



HOW'S YOUR VOLUNTEER SQUAD'S COMMUNICATION SKILLS?

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OBJECTIVES

1. Define effective communication and emphasize its importance for volunteers when providing palliative care
2. Discuss the implications of volunteer/palliative care patient communication
3. Identify communication barriers and myths
4. Discuss factors that influence successful communication between the volunteer and the patient/family
5. Describe patient/family expectations when communicating with volunteers
6. Identify strategies to prepare volunteers to be more effective communicators

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1. EFFECTIVE COMMUNICATION DEFINED

- “Communication between two or more persons wherein the intended message is successfully delivered, received and understood.”
- It is a key component in palliative care and is often considered the foundation to build a relationship with the patient and family.

IMPORTANCE OF COMMUNICATION BY VOLUNTEERS

- Providing, verbal, non-verbal, and written
- Lack of effective communication can often be an issue in palliative care
- Purposes
 - Share information
 - Influence others
 - Facilitating and improving outcomes
 - Teaching

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2. IMPLICATIONS OF VOLUNTEER/PATIENT COMMUNICATION

- Foundation for good palliative care
- Makes a huge difference in quality of care
- When done right: reassuring, decreases anxiety, distress and worry
- Excellent communication improves pain and symptom management

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3. BARRIERS TO COMMUNICATION

- Personal experience with death or grief
- Lack of experience
- Desires that the patient will get better
- To instill hope
- Fear of one's own mortality
- Provokes emotional responses
- What to say?
- How to communicate with individuals who have cognitive impairment

COMMUNICATION MYTHS

- Communication is always deliberate
- Words have the same meaning for everyone
- Primary method -verbal
- Frequently one-way
- Silence isn't good
- Only talk about positive things
- Don't ask questions about dying and loss

TYPES OF COMMUNICATION

- Nonverbal-80%
 - Kinesics
 - Haptics
 - Proxemics
 - Physical appearance
 - Vocalics
 - Chronemics
 - Artifacts

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4. FACTORS THAT INFLUENCE COMMUNICATION

- Family systems
- Finances
- Education/learning capacities
- Physical limitations
- Culture

CULTURAL HUMILITY

- Respectful
- Person-centered
- Being present
- Learning style
- Assess non-verbal communication
- Interpretation of life
- Spirituality
- Values
- Assess symptoms
- Anticipate

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5. PATIENT/FAMILY EXPECTATIONS

- Respect
- Honesty
- Elicit values/goals-honor them
- Explore realistic options
- Team communication
- Listen
- Unconditional acceptance

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6. STRATEGIES FOR EFFECTIVE COMMUNICATION

- Core skills
- Mindful presence
- NURSE
- Older adult communication needs
- Cognitive issues
- Encouraging communication

CORE SKILLS

- Know history/current condition
- Reminisce
- Support hopeful/realistic goals
- Acknowledge emotions/caring responses/validate
- Allow to cry
- Various expressions of frustration and coping mechanism
- ‘No one-way to express frustrations’
- Ask family how they are doing, what can we do to help?

MINDFUL PRESENCE

- In the moment
- Nonjudgmental
- Attentive
- Silent
- Other: know yourself and the other person, encourage meaningful connections, affirm, value
- Empathy (imagine what it feels like)

NURSE

- N=naming (sounds like you're frustrated)
- U=understanding-this helps me understand
- R=respecting (I can see you're really.....)
- S=supporting (I'll make sure to communicate to the team what you need)
- E=exploring (could you say more about what you mean when you say....)

OLDER ADULT COMMUNICATION NEEDS

- Desires information
- Disclosure of feelings
- Maintaining a sense of control
- Solidify a sense of hope and communication for a meaningful and purposeful life
- Being acknowledged
- Not talking above them

WHEN COGNITIVE ISSUES EXIST

- Environment
- Respect
- Respond to emotions vs. words
- Behaviors communicate
- Be positive
- Know the person

ENCOURAGING COMMUNICATION

- Attentive listening
 - Listen exercise
 - Validate feelings
 - Mindful in giving advice
 - Encourage storytelling, reminiscing
 - Don't interrupt
 - Mindful presence

COMMUNICATION GUIDELINES

- Build rapport
- Right time/atmosphere/privacy
- Readiness: feeling calm/relaxed
- Use open-ended questions/techniques
- Silence is OK
- Summarize

SPECIFICS

- Set aside special time
- Sit down, 'eye-to-eye'
- Listen, be silent
- Lean forward
- Silence phone
- Be in the moment
- Ask permission
- Encourage reminiscence

MOVING PAST BARRIERS

- Know barriers and remediate
- Recognize and support individuality and personhood
- Understand and support expectations
- Learn and apply new skills

SUMMARY

- Effective communication delivered by volunteers during palliative care is important and complex.
- It is essential to be aware of the various myths and barriers when communicating.
- Patients and family members have certain communication expectations and several factors influence successful communication.
- As demonstrated there are several strategies which can prepare volunteers to be more effective communicators.

QUESTIONS