care team has the right answers
- Not taking time to understand family values and concerns – “what is important to you?” “Who is?”
- Speaking in medical terms
- Lack of awareness, sensitivity for cultural, racial differences
- Intense emotional outbursts from participant/family
Sensitive Delivery of Difficult News - Three Techniques

1. ASK – TELL – ASK
   - Ask – What have you been told?
   - Tell – This is what is happening.
   - Ask – What do you know now?
Sensitive Delivery of Difficult News - Three Techniques

NURSE

- N- Naming,
- U- Understanding,
- R- Respecting,
- S- Supporting,
- E- Exploring
Sensitive Delivery of Difficult News - Three Techniques

“I wish…” “I’m worried…”

- I wish… (this were different) (this wasn’t so) (this stroke never happened) (your mother would have a miracle recovery)
- I’m worried… (about how to prepare for what may happen next) (that you and your family may not be prepared for the caregiving now needed) (because your kidneys are not working as well as they should)
Bonus Technique

Motivational Interviewing

Open Ended Questions
Affirmations
Reflections
Summaries
Identifying Goals of Care

- Necessary during transition of care or focus of care
- Ascertain ALL stakeholders are present (particularly the ones that you would rather avoid!)
- Set Framework via structured Family Meeting
- Assess & acknowledge understanding of current condition
Family Meeting Elements

- Pre-meeting – Review medical options/recommendations/family dynamics
- Introduction & agenda review
- Ask-Tell-Ask
- Empathize
- Highlight participant's voice & wishes in their vernacular
- Review next steps together
Family Meeting

Reflect post meeting – What did we learn???
What went well???
& Not so well?
Follow up?
“DETERMINED PEOPLE WORKING TOGETHER CAN DO ANYTHING.”
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We Can Do THIS: Difficult Conversations - author

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Ashton has experience in hospice and end-of-life care which brought her to the role of Clinical Social Worker at Elderhaus PACE five years ago. In her role, she not only assists the team with difficult communication with participants and families but also provides behavioral health services to those enrolled with Elderhaus PACE.