

Guide for Difficult Conversation with Patients and Families when Declining Visitation Acute Care, Long Term Care/Assisted Living/Home Support, Community

During this pandemic, there is no roadmap and physicians may be required to have a difficult care conversation they never expected. This is a guide for use with patients and families when declining visitation.

If the patient is unable to communicate their wishes and the communication is with a substitute decision-maker, follow the same format and flow for the conversation, focus on eliciting the substitute's judgement or best-interest estimate of what the patient would say or want in this situation.

CONVERSATION FLOW	SUGGESTED LANGUAGE
SET UP THE CONVERSATION Purpose of Conversation	"In light of everything that's happening with COVID-19, I'd like to talk to you about our visitation policy. Is that ok?"
PATIENT'S UNDERSTANDING AND PREFERENCES Of COVID-19 and visitation limitation	"What is your understanding of <u>COVID-19</u> and its impact on visitation?" "What questions do you have? What do you need to know?" "What is your understanding of where things are with your family or care givers hoping to come and visit you?"
SHARE INFORMATION AND RATIONALE WHAT YOU MIGHT HEAR: Can you make exceptions for me?	Share the bad news including the rationale behind the decision. Be realistic and empathic. Consider options and alternatives as well as what is not possible. "Restrictions are in place due to the risk of visitors transmitting COVID-19 to you or other vulnerable patients/residents, and to protect themselves from being infected while being here." "We also have to conserve our personal protective equipment, so that critical shortages do not compromise your ability to be cared for by your healthcare providers." "At this time, we only allow compassionate visitations. For examples, a visit at the end of life, or other exceptional circumstances when the visit is paramount to a patient's needs. I can appreciate how isolating this must feel for you."
EXPLORE KEY TOPICS 1. Goals 2. Fears & Suffering 3. Sources of Strength 4. Decision-Makers 5. Notify	Goals: "Tell me about the things you are hoping for? How would having a visitor help you?" Fears & Suffering: "I just gave you a lot of information, what is your biggest concern if you cannot have a visitor?" "Are there things that you would like me to know about how important visitation is to you?" Sources of Strength: "Who or What gives you strength what will help you get through this?" Decision-makers: "Have you thought about who you would want to have as a visitor for a compassionate visit?" Notify: "Is there anyone you would like me to contact?" "Are they aware that you would like them to come for a visit?"
SUMMARIZE, RECOMMENDATION, AND CLOSE THE CONVERSATION	Summarize Conversation "I heard you say that [...] Keeping that in mind, and what we know about safety and the restriction on visitations. I recommend that [...]" <i>Recommendations: Decline Visitation</i> "Given the risk for you and others, and the preservation of our personal protective equipment resources, we have to decline the visit at this time. I wonder if we can look at other ways to support you connecting with your loved ones. Could we facilitate phone calls or virtual visits?" Information on "How to request a tablet" and "Guidelines for Cleaning and Disinfection of Tablets" are available in the VCH Virtual Health website: https://my.vch.ca/dept-project/Virtual-Health/Virtual-Health-Communications/Pages/Tablets.aspx Affirm Commitment: "We will do everything we can to support you through this. Thank you for your understanding and patience."
DOCUMENT & COMMUNICATE WITH KEY CLINICIANS	Document Conversation

Other Tips for Difficult Conversations Related to COVID-19

These policies are stressful for everyone, both for the anxious family members waiting for news of their loved ones, the patient isolated from their support system, and the professionals faced with enforcing them. This is the new normal and while Pandemic precautions require this degree of restriction to protect both staff and patients, we can use communication strategies that support dignity and respect, information sharing, participation, and collaboration. These are the core principles of Patient and Family Centered Care. In the midst of a pandemic, we need to ensure that we do all that we can to reduce the stress and burden, and effective communication is an area where we can make an impact. We have control over this, at a time when there are so many things we cannot control. Our actions now need to be focused on regular communication so that people are not surprised by restrictions and on establishing systems to relieve the burden and stress of feeling isolated and the family's anxiety and need for information.

- Where possible give advance warnings and lay the groundwork for a difficult conversation.
 - You can never ask too many clarifying questions. Don't try to have a difficult conversation without actually understanding what the other's perspective is. Stay curious and use language similar to: "I wish/hope... but I worry... and I wonder..."
 - What is communicated and how it is communicated are equally important.
 - People who receive bad news usually remember the physician's attitude and manner more vividly than the technical details.
 - Individuals crave a humane approach from their healthcare provider.
 - The role of the physician is to provide truthful, caring, and helpful information while at the same time remaining calm, compassionate, clear, and decisive.
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- ✓ **Do** take regular pauses and chunk information.
 - ✓ **Do** make a recommendation that aligns with the patient's goals.
 - ✓ **Do** express empathy and understanding: "We know how hard this must be for you."
 - ✓ **Do** acknowledge uncertainty and desire for more clarity: "We wish we knew when it will be safe to lift the visitation ban."
 - ✓ **Do** encourage connection through various modalities, include families in discussions/medical updates and planning.
 - ✗ **Do** explain what is available and **do not** provide false hope: "This is a challenging time for you and all of our patients we wish it was different."

Visit <https://my.vch.ca/covid19/for-medical-staff/clinical-care> for further support and review the *Visitation Guideline* when available

Notice any feelings of frustration, anger or helplessness you may be experiencing so you can manage them and not bring them into the conversation. Remember, the professional's own humanity and self-awareness are what cultivates the resilience needed to care profoundly without becoming overwhelmed. Take care of yourself and reach out for help before you need it.

Medical Staff Support for Difficult Conversations Telephone Line

During this pandemic, Medical Staff may be required to have difficult care conversations with patients and families they never expected. If you require any support and guidance as a result of COVID-19 related care decisions, please reach out to the dedicated support-line or e-mail.

Support line: 604-875-4987

E-mail: MDMRPsupport@vch.ca