

St. Jude Children's Research Hospital
Quick Communication Reference Guide

Delivering Bad News (SPIKES)	
Setting/ Set-up	Review the medical record, know all current medical issues (e.g. history, prognosis, treatment options) Prepare the environment – Private/quiet location, turn off pager on phone/pager, have tissues available, have enough chairs, invite important people to be there, interpreter services available if needed Conduct a medical team meeting/pre-brief prior to discussion with family Coordinate team members that need to be at meeting Discuss/coordinate medical opinions among team members Clarify the goals of the meeting (e.g. what decisions are you hoping to make?) and decide who will lead the discussion Discuss/coordinate plan for follow-up among team members and with family Introduce all team members, including name and relationship to patient
Perception	Clarify the family's and patient's perception and understanding of the medical situation ("What have you heard about your child's condition?" or "What have other doctors told you about your child's illness?") Ask-Tell-Ask – ask the family to describe their current understanding of the issue Do not interrupt Look for knowledge and emotional information while the patient/family responds Be prepared to repeat information and present additional information if needed
Invitation	Explore how much information the patient and family want to know "Would it be okay for me to discuss the results of your tests with you now?" "How do you prefer to discuss medical information in your family?" "Some people prefer a global picture of what is happening and others like to hear all of the details. Which do you prefer?"
Knowledge	Give the medical information succinctly and then be quiet Use a "warning shot" so that the patient and family member can become more emotionally prepared ("I have something serious we need to discuss..." or "The scans/labs didn't show what we hoped...") Summarize the big picture in a few sentences. Say it simply and then STOP ("Your cancer has spread to your liver and seems to be getting worse despite our treatments.") Ask-Tell-Ask – give small bits of information about the situation or condition; provide more detail once family has had the opportunity to ask questions Avoid medical jargon, use language that matches the family's level of understanding and education
Empathy	Respond to emotion; expect that the patient/family will have an emotional response (See NURSE) Use empathetic statements to respond to emotions associated with the news ("This must be a shock to hear...") Respond to and validate emotions ("I can't imagine how difficult this must be..." or "I know this is not what you expected to hear today") Name emotions, especially if patient or family is not verbally responding ("I can see that you are upset...") Use "I wish" statements - ("I wish we had better news for you...") Be silent and be fully present. Use pauses and wait quietly for the patient and family to respond
Summarize	Discuss next steps and a follow-up plan Ask-Tell-Ask – Verify the family's understanding ("We've talked about a lot today, can you please tell me what you understand about where we are right now?") Review options and ask permission to make treatment recommendations based on identified goals values ("Would it be ok if I make a recommendation?... Given what you have told me about your goals for ___ I would recommend...") Summarize decisions and next steps ("Let's set up a follow-up. I will stop by tomorrow but if you need someone from our team in the meantime, here is how to contact us.")

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Responding to Patient/Family Emotions and Articulating Empathy (NURSE)	
Naming	Name the emotion ("You seem frustrated..." or "It sounds like you are upset.") In general, turn down the intensity by naming the emotion
Understanding	Acknowledge and appreciate the patient/family's situation ("It is understandable to feel overwhelmed with everything that is happening.") Avoid giving premature assurance Avoid suggesting that you understand everything they are feeling
Respecting	Acknowledge and respect the family's emotions Offer praise whenever appropriate ("I can see that you have really been trying to follow our instructions and I think you are doing a great job with this.")
Supporting	Express concern and a willingness to help. Making this kind of commitment is a powerful statement. Acknowledge the family's efforts to cope. ("We are going to do the best job we can to make sure you and your family have the support that you need.") However, do not promise or offer anything that you will not be able to deliver.
Exploring	Let the family member talk about what they are going through ("What has this been like for you?") Explore sources of conflict (e.g. guilt, grief, culture, family, trust in medical team, etc.) Explore values behind decisions ("Tell me more about...") Ask more focused questions to confirm beliefs ("Could you say more about what you mean when you say that...")

Five Fundamental Communication Skills

Tell me more	Use this phrase to clarify things that you are not sure about or to encourage family to continue speaking ("Tell me more about that...")
Ask-Tell-Ask	Related to Assess-Knowledge-Respond in SPIKES "What have you heard about..." "Here is what the tests show..." "Does that make sense to you? What questions do you have?"
"I wish" statements	Allows you to align with patient and family while acknowledging the reality of the situation ("I wish that I could say that chemotherapy always works...")
"I wonder" statements	Allows you to explore possible options without getting locked in ("I wonder how you would feel about...") or "I wonder if there are some other options we haven't yet considered. Would it be okay to explore some of those with you today?")
Lean in & stay silent	Silence is key! If you don't know what to say, do not say anything. Sit with patients and families and be fully present.

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Goal Setting and Future Planning – The Goals of Care Discussion

<p>Establishing patient centered goals of care – The Five Cardinal Questions</p>	<ol style="list-style-type: none"> 1. Tell us about your child: What is s/he like as a person? What is a good day like for your child? 2. What have you heard from the doctors about what is going on with your child? How has this experience been for you and your child? 3. In light of what you know about what is going on with your child, what is most important to you? What are you hoping for? What else are you hoping for? 4. What worries do you have about your child's condition? What keeps you up at night? 5. Where do you find your strength? How well is that support working for you right now?
<p>Ask permission to give recommendations</p>	<p><i>"In light of what you have been telling me about all of the things that have been going on and your goals and hopes for your child, would it be helpful to hear my thoughts on the situation?"</i></p>
<p>Recommend plan based on goals</p>	<p>Review current treatments, monitoring, tests, medications, etc. and determine if they are in line with patient's/family's goals Make a recommendation based on goals elicited. Be sure to use patient's/family's own words ("Given what you have told me are your goals for your child, I would recommend...")</p>

Common Pitfalls & Barriers to High Quality Communication

Giving too much information and details. Start with the big picture, keep it brief, and then keep quiet
Not finding out about the family's information needs, making assumptions about what patients/families know or want to know
Not including the child in the discussion and decision making process
Not including all important decision makers in the conversation
Pushing a family to make a decision before they have a chance to process the information

Three Steps for Giving & Obtaining Feedback on Communication Skills

1. Conduct a pre-meeting briefing - conduct a short briefing before seeing the patient to discuss goals of the encounter and practice ways/phrases that may be useful to use ("We're going to see patient X. What are your communication goals for the encounter? Let's practice different ways to ask that question...")
 2. Observation - teacher observes and provides gentle guidance in the encounter if necessary. The teacher may step-in to model communication skills and/or help the learner. ("I am wonderful if you could clarify something for us, when you said X, what did you mean by that?")
 3. Reflection & Feedback - teacher debriefs the learner with reflective questions ("How did that go for you? What went well? What was the most difficult part about that for you? What could be done differently in the future?")
- The teacher then gives feedback from observation reflecting back on the goals of the session and the learner's self-reflection

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QOLA. Simply stated it means **Quality of Life for All.**
The QOLA team is a interdisciplinary group of providers that work with all members of the primary oncology team to help make every day the best day possible.

How to reach the QOLA Team:
Call (901) 229-6930 or email the team at QualityofLifeService@StJude.org

Additional communication training information and videos are available at www.VitalTalk.org