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# Regional Palliative Care Services

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## Contacts:

Northeast  
Nurse Consultation Line  
250-795-6134

Northern Interior  
Nurse Consultation Line  
250-565-7318

Pharmacist Lead  
250-649-7599

Northwest  
Nurse Consultation Line  
250-631-4191

## Difficult Conversations - Serious Illness

By Tianna Deck, 4th Year  
Nursing Student, UNBC

It is not uncommon for health professionals to feel unprepared or uncomfortable with being involved in serious illness conversations, let alone initiating one. The question becomes, "How can we best prepare as health care professionals for clients with serious illnesses and ensure that the end-of-life care that we provide is delivered in a compassionate way that reflects everyone's unique wishes and goals?"

Understanding the importance of communication (verbal and non-verbal) between health professionals and clients during end-of-life care is crucial in enabling effective management, helping the client achieve their care goals, breaking down trust issues, and building a more comforting environment. Some issues related to serious illness conversations can be due to poor communication, such as clients feeling as though they are not being heard, under-

stood, or feeling helpless. Health care professionals that work to improve their communication skills in this area instead of avoiding it continue to give themselves effective tools and platforms to improve living conditions, opportunities, and health situations for clients and their families, and mitigate many of these issues.

Being aware of the role you have as a health care professional is key; employing empathy, meaningful dialogue, attention, professionalism and preparedness are just some of the many skills that health workers need to develop. From this, the case for advocating for improving communication skills and implementing a change in education is compelling. The people in the last stages of life whose suffering is often immeasurable, will significantly benefit from competent and caring health care professionals from all disciplines.

End of life, or serious illness conversations with our clients

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and their families can be difficult to initiate or be present in. Conversely, these are some of the most important discussions that we can be a part of in our health care professions. Often, most of us have had little to no training on how to have difficult conversations. This is unfortunate as it can lead to frustration, regret, missed opportunities, missed information, and inadequate levels of care being provided to these clients. The BC provincial health authority has created a Serious Illness Conversation Guide. It highlights 7 key steps to having these conversations. Keep in mind each situation is unique and this is meant to be a guide and not a yes or no questionnaire.

### How do you go about difficult conversations? What is the process?

#### Serious Illness Conversation Guide (British Columbia Center for Palliative Care, 2017)

##### Conversation Flow

1. Set up the conversation	5. Close the conversation
2. Assess understanding and information preferences	6. Document your conversation
3. Share prognosis	7. Communicate with key clinicians
4. Explore key topics	

To see this chart in full detail, please see September's Palliative Care Hot Tip at: [https://www.northernhealth.ca/sites/northern\\_health/files/health-professionals/palliative-care/documents/hot-tip-approach-to-end-of-life-care.pdf](https://www.northernhealth.ca/sites/northern_health/files/health-professionals/palliative-care/documents/hot-tip-approach-to-end-of-life-care.pdf)

A key part of having difficult conversations with a client who is nearing the end of their life is reframing hope for the individual when a cure is no longer a possibility. Additionally, using an approach to these situations that highlights maintaining a person's dignity is crucial for success and for their overall well-being.

### How do we preserve dignity in these conversations?

#### ABCDs of Dignity Conserving Care (Chochinoy, 2007):

<b><u>ATTITUDE</u></b>	<ul style="list-style-type: none"> <li>• “How would you feel if you were in this person’s shoes?”</li> <li>• “What is leading me to draw these conclusions in this conversation?”</li> <li>• “Am I aware of my attitude towards him or her in this conversation?”</li> <li>• “Could my attitudes toward this person be based on something due to my own experiences, anxieties, fears?”</li> </ul>
<b><u>BEHAVIOUR</u></b>	<ul style="list-style-type: none"> <li>• Paying attending to tone of voice.</li> <li>• Looking at the person.</li> <li>• Going the extra mile (Showing you care).</li> </ul>
<b><u>COMPASSION</u></b>	<ul style="list-style-type: none"> <li>• Getting in touch with one’s own feelings, even prior to entering a client’s room.</li> <li>• Spoken or unspoken communication acknowledges a person beyond their illness. For example: A gentle touch on the shoulder or hand, “this must be frightening for you.”</li> </ul>
<b><u>DIALOGUE</u></b>	<ul style="list-style-type: none"> <li>• What do I need to know about you as a person to give you the best care possible?</li> <li>• “What things are most important to you right now in your life?”</li> <li>• “What are you most proud of in your life?”</li> <li>• “What are your biggest concerns for the people in your life who you are leaving behind?”</li> </ul>

Starting any conversations in a palliative care setting can be difficult. Death and dying is something that makes many of us uncomfortable. However, as health care professionals we need to prepare ourselves for these situations and conversations because clients who are nearing end

of life are not restricted to one area in the hospital or one sector of our community. Thus, having tools readily available is a start in taking steps for everyone to be more comfortable and prepared for supporting clients where a cure is no longer possible.

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## About the Author



Tianna Deck, 4th Year  
Nursing Student at UNBC

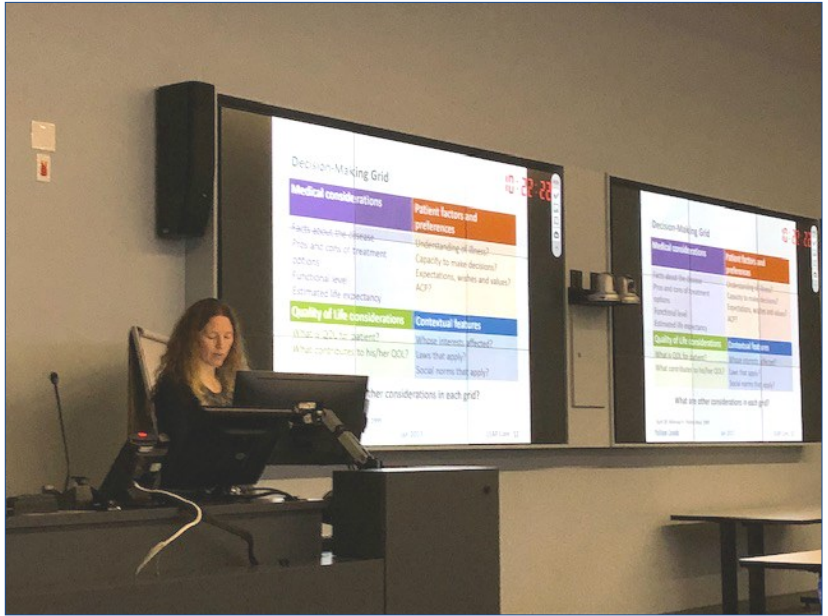
*Tianna Deck is a fourth year nursing student at the University of Northern British Columbia in Prince George. As graduation approaches, her love for nursing, particularly critical care medicine and palliative care, is becoming more evident.*

*With the training she has received she has learned how simple, yet important, the skill of listening can be.*

*Although being around death can be difficult, her own personal experiences have made her realize that death is a natural part of life. It is the experiences and processes of dying which create comfort for the person approaching end of life as well as the family around them. As a nurse Tianna wants to be a person that can bring even the smallest piece of humility, joy, and kindness into their life at the end.*

# Consultation Team Takes LEAP On The Road

## Pallium's LEAP in Prince George



Our pharmacist lead, Suzy Stever, providing education during one of two LEAPs in Prince George in November.

## Pallium's LEAP in Haida Gwaii



In September 2018, our team provided LEAP education in Haida Gwaii.

From top to bottom:  
Seth Gysbers, NI Consultant.  
Jenny Kenny, NW Consultant.  
Dr. Inban Reddy, Physician Lead.  
Stacey Joyce, Team Lead.

## Pallium's LEAP in Quesnel



Seth and Suzy taking a break to regroup before an afternoon of teaching in Quesnel

# Upcoming Palliative Education Opportunities

## COMING IN THE SPRING OF 2019! Victoria Hospice's Psychosocial Care of the Dying and Bereaved Course

You asked and we listened! Coming to Prince George in the spring of 2019, we will be hosting the Victoria Hospice Psychosocial Care of the Dying and Bereaved Course. There is limited availability so if you are interested in attending this course check your email in January for the registration forms to secure your spot.



## Education Sessions by Skype

A team of experts in palliative care will be presenting a series of interdisciplinary webinars on palliative care. Health professionals from all care settings are invited to attend. A specific subject will be taught each month and repeated throughout the month to allow more people to participate. Webinars are recorded and provided on OurNH and the external website.

Month	Date & Time	Topic	Presenter
December	Thu, Dec 13, 2-3 pm	Your Team and Your Toolkit	Jennifer Ferguson
January	Thu, Jan 10, 2-3 pm	Palliative Care Order Sets	Suzy Stever
February	Thu, Feb 14, 2-3 pm	Advance Care Planning	Patti Doering
March	Thu, Mar 14, 2-3 pm	Community Paramedic Program	Seth Gysbers

***If you are interested in having your name added to our distribution list, please contact [Palliative.Care.Consult.Team@northernhealth.ca](mailto:Palliative.Care.Consult.Team@northernhealth.ca)***

Please note: schedule subject to change

## Pallium Canada's Learning Essential Approaches to Palliative Care (LEAP)

The Palliative Care Consultation Team will be providing LEAP education near you. Dates will be announced on an ongoing basis so please watch for this.