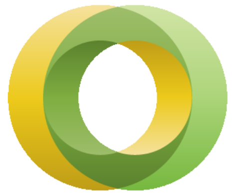


VITALtalk

Goals of Care Conversations – Part 3

Aligning with Patient Values

Aligning With Patient Values

Serious Illness Communication Skills Training

- Delivering Serious News
- Conducting Goals of Care Conversations
  - Part 1 - Reframing: We’re in a Different Place
  - Part 2 - Mapping the Future: Clarifying Priorities
  - Part 3 - Aligning with Patient Values
  - Part 4 - Discussing Life-Sustaining Treatments

REMAP: Discussing Goals of Care

- **R**eframe
- **E**xpect emotion
- **M**ap out what’s important
- **A**ligning with patient values
- **P**lan treatment to match patient values

Review: Reframe

- “Given where you are in your illness, it seems like a good time to talk about where to go from here”

- “We’re in a different place than we were [x] months ago”

Review: Expect Emotion

- “Are you sure we’ve tried everything?”
- “There has always been another treatment that’s worked!”
- “Are you saying we’re giving up?”

Review: Map Out What's Important

- "Given this situation, what's most important?"
- "Knowing that time may be limited, are there things you want to do?"
- "As you think about the future, what are you worried about?"

Review: How's it Gone?

- ✓ What's worked?
- ✓ What has been challenging?
- ✓ Have you gotten stuck?

What We Will Learn

- ✓ **R**eframe
- ✓ **E**xpect emotion
- ✓ **M**ap out what's important
- ✓ **A**lign with patient values
- ✓ **P**lan treatment to match values

How We Will Learn

- ✓ Define skills (lecture)
- ✓ Observe skills in action (videos)
- ✓ Practice

REMAP: Aligning with Patient Values

- Repeating what patient has just told you is most important
- Makes sure you’ve got it right, and the patient feels understood

Aligning with Patient Values (Example)

Patient	Clinician
“This has all been so hard and I’m tired. I’m really worried that the pain might get worse. I Know I don’t want to end up on a breathing machine like the last time I was in the hospital. I never want to go through that again. And I haven’t been able to really be with my husband and my kids. I’d like to get back to that – maybe go on a vacation, have fun together again.”	“As I listen, it sounds like what’s most important to you is that you stay out of pain and spend more time with your family. It also sounds like you would not be willing to go through things that will cause you a lot of pain and suffering, like being on a breathing machine again. Does that sounds right?”

REMAP: Plan Treatments that Match Values

- Ask permission to make a recommendation
- Make a treatment recommendation that matches the patient's goals and helps meet them
  - focus on what can be achieved
  - focus on what might be possible
  - discuss what you will not do because it will not meet the goal
- After making recommendation, ask patient or family whether it feels right
  - Also, check in to make sure they understand the treatments you are recommending, and provide more information if needed

REMAP: Plan Treatments (example)

“Would it be all right if I offered a recommendation?”

“Given what you’ve told me is most important, there’s a lot we can do to help. We’ll focus on keeping you out of pain. We can also get some services into your home to help you stay there and spend more quality time with your family. We’ll work toward that vacation, and have a better idea of how possible that is after we see how you feel on the new medication.”

“In addition to all the things I’ve mentioned we will do, I also recommend that we don’t consider further scans, blood draws, or pursue aggressive life-sustaining treatments like putting you on a ventilator, or if your heart stops, doing CPR, because at this point it won’t help you achieve your goals...”

“What do you think?”

REMAP: Plan Treatments (example)

“Would it be all right if I offered a recommendation?”

“Given what you’ve told me is most important, it sounds like you would want to pursue any treatment that would give you a chance of living longer, even if that means your life might be supported by machines.

“Does that sound right?”

“Is there any situation you can imagine when you wouldn’t want your life to be supported by machines?”

REMAP: Separate Align from Plan

- For medical trainees and some clinicians, it may not be possible to immediately formulate a plan
- In these situations, map out goals and make an “acknowledge” statement with the patient
- Inform your team of the patient’s goal
- Return later with the recommendation

Recommend a Plan that Aligns with Goals

What specifically did the doctor do that you liked?

Difficult Questions

Patient	Clinician
“Does this mean you are giving up on me?”	“Absolutely not. But tell me, what do you mean by giving up?"
“Are you telling me I am going to die?”	“Hearing all of this must be really scary. I wish I could tell you something different.”
“Is there any hope?”	“There is always hope. Tell me about what worries you.”

Is there Any Hope?

What Did You See?

Time to Practice!!

Drill Instructions

- Review drill as a group
- Divide into pairs to practice the drill
- Practice the drill script (person with bigger feet goes first)
- Switch roles
- Debrief with one another:
  - How did it feel to say the words?
  - One thing clinician noticed
  - One thing patient noticed

Drill A: Align with Patient's Values (scripted)

Patient	Clinician
I'm really sick of coming into the hospital all the time, and I know this isn't going to get any better, but I get really scared when I can't breathe well.	I'm sure that's scary. So, what I hear you saying is that you're tired of coming to the hospital, but you need a way to deal with your shortness of breath at home.

Exactly.

Drill A: Align with Patient's Values (simple)

Patient	Clinician

"I don't want to be in pain anymore. And I want to be able to spend more quality time with my family, not feeling so sick."

Improvise by aligning with what you heard…

Drill A: Align with Patient's Values (more complex)

Patient	Clinician

"I'm scared. I want to live and I'm worried that I am not getting better. But I don't want to prolong anything if it just means being stuck on machines or being dependent on my kids. And I don't want my kids to have to deal with any of these decisions."

Improvise by aligning with what you heard…

Drill Instructions: Swap Roles

Patient	Clinician

Drill: Debrief

- How did it feel to say the words?

Drill B: Plan

Clinician	Patient
Based on what you're saying, it sounds like we should focus more on your symptoms and keeping you home with your family.	Yes, that's what I want.
And, stopping admitting you to the hospital for every chest pain will make it easier to do that. How does that	It sounds like things will be a lot better that way.

Drill B: Plan

Clinician

Based on what you're saying, it sounds like if you get a lot sicker, it would not make sense to put you on a ventilator, or if your heart stops, to do CPR. I worry if that happens, you will likely not get off the machines, and even if you do, you would be a lot more dependent. That sounds like what you wanted to avoid.

Patient

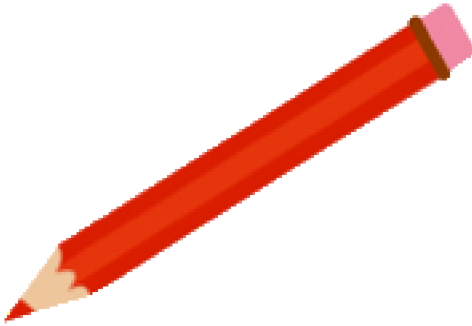
Yes, it's so hard, but I think it's what I would want.

Drill Instructions: Swap Roles

Patient	Clinician

Drill: Debrief

- How did it feel to say the words?
- One thing clinician noticed
- One thing patient noticed



What surprised you?

What do you want to take forward?

Anywhere you might get stuck?

Summary: REMAP

- REMAP: a talking map for goals of care
- Align with patient values
- Plan treatment that matches these values
  - Check in with patient / family to get their reaction
- What's one thing you're going to try this week?

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VA

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