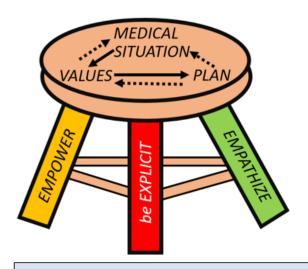
Advanced Communication Training COVID-19

Tips and scripts to facilitate serious conversations in 4 scenarios



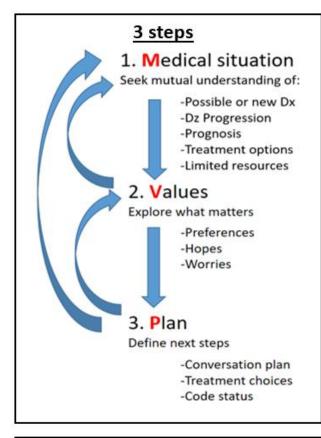
MVP is a 3-step sequential, fluid process, supported by 3 core communication skills, to guide serious illness conversations

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3 communication skills

A. Empower

- -Ask first
- -Calibrate
- -Listen

B. be Explicit

Share the facts

- -Precisely
- -Concisely

C. Empathize

Expect & respond to emotion

1. CONVENTIONAL SCENARIO

Proactive advance care planning

Medical Situation

- -COVID is on many people's mind, and I think it is important to discuss with you, okay?
- -What have you been thinking about COVID?
- 📑 am hopeful you won't get COVID, but I am concerned...
- .. if you do get COVID it could be serious, and potentially life-threatening.
- Yes, this is a scary situation. Talking about it up front will help us and your family honor your wishes.

Values

- -Given your medical situation, what matters most to you if you get seriously ill with COVID (or something else)?
- f I hear you right, you value... (ex., quality over length of life)
- -Can we explore what you would want if you were so ill you needed a ventilator?
- -Who is your backup if you can't speak for yourself?
- I appreciate your courage in discussing this painful possibility.

Plan

- -Now that I understand your values, I'd like to offer a recommendation, okay?
- Given what you told me, I recommend...
- -Does this make sense? What do you think?
- Now that this is clear, let's complete 2 forms (HCP, MOLST) to make sure we and the medical team honor them fully, okay?
- -Yes, this IS hard. You've done a great job taking care of yourself, and your family.

2. CONTINGENCY SCENARIO

Acute planning, potential ventilator limits

Medical Situation

- -'d like to discuss some difficult information with you, okay?
 'm concerned you may have COVID, which could be life-
- threating.
- -What do you understand about COVID?
- Yes, this is scary. Anyone would be scared to hear this.
- need to tell you that in this crisis there may not be enough ventilators for everyone who would otherwise get one.
- agree. I also hope you don't have to deal with this possibility.

Values

- -Given what you've heard, what are you hoping for?
- -What are your worries?
- Let me see if I understand: You're saying... right?
- Let me see in anderstand, four te saying... right:
- -What would you want if you needed a ventilator?
- can see how hard this is to consider.
- -Who would help make medical decisions if you were too sick to speak for yourself?
- appreciate your courage in discussing these things.

Plan

- -Now that I understand your values, I'd like to offer a recommendation, okay?
- Given what you told me, I recommend...a "no-limits approach", everything to try to keep you alive...OR...
- ...that we focus entirely on keeping you home, and generously treating pain, SOB, and other symptoms until you die...
- -What do you think?
- I'll document your wishes (MOLST) so they are honored.
- I admire your willingness to discuss this tough stuff.

3. CRISIS SCENARIO/EARLY

Acute planning, actual ventilator limits

Medical Situation

- -I'm afraid I have some difficult news to share. (Pause)
- There aren't enough ventilators for all who need one.
- I'm sorry, but because of your condition, you will not be able to be treated with a ventilator.
- -I can see this is hard to hear. I wish we had more too.
- We are using expert guidelines to make these difficult decisions.
- Still, I know it doesn't feel fair.
- -I'd like to discuss what we can do for you, okay?
- We can provide treatment to try to keep you alive (describe), but I am worried that even so, you may die.
- We can also provide treatment to ease your breathing and other discomfort, whether you live or die.

Values

- -Given what you've heard, what are you thinking? What are your worries? What are you hoping for?
- Yes, I wish there were better options too.
- If you get sicker, or appear likely to die, what you would hope for in this difficult circumstance?
- If I hear you right, you would want... Do I understand?
- -Who is your backup person—your health care proxy?

<u>Plan</u>

- -Now that I understand your values, I'd like to offer a recommendation, OK?
- I recommend...providing the IVF and meds to try keeping you alive longer, OR ...devoting all effort to treat your breathing and pain and other discomfort, OR ...
- -What do you think?
- OK, let's complete 2 forms (HCP and MOLST) so that we can document and honor your wishes.
- I can see how much you love your family.

4. CRISIS SCENARIO/LATE

Discontinuing a desired ventilator

Medical Situation

Phone call to surrogate

- -I have some serious news about your father. (Pause)
- -Are you in a place where you can talk?
- I'm afraid because your dad is not improving after 5 days, the COVID guidelines require that we stop his ventilator.
- I wish we had more ventilators too
- I want you to know that I believe (if sincere) that even with the ventilator, he would die soon.
- Yes, I can see why you feel like we're killing him.
- We <u>could</u> give him treatments to try to keep him alive, but I don't think they'll help him live longer or feel better.
- I can only imagine who grueling this is to hear

Values

- I am committed to helping him & you through this.
- -Given things are as they are, do you have a sense of what your dad would say now? What would be important to him?
- Let me see if I get understand. You're saying... right?
- You clearly love your father and know him well.
- -I hear your grief; I really wish things were different.

Plan

- -Now that I understand your father's values in this unprecedented situation, I'd like to suggest a plan, OK?
- ■I recommend... ex: we use medication to make sure he is very comfortable, then remove the ventilator...he is likely to die within minutes, possibly longer... You'll be able to be with him when you arrive...
- -What do you think about this plan?
- -We will honor his wishes and dignity.
- -Please drive here safely; I'll see you when you arrive.