

Compassionate Conversations

"When the dying person is finally communicating his or her most private feelings, do not interrupt, deny or diminish what the person is saying. The terminally ill or dying are in the most vulnerable situation in their lives and you will need all your skill and resources of sensitivity, and warmth, and loving compassion to enable them to reveal themselves."

Sogyal Rinpoche, The Tibetan Book of Living and Dying.

End of life conversations can occur at any point during the health journey and are best conducted when the person is medically stable, comfortable and able to think clearly. Often the trigger to this kind of discussion can be discomfort, so ensure that all symptom care is addressed.

General principles of good communication

- Make time and sit down in a quiet place. A perception of rushing should be avoided, as should interruptions
- Plan for the conversation. Know the person's medical details and the medical team's view about prognosis. Have written resources available to leave with the person.
- Don't be focussed on note-taking or documentation during the discussion. The process will
 evolve over the course of the conversation. The conversation is more important than any forms
 or notes, however, be sure to document discussions afterwards.
- Make sure the right people are in the room. Tell person that you would like to provide some
 information about end of life care options and ask if they would like someone to be with them
 for the conversation.
- Find out the person's preferences in regard to how much information they want and with whom they want it shared.
- Make eye contact and be relaxed.
- Connect with them by responding empathically to important statements the person makes.
- Make more listening time. When people are permitted to speak they perceive that you are interested in them and in their views. This creates a good basis for an effective interaction.
- Answer questions openly and honestly. If you don't know the answer, tell them you will find out and come back to them.
- Use positive language. Focus on the options and care Cabrini can offer, and how these will remain open to the person, even if they seek other external services, including voluntary assisted dying.
- Reassure the person that they will not be judged whatever decisions and choices they make.
- Consider promoting Advance Care Planning or the Ashwood EOL Wishes form as an opportunity
 for patients and their families. This may help to empower the person to plan ahead for a time
 where they may no longer be able to make decisions for themselves. Inform the person of the
 benefits of discussing their end of life preferences with their family, caregivers or significant
 others as well as the medical team.





It can be difficult to be part of a conversation about someone's fears, concerns or plans for the end of their life. You may find it useful to consider and practise some phrases that you can use, rather than trying to "find the right words" in the heat of the moment.

Remember that by listening and discussing voluntary assisted dying with a patient, you are not forcing any particular view on them; you are giving them an opportunity to be heard and ask questions.

Acknowledging statements

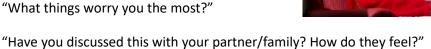
"That must have been really difficult to say..."

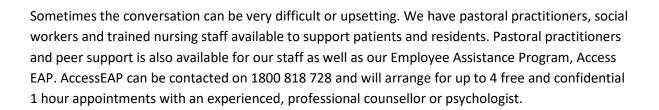
"Thank you for trusting me with this..."

"I can see you've thought a lot about this..."

Exploring questions

"What things are important to you?"





"I will try to consider myself the servant of all and treat them with respectful affection, reverence and love..."

St Frances Cabrini

