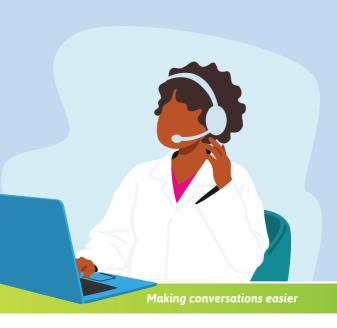


# **End-of-Life Conversations**

GIVING SAD NEWS OF DETERIORATION OR DEATH OVER THE PHONE

#### A leaflet for healthcare staff



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# Initiating the conversation

# **Preparation**

#### Communication skills

- Prepare yourself
- Prepare the environment
- Prepare your information

#### Prepare yourself

- Make sure you have completed any outstanding tasks.
- In a busy, stressful healthcare setting it is not easy, but do what you can to be in the right frame of mind for the conversation.
- Find a quiet room and prepare yourself psychologically.
- If possible, rehearse the conversation before speaking to the relative/loved one (perhaps with someone who is skilled in sensitive conversations).



# Initiating the conversation

#### Prepare the environment

- Avoid interruptions move to quiet area where you can have a conversation with minimal disruption and without being overheard by others.
- If possible wear headphones with a microphone to minimise background noise.

#### Prepare your information

- Check your information the identity of the patient, the identity of the relative/loved one and what has happened in the past 24-hours or so.
- Are there any records that you need to read before the conversation?
- See if the notes or a colleague can tell you a little bit more about the person you are calling, including whether or not they are likely to be expecting this news.



# Initiating the conversation

Prepare your information (continued)

- If possible, find out whether someone
  was with the patient when they died, and
  if so who (during the pandemic this
  emerged as particularly important for
  family/loved ones to hear).
- Besides news of the death, are there other things you need to tell and/or ask?
- Know the future arrangements you'll need to cover towards the end of the call.
- Prepare a list of points to cover, and the outcomes that you would like to achieve from the call. This will help to maintain momentum, and give you the basis for summarising the content of your conversation at the end of the call.

#### **TIP**

- Know that you are doing this from a place of compassion.
- Know that you are doing this as a member of a team, and that you are doing your best in very difficult circumstances.



# Initiating the conversation

# **Establishing initial rapport**

Communication skills

Warm greeting
Introduce yourself
Say who you are calling about
Check who you are talking to and their
relationship to the patient

#### Warm greeting

· Greet the person with a warm 'hello'.

Introduce yourself (name and role)

Hello, my name is Dr Niamh Ruddle. I am one of the emergency department consultants in \_\_\_\_ hospital.

Say who you are calling about

I am calling about Brendan Murray.



# Initiating the conversation

Check who you are talking to and their relationship to the patient

 Ask if it is ok and safe to talk (e.g. are they working or driving?)

Would you mind if I check who I am talking with please?





# Initiating the conversation

### Identifying the reasons for the conversation

#### Communication skills

Give a subtle warning shot



- Ask if they are alone, is someone else around to support them.
- This implies some difficult news to come, without spelling it out bluntly.



# **Providing information and planning**

# Provide the right amount and type of information

#### Communication skills

- Signpost
- Chunk and check

#### Signpost

- Signpost what is coming with a compassionate preface. Avoid calling it 'bad news'.
- Briefly tell the story, culminating in the news.

I know you already knew that Brendan was very sick with \_\_\_\_. In the last few hours, things got worse. I am so sorry, I am calling with sad news.





# **Providing information and planning**

#### **Chunk and Check**

- Tell clearly, with compassion, that the person has died
- Talk about when the person died
- Briefly how they died
- That the person was not distressed or in pain (if that is true)
- Who was with them (if there was someone with them when they died)

#### TIP

If the person you are talking to asks if the person has died before you have been able to more gradually signpost and build towards telling them, then answer 'yes', with compassion, and then follow with the summary of what happened.



# Providing information and planning

# Aiding recall and understanding

### **Communication skills**

- Use easy to understand language and avoid specialist terms unless the person you are talking with is familiar with them
- Use silence
- Keep a calm, slow pace
- Repeat
- Check understanding

Use easy to understand language and avoid specialist terms

- Be direct and compassionate.
- Use non-medical words unless the person you are talking to is familiar with medical terminology.
- Tell the relative/loved one that the person has 'died' or possibly 'passed away'. Be careful to ensure that you are clearly understood while still communicating with sensitivity.

I am very sorry

Brendan died a short time ago.



# **Providing information and planning**

#### Use silence

 If the person is crying, allow silence and perhaps say something like,

Keep a calm, slow pace

Take your time.

 Pause often to give the person time to process the information.

#### Repeat and check understanding

 You may need to repeat things, keeping them as clear and simple as possible, and checking as you go on to see whether the person is following and if it is ok to carry on.



