Introduction To Communication Skills

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Do You Ever Get Stuck?
What Makes These Conversations Tough?

- Expectations
- Uncertainty
- Emotion

- And…. the lack of a cognitive framework within which to enter the conversation
Emotion In Every Encounter

- Worrisome health news generates distress

- Coping with difficult illness raises emotional concerns

- Patient negative emotion leads to:
  - Anxiety, depression and other symptoms
  - Poor adherence and self-management
  - Difficulty processing the message from clinician
A Model of Empathic Communication

- Empathy = “I could be you”

- Empathic opportunities = moments when patients explicitly or implicitly express emotion

Suchman A. JAMA 1997
Two Channels

- Cognitive
- Emotional
A Model For Good Communication

- Assess preferences for communication
- Ask permission
- Give information in small-chunks
- Attend to emotion

- Less is more!!
Basic **Principles**

- Start with the patient’s agenda

- Track both the emotion and the cognitive data you get from the patient

- Stay with the patient and move the conversation forward one step at a time

- Articulate empathy explicitly
Basic **Principles** (cont)

- Talk about what you *can* do before you talk about what you *can’t* do

- Start with big picture goals before talking about specific medical interventions

- Spend at least a moment giving the patient your complete undivided attention
3 **Tools** That Work

- Ask-Tell-Ask
- NURSE
- “I wish…”
Ask-Tell-Ask

- Ask current understanding
- Tell what you need to communicate
- Ask if the patient understood

- Always helps introduce a difficult conversation
Ask-Tell-Ask

- Ask current understanding
- Tell what you need to communicate
- Ask if the patient understood
DRILL 1
### ASK-TELL-ASK

<table>
<thead>
<tr>
<th><strong>DOCTOR</strong></th>
<th><strong>PATIENT</strong></th>
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<tbody>
<tr>
<td>“Tell me what your understanding is of what’s going on with your illness?”</td>
<td>“I know I have a tumor in my lung, but they haven’t really told me anything”</td>
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<tr>
<td>“Would you like me to share with you what I understand is happening?”</td>
<td>“Sure – I’m a bit anxious, but I’d rather know than not know”</td>
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<td>“To make sure I’ve explained things well, do you mind telling me in your own words what you now understand about your condition?”</td>
<td>“You’ve told me that the cancer in my lung has spread to other parts of my body and cannot be cured”</td>
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Conveying Empathy (NURSE)

- Name
Conveying Empathy (NURSE)

- **Name**
  “Some people would be angry…”

- **Understand**
  “It must be hard…”
Conveying Empathy (NURSE)

- **Name**
  “Some people would be angry…”

- **Understand**
  “It must be hard…”

- **Respect (Praise)**
Conveying Empathy (NURSE)

- **Name**
  “Some people would be angry…”

- **Understand**
  “It must be hard going through this alone”

- **Respect**
  “I am so impressed by your commitment to your mother”

- **Support**
  “I’ll be with you throughout all of this”
Conveying Empathy (NURSE)

- **Name**
  “Some people would be angry…”

- **Understand**
  “It must be hard going through this alone”

- **Respect**
  “I am so impressed by your commitment to your mother”

- **Support**
  “I’ll be with you throughout all of this”

- **Explore**
  “Tell me more…”
“Whoa—way too much information!”
DRILL 2
# RESPONDING TO EMOTION

<table>
<thead>
<tr>
<th>PATIENT</th>
<th>DOCTOR</th>
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<tbody>
<tr>
<td>“I know I have a tumor in my lung, but they haven’t really told me anything”</td>
<td>“Many people might be frustrated not knowing what’s going on”</td>
</tr>
<tr>
<td>“I’m a bit anxious, but I’d rather know than not know”</td>
<td>“It’s normal to be anxious in a situation like this”</td>
</tr>
<tr>
<td>“You’ve told me that the cancer in my lung has spread to other parts of my body and cannot be cured”</td>
<td>“I can’t imagine how difficult this must be for you.”</td>
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<tr>
<td></td>
<td>“I promise we’ll be there with you every step of the way”</td>
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The “Wish Statement”

- Aligns provider with patient
- Implicitly acknowledges things won’t go as desired
DRILL 3
USING WISH STATEMENTS

PATIENT

- “Isn’t there another chemotherapy that might make this go away?”
- “I know that if God wills it, then I will be cured”

DOCTOR

- “I wish we had a medication that would stop this cancer”
- “I, too, wish for a miracle. Can you think about how you’d like to be treated if that cure does not arrive?”
Conclusions

- One can approach patients with:
  - A foundation of communication principles
  - A cognitive roadmap for the conversation
  - Specific skills for each situation

- Communication is not a mystery – it can be deconstructed and learned!

- The greater your skill as a communicator, the greater your reward as a clinician