The Effectiveness of Empathic Communication Training on Goals of Care and End of Life Conversations

S.D. Petit, M. Lagunas, J. Deming, P. Horecki, R. Brustad | Collaboration between UWEC Nursing Department and Mayo Clinic Health System Northwest Wisconsin

**INTRODUCTION**

- Talking about death, dying, and establishing goals-of-care is never easy, even for trained oncology and palliative healthcare staff.
- Earlier conversations about palliative care can lead to more comfortable transitions to end-of-life care for patients.
- Clear and direct communication leads to greater patient satisfaction and less emotional stress.

**How do we help healthcare staff talk about death, dying and establishing goals-of-care so our patients have better outcomes?**

**Communication training workshops for healthcare staff can improve empathy, confidence, and knowledge of goals-of-care conversations.**

**Including role playing or the use of standardized participants in communication training is effective, and liked by learners.**

**RESEARCH AIMS**

To determine if a multidisciplinary training workshop delivered to oncology care staff can improve empathic communication skills and confidence through didactic teaching and role-playing sessions.

**METHODS**

**WORKSHOP OVERVIEW**

- The workshop consisted of 3 virtual sessions.
- Participants read course material before each session.
- Each virtual session used the same schedule:
  - Topic was reviewed by a facilitator.
  - Role playing sessions incorporated standardized scenarios.
- Participants trained specifically for workshop.
- Participants continued to rank discussing serious topics during goals-of-care conversations.

**SURVEYS**

- Surveys were sent to participants at three different times:
  - Before the workshop (PRE).
  - After the workshop (POST).
  - Six months after the workshop (6M).

**SAMPLE**

- All 49 healthcare staff employed within an Oncology care clinic were provided with the multidisciplinary training workshop.
  - 19% were providers.
  - 45% were nurses.
  - 36% were in other positions (CMA, scheduling, etc.)
- 47 completed the PRE survey.
- 40 completed the POST survey.
- 33 completed the 6M survey.

<table>
<thead>
<tr>
<th>Session</th>
<th>Content Topic</th>
<th>Empathy and compassion</th>
<th>Establishing trust and making exceptional care routines</th>
<th>Delivering serious news</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session #1</td>
<td>Early conversations</td>
<td>Goals of Care conversations</td>
<td>Dealing with Turbulence; Clarifying preferences and limits, discussing code status, change in health statues</td>
<td></td>
</tr>
<tr>
<td>Session #2</td>
<td>Smooth Landing</td>
<td>Mega-code: Putting it all together</td>
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**RESULTS**

- Knowledge scores statistically increased (p ≤ 0.05) from pre workshop (mean of 87.1, CI ± 5.3) to post workshop (mean of 94.4, CI ± 4.1). However, this increase in knowledge was not retained statistically at the 6-month post workshop (mean of 91.1 ± 5.1). (Figure 1)
- Most participants reported feeling somewhat confident or moderately confident in discussing most topics of goals-of-care conversations prior to the workshop (mean of 3.9, CI ± 0.3). After training (mean of 4.2, CI ±0.3), confidence in discussing goals-of-care conversations statistically improved (p ≤ 0.05) and was retained at 6 months (mean of 4.2, CI ±0.3, p ≤ 0.05). There was not a significant change in confidence between the post workshop and 6 months post workshop. (Figure 2)
- At all points throughout the study, participants reported that discussing serious news with patients, dealing with strong emotions, and talking with patients about dying were the most difficult aspects of goals-of-care conversations.

**DISCUSSION**

- Participant confidence and knowledge of goals-of-care conversations had successfully improved after the training workshop.
- Confidence was retained 6 months after the workshop.
- Participants continued to rank discussing serious news, talking with patients about dying, and dealing with strong emotions as the most difficult topics to discuss despite improvements in confidence and knowledge.
- Our results were consistent with that of previous studies in that participant confidence improved after training.
- In the future, we can provide our workshop to other departments and disciplines within the medical field.

**ACKNOWLEDGMENTS**

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