



MODULE 2

Communicating with people with life-limiting illnesses

Providing support for people with life-limiting illnesses requires you to understand the meaning of the illness and its effects on individuals. It's vital to identify and acknowledge an individual's concerns and sources of distress, and respond to these effectively.

OVERVIEW

MODULE 2: Communicating with people with life-limiting illnesses will help you develop your skills in communicating with people with life-limiting illnesses and their families.

AIMS & OBJECTIVES

After completing this module, you should be able to:

- demonstrate the principles of effective communication when interacting with people with life-limiting illnesses and their families
- identify sources of psychological, social and spiritual support for people with life-limiting illnesses and their families
- recognise how your own values and beliefs about death and dying affect your personal responses and interactions with people with life-limiting illnesses and their families.

SECTION 1

Death & dying in contemporary society

In this section you will:

- reflect on various meanings of death and dying in contemporary society and how they relate to a person's own experiences of dying
- consider how your own values and beliefs may influence how you interact with a person with a life-limiting illness
- consider the diversity of cultural issues and needs associated with death and dying.

ACTIVITY 1: The challenges faced

THINKING POINTS

1. Consider a person you have cared for who has been diagnosed with a life-limiting illness. What were the main sources of distress for this person and how did you know these were concerns?

2. What are some of the reasons that individuals can respond differently when diagnosed with a life-limiting illness?

ACTIVITY 2: Michelle's story



THINKING POINTS

1. What are some of the fears and concerns that Michelle might experience at this time?

2. What are your immediate personal reactions to Michelle's situation?

ACTIVITY 3: Communication principles



THINKING POINTS

1. Think about your experience of discussing existential and psychological concerns with patients.

a) What aspects of communication are you most comfortable with in this area?

b) What aspects of communication do you find challenging?

2. Using the principles described in this section, outline:

a) What communication strategies you use most commonly?

b) What additional strategies you could implement in your practice?

3. Watch the expert opinion piece where a General Practitioner is describing some key strategies for communicating challenging news to patients. How well do the medical practitioner's suggestions match the communication strategies identified in this section?

ACTIVITY 4: Receiving distressing news



THINKING POINTS

1. What do you think would be the main sources of distress for Michelle and Pete at this time?

2. What specific communication strategies did Meredith use to give the news to Michelle and Pete about the progression of her disease?

3. What additional communication strategies could the oncologist use to improve this interaction?

ACTIVITY 5: Understanding palliative treatment



THINKING POINTS

1. What do you think would be the main sources of distress for Michelle at this time?

2. What specific communication strategies did Jeremy use to give the assist Michelle to understand the treatment she was to receive?

3. What additional communication strategies could the radiation therapist use to improve this interaction?

ACTIVITY 6: Michelle's illness progresses



THINKING POINTS

1. What do you think would be the main sources of distress for Michelle and Pete at this time?

2. What specific communication strategies did Meredith use to

a) Respond to her distress?

b) Introduce the concept of palliative care?

3. What additional communication strategies could the oncologist use to improve this interaction?

ACTIVITY 7: How to communicate with children**THINKING POINTS**

1. What are the main issues for children when a parent has a life-limiting illness?

2. How might these concerns vary depending on the child's age?

3. How would you respond to a parent who is concerned about the effect of their illness on their children?

ACTIVITY 8: Raising concerns



THINKING POINTS

1. What do you think would be the main concerns that Michelle and Pete have about discussing Michelle's prognosis with them?

2. What specific suggestions did Dawn provide to assist Michelle and Pete?

3. What specific communication strategies did Dawn use to provide this advice?

4. What additional strategies could Dawn use to improve this interaction?

ACTIVITY 9: Understanding sources of distress**THINKING POINTS**

1. Review the Patient Dignity Inventory and list the key sources of distress that are assessed by this tool.

2. What are the potential barriers that may hinder discussions between health professionals and patients about their distress?

3. What strategies might a health care professional use to introduce sensitive issues, such as spirituality, intimacy or sexuality?

4. What specific open-ended questions may assist in introducing these topics?

ACTIVITY 10: Responding to losses



THINKING POINTS

1. Use the Patient Dignity Inventory to identify some of Michelle's sources of distress at this time.

2. What communication strategies does Dawn engage to encourage Michelle to talk about her concerns?

3. What other strategies might be used to support an individual who:

a) Expresses concerns about how their illness has affected relationships with people close to them?

b) Feel the illness is affecting their personal appearance and body image?

4. As a health care professional, what can you do to help a person, such as Michelle, feel in control when their illness is progressing?

5. Dawn asks Michelle if she would be interested in seeing a psychologist for support. In what circumstances should referral to a psychologist be considered?

ACTIVITY 11: Understanding spiritual needs

THINKING POINTS

1. Reflect on what spirituality means to you. How might this meaning affect your professional responses to people with life-limiting illnesses?

2. Identify specific strategies that might be used to:

a) Assess spiritual issues

b) Provide spiritual care to people with life-limiting illnesses.

ACTIVITY 12: Spiritual conversations



THINKING POINTS

1. What does Michelle state is important to her at this time?

2. What specific strategies does James use to explore the meaning of illness and dying to Michelle?

3. What specific strategies does James use to respond to
a) Michelle's question: 'I am going to die soon aren't I?'

b) Michelle's questions about dying?

4. What other strategies would you recommend to:

a) Explore the meaning of illness and dying to Michelle?

b) Respond to Michelle's questions about dying?

ACTIVITY 13: End-of-life concerns

THINKING POINTS

1. What might be some of the issues experienced by families and carers in the following end-of-life care settings:

- hospital
- home
- hospice?

2. From the perspective of your own discipline, what specific supportive interventions can you implement as part of end-of-life care?

ACTIVITY 14: Preparing for Michelle's death



THINKING POINTS

1. What are Pete's main concerns at this time?

2. How does James help Pete deal with these concerns?

3. What other strategies could you use to provide emotional support to Pete, Michelle and their family at this time?

ACTIVITY 15: Adopting self-care strategies



THINKING POINTS

1. What are some self-care strategies you might use when caring for people with life-limiting illnesses?

2. What strategies can you use to support other members of the health care team?