# Providing information and planning

# Incorporating their perspective

#### Communication skills

- Watch out for and respond to verbal and nonverbal cues
- Allow time and opportunity for the person to contribute

#### Cues

 Pause and listen for verbal and Non-verbal responses, such as sighing, or crying.

This is very difficult news to hear.

#### Time

 Pause and allow time for the person to contribute.

Please take your time, this is a lot to take in.

#### **Pause**

 Pause often to give the person time to process the information.



# Providing information and planning

#### **TIP**

Most deaths are 'peaceful' – and this can be a comfort. Also relatives like to know that that their loved ones were not alone when they died. If, for example, nursing staff were with the patient, then tell the relatives this.

It was peaceful, he became weaker during the night and his breathing stopped just after 4 am. I was sitting with him.





# Closing the conversation

# Ensuring appropriate point of closure

#### Communication skills

- Summarise the conversation (briefly)
- Check with the person

#### **Summarise**

· Briefly summarise what was discussed.

#### Check

- Moving towards the end of the conversation with 'Screening'...
- Ensure the person has a contact name and direct line number for you or for one of your colleagues.

Are there things you would like to ask, that I have not said, or explained enough?

My direct line is 087 123 4567



# Closing the conversation

# Forward planning

#### Communication skills

- Help them come into the here and now
- Outline next step

Help them come into the here and now

Who can support you after this call?

Can I call someone for you?





# Closing the conversation

#### **Outline next steps**

- Agree on a time for a follow-up meeting: to discuss information like the death certificate, the person's belongings and so on. This is particularly important if a post-mortem is required, as this is ideally discussed face-to-face.
- Encourage the person to use available resources (clergy, social work and their own support network of friends, family and neighbours) and to attend to their own well-being.
- Emphasise support that they are not alone.

This is very hard on you. You may not be thinking about yourself but you need to take care of yourself as well.

I am very sorry to call you with this news Mary, I will see you soon. Goodbye.



# Closing the conversation

So just to remind you my name is Dr Niamh Ruddle, and I am one of the emergency department consultants working here in \_\_\_ hospital.

After this call, you are going to call your sister to stay with the children.

Then you are driving to the hospital.

I will be here when you arrive at the hospital and you will be parking close to the front door (security will watch out for you and show you where to park).

I will take you to see Brendan and when you are ready, we can talk about what will happen next.



#### **TIP**

Write the conversation up straight away, the next person talking to the family member will need to build on the conversation you have just finished. Take a break, speak with someone in your organisation delegated to listen. Regular supervision sessions help you debrief and reflect.

### **Building rapport**

### **Dealing with emotions**

Demonstrating empathy

Communication skills

Use of silence

G.I.V.E.		
Wher	n you notice emotion – G.I.V.E.	
G.I.V.E. to connect, understand, and support		
G	Get that it's emotion	
0	Identify the emotion	
V	Validate by acknowledging feelings	
E	Explore to better understand the emotion	

Picking up on verbal and nonverbal cues

# **Building rapport**

#### Get that it is emotion

- · Pause when you notice emotion.
- Don't answer feelings with facts.
- We do not need to suppress or resolve emotion, what we can do is provide support and understanding.
- Offer connection, not advice.

#### Identify the emotion

You seem quiet. Do you need a break?

You sound worried.

#### **Validate**

 Acknowledge and validate how people feel, this builds connection and trust and makes emotion less overwhelming so they can participate.

This is very difficult to hear.

It's overwhelming – everything you have been through.

Sounds like the last year has been very difficult for you.



# **Building rapport**

#### **Explore**

 Explore emotions to better understand values and concerns.

How are you feeling - would you like to come in now or wait until the morning?



#### **TIP**

Keep an eye (and ear) out for signs that the person is feeling overwhelmed and unable to cope with what is being said. Attend to and acknowledge the person's emotions throughout the conversation.



# Providing structure

# Making organisation overt

# Communication skills

- Summarising
- Signposting

#### Summary

 Summaries are useful if you've given quite a bit of information and there are important details that the person will have to remember. By doing a summary, you're pooling everything together for the person and they are more likely to remember what you summarise.

So, we've talked quite a bit and I'd like to recap a few things just so that we're both as clear as can be. Is that okay?

As I understand it...

I'd like to pause a minute and see if I've understood you correctly...

Would you mind if I take a moment to check that I've got it right...

Is it ok if we recap...



# **Providing structure**

#### Signpost

 Signposting is a time when you step out of being immersed in the ongoing conversation and instead you provide information about what is going on, or is going to go on in the conversation.

> Now the most important thing that I hope/would like you to remember is...

#### TIP

Summarising structures the conversation and helps to use time constructively for both parties. It reduces uncertainty for both the person and the healthcare practitioner and helps to build the relationship.

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This Skills Card is the work of the National Healthcare Communication Programme.