

Facilitating Difficult but Necessary Conversations around Future Care Planning and DNACPR

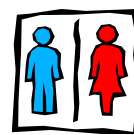


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Housekeeping



Fire alarm



Toilets



Emotional



Evaluations



Coffee/lunch

2

Ground rules for the day

- Confidentiality
- Respect each other's views
- Listen to one another
- One speaker at a time
- Mobile phones off or silent please
- Start and finish on time
- Participate in all group work
- Enjoy



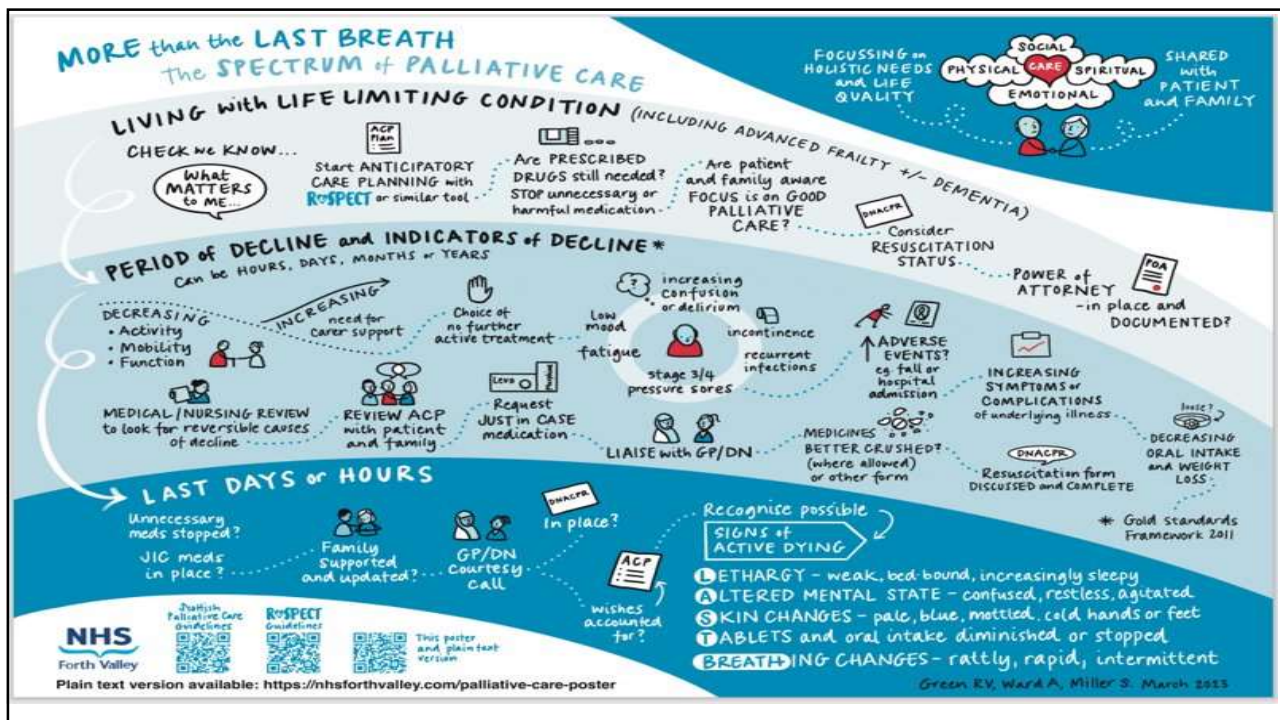
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Aims

- Understand the knowledge and skills that underpin effective communication
- Be aware of barriers and behaviours that effect communication
- Be aware of communication frameworks to help with challenging but necessary conversations
- Chance to practice – participant rehearsals

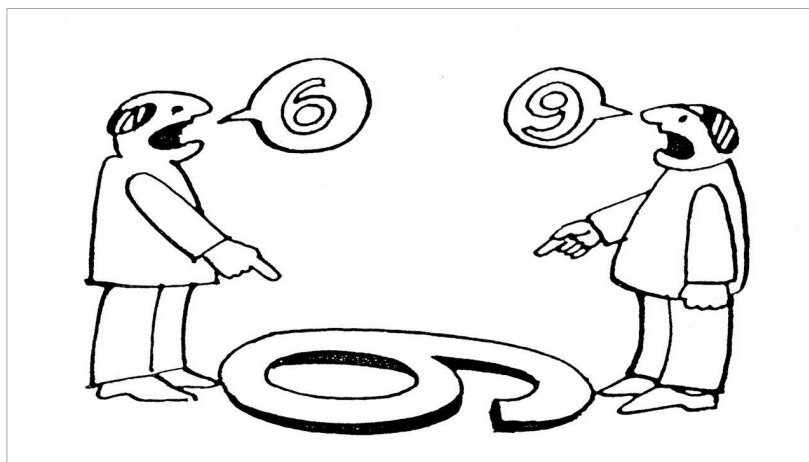


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Communication skills review



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REDMAP FRAMEWORK

- [REDMAP \(youtube.com\)](https://www.youtube.com/watch?v=8F033333333)

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REDMAP FRAMEWORK

Discussing Future Care Planning

| | |
|-------------------|---|
| R eady | Would it be okay to talk about your future health and care? Who should join us? |
| E xpect | How have you been doing recently? How do you see things going in the next few months? |
| D iagnosis | We know you are less well because... We hope that.....but I am worried about..... |
| M atters | What is important to you now and in the future? |
| A ctions | Where would you like to be cared for if you become less well? Where would you like to be cared for if you were dying? |
| P lan | Let's plan ahead for when/ if... |

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Patient Scenario 1

Mary is a 52yr old lady with a ten year history of relapsing remitting Multiple Sclerosis. In the past year she has had three hospital admissions following falls at home. Her condition over the past year has deteriorated markedly with symptoms of fatigue, poor mobility and urinary incontinence. For the past two years carers have been visiting three times daily to help her.

Mary has recently moved from walking with two elbow crutches to needing to use a wheelchair. She has also required to have a indwelling catheter and district nurses now visit to manage this. Mary is on your caseload and has voiced recently that she is worried about the future and does not want to be a burden to her family.

How do you initiate and discuss Mary's future wishes?

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Patient Scenario 2

James is a 48yr old gentleman who has been admitted to your ward recently with jaundice and upper abdominal pain. Following investigation, he has been diagnosed with advanced metastatic pancreatic Cancer

He lives at home with his partner Sue and their two children, Paul who is 12 years old and Jamie who is 8 years old

He has a plumbing business but has struggled with work for the past couple of months.

When you are administering medication, James asks if he can speak to you about his condition as he feels he is going downhill and is he is worried about the future

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DNA CPR

- DNACPR Discussion - OSCE Guide:
<https://www.youtube.com/watch?v=KowT-7aEoZA>
- UKMLA CPSA OSCE / PLAB 2: DNACPR Discussion | Resuscitation (CPR) Counselling:
<https://www.youtube.com/watch?v=UoVuBeHPGYo>
- Expert tips on Discussing DNACPR forms:
<https://www.youtube.com/watch?v=zHByX4RqEIY>

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DNA CPR form

- Signed by whom? Dr or nurse
- Medical decision
- Form should travel with patient in and out of hospital
- Ensure eKIS/ACP portal is updated
- Applicable only to a decision around CPR and not other tx decisions
- Consider TEP/FCP if not already in place
- Legally patients can refuse tx but not demand tx

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Evaluations and

