



PATIENT SAFETY TOOL BOX TALKS®

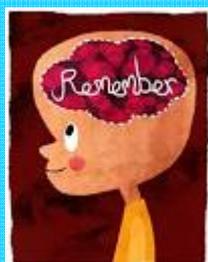
EFFECTIVE CARE & SUPPORT

END OF LIFE CARE DEALING WITH BAD NEWS



v1.0

Receiving bad news can be traumatic. Don't make it worse by the way you give the news.



Key Messages

- Prepare yourself: the space, the person
- Privacy
- Time
- Deal with concerns before details
- Check understanding
- Plan
- Never deliver bad news alone

What is Bad News?

This might seem like obvious question, but the answer depends on the recipient of the news: what is bad news to one person (for example, a diagnosis of a life-limiting condition like diabetes) might be perceived as good news to another ('thank God it's not worse!').

Bad News is "any information which adversely and seriously affects an individual's view of his or her future." Robert Buckman

Five Steps to Breaking Bad News



1. Prepare yourself

- Set time aside (avoid the "on-the-fly" conversation)
- Find a quiet private room where you can avoid interruptions (from people as well as from phones or beeps).
- Never give information in inappropriate places such as corridors
- Know all the facts: make sure you have the right patient, confirm test results
- Have options or treatment plans prepared to discuss with the patient as appropriate
- Have tissues handy (discreetly)
- If you can only set aside a few minutes, make sure there are other staff with you who can stay longer with the patient
- If an interpreter is required, organise in advance and avoid delegating interpretation to a relative

2. Prepare the Patient

- Find out what the patient knows and wants. Do they want all the details? Would they like their family/friends present? Do they have any particular cultural/religious beliefs/needs?
- Sit down at the patient's level (at a 45 degree angle) and introduce yourself and your colleagues

3. Breaking the News

- Give a "warning shot" and pause
- Sample phrase: "your test results are back and, unfortunately, the news isn't as good as we'd like" or "it looks like your disease might have moved to another stage..."
- Carefully break the news gently, slowly and clearly
- Avoid jargon and euphemisms - use simple language
- Chunk: Acknowledge the patient's emotional reactions
- Don't overload the patient with information
- If necessary, repeat the information
- Before closing, ask the person to tell you what they have understood about what you are saying-you can correct any misunderstanding, and check-break news into chunks and check understanding of each chunk



"Break bad news well, and you will never be forgotten. Break it badly and You will always be remembered"

TIPS AND HANDY PHRASES

Start by finding out what the person already knows – there's a good chance they will already have some insight into their wellness/illness, and you can build on this. For example, "how have you been since we last spoke?" or "what's your sense of what might be wrong with you?" or "what do you already know about your illness?"

Give a warning shot – it allows the person to prepare themselves for what is coming next. For example, "I wish I had better news to give you today" or "I'm sorry, but the news isn't as good as we'd hoped it might be".

Think of breaking bad news as a process, not a single event. It may take the person a while and several inputs before the person is able to fully grasp all that you are saying, especially if it's complex (details of diagnosis or of treatment).

Check with the person how much they want to know – they have a right to know and to NOT know.

Don't be 'hope's executioner' – leave the person with some sense of what can be done to help them deal with whatever they have to deal with.



4. Supporting the Patient

- Deal with concerns before details; facts may not be remembered but the way they were communicated will be. Allow for silence and tears and avoid false reassurances
- The person might not be able to take everything in; be prepared to repeat as necessary using supportive written information/diagrams if appropriate
- Find out if they would like more information

5. Plan and Follow up

- Give the patient/family (with permission) a clear plan as to what will happen next
- Have options or treatment plans prepared to discuss with the patient as appropriate and based on patient's response to the news
- Avoid phrases like "there's nothing we can do". Sample phrase: "There isn't any specific treatment to make your illness go away, but there is a lot we can offer to help you cope".
- Offer to meet relatives and/or other staff with the patient
- Seek the patient's permission before giving information to others
- Provide a contact name and number to the patient if they have further questions or require support
- Find out if there is anyone in particular the patient would like to talk to (e.g. pastoral care)
- Share information with the healthcare team including the GP/PHN and document: a) details of the discussion (using the same language you used with the patient) and b) follow up plan in the patient's notes
- Check back with the patient later in the day when they have had a chance to process the news

BREAKING BAD NEWS OVER THE PHONE

1. Find a quiet room and mentally prepare before you start dialling
2. Confirm the relative's identity and their relationship to the patient. Tell them who you are and what your role is 
3. Suggest that the relative sits down
4. Give a warning shot and pause before breaking the news gently, using simple language. Sample phrase: "I'm afraid I'm calling with bad news"
5. If there is someone with them, offer to speak to this other person too and/or offer to telephone another family member or friend. When speaking to the next person repeat exactly what you said to the first person to confirm the message
6. Stay on the phone until the relative indicates that they are ready to end the conversation
7. Ensure the relative has a contact name and direct line number for you or for one of your colleagues
8. Contact the hospital reception/security desk and inform them that family members will be arriving. If possible, make it easier for the family by arranging for parking near the entrance to the hospital. Consider sending a taxi to collect the relative if appropriate
9. Ensure a member of staff greets the family on arrival at the hospital and ward. Document and liaise with the multidisciplinary team

Ref: HFH Competence and Compassion End of Life Care Map