

Flexing Your Core: The Palliative Workout ECHO

Essentials of Communication

January 29th, 2026

AGENDA ITEM	NOTES
Introductions, Objectives	<p>Session Facilitators: Alix Baxandall, MSW & Sue Bartnik, BScN</p>
Session Key Points and discussion	<p>The presenters introduced the session focused on communication as part of the palliative care framework.</p> <ul style="list-style-type: none"> Communication is essential to palliative care delivery, equally important as symptom management expertise Virtual care presents unique challenges for sensitive conversations but can be valuable when in-person meetings aren't possible <p>Discussion</p> <p>When it comes to palliative care, what concerns you about communication? From your experience, what do you find most challenging ?</p> <ul style="list-style-type: none"> Sometimes physicians don't want to have conversation about prognosis. Could be their own discomfort with difficult conversations around death New nurses struggle to initiate palliative care discussions Navigating cultural differences in approach EOL Some healthcare providers try these conversations but if they don't go well do not try again Concerned about saying the wrong thing, concerned if don't have answers, uncertain when patients are ready for conversations <p>Active Listening</p> <ul style="list-style-type: none"> Shared fundamental active listening skills for effective communication: verbal and nonverbal. Self-reflection before conversations to separate personal feelings from the patient's experience Nonverbal skills: Eye contact (follow cues or ask directly to ensure appropriate), body language, acknowledge what people say, be fully present Watch for crossed arms, changes in eye contact, restlessness, looking away from loved ones <p>Serious Illness Conversation</p> <ul style="list-style-type: none"> Atul Gawande: How to Talk End-of-Life Care with a Dying Patient - Atul Gawande. He talks about 4 Key Questions: <ol style="list-style-type: none"> Do they know their prognosis? What are their fears about what is to come? What are their goals – What would they like to do as time runs short? What are the trade offs they are willing to make? How much suffering are they willing to go through for the possibility of added time?

	<ul style="list-style-type: none">• Wish, worry, wonder tool presented. A tool to discuss sensitive topics with patients to discover best plan for care moving forward in a person-centered way<ul style="list-style-type: none">○ Attendee shared her team adapted