

Providing evidence-based information about palliative care for everyone because death and dying will affect all of us.

Starting Palliative Care Conversations: For Health Professionals

Being able to openly discuss changes in care and talk comfortably about palliative care and end-of-life issues are important parts of a health professional's role.

Having some communication starters to discuss serious illness and deterioration can be very useful. Find the words that work best for you. Seek permission to start and continue these discussions. Don't be afraid of silences.

Discussing future planning

- It's important for me to understand what matters most to you as we look ahead and make plans for your care. This helps me make sure you get the care that helps you reach your goals. Can we spend a little time talking about this?
- Have you thought about whom you would want to make decisions for you if you were ever unable to make decisions for yourself?
- I get a sense that this is not what you were expecting to hear today.
- Is it OK for us to talk about what this means?
- If it turns out that time is limited, what things would you want to do?
- As you think about the future, what are you worried about?



- This topic deserves time and attention. We don't need to make decisions today. Let's set up a time to talk again when you are ready. In the meantime, here is some material that you may like to review.
- What you just said really helps me understand the situation better.
- I wish we had a treatment that would cure you [make your illness go away].
- It sounds like you may be feeling (sad, angry, scared ...)

Reference: Adapted from Physician Orders for Life Sustaining Treatment (POLST)

Discussing deteriorating health

- What do you know about your health problems and what do you think might happen in the future?
- If you did become more unwell, what would be the most important things for you and your family?
- Is there anything that is particularly important for you or your family that we should know about?
- Sometimes people choose a family member or a close friend to make decisions for them if they become more unwell.....Is that something you've thought about? Have you talked to your family about it?
- I am glad you feel better and I hope you will stay well, but I am worried about what might happen if
- Can we talk about how we might cope with not knowing exactly what will happen and when? What would be the best way for us to talk about that?

- I wish we had more treatment for..... Could we talk about what we can do if that is not possible/ is not going to help you?

Reference: Supportive and Palliative Care Indicators Tool: [Using SPICTM](#)

Serious Illness Communication Guide

- **Understanding:** What is your understanding now of where you are with your illness?
- **Information preferences:** How much information about what is likely to be ahead with your illness would you like from me? (eg Some patients like to know about timing or trajectory, others like to know what to expect, others like to know both.
- **Prognosis:** Share prognosis, tailored to information preferences
- **Goals:** If your health situation worsens, what are your most important goals?
- **Fears/Worries:** What are your biggest fears and worries about the future with your health?
- **Function:** What abilities or activities are so critical to your life that you can't imagine living without them?
- **Trade-offs:** If you become sicker, how much are you willing to go through for the possibility of gaining more time?
- **Family:** How much does your family know about your priorities and wishes?

Reference: [Communication about serious illness care goals: a review and synthesis of best practices.](#)

Find out more in the CareSearch GP [Communication section.](#)

This resource has been produced under our **Part of Life** project which aims to help people understand what palliative care is and why it matters. Visit caresearch.com.au for more information.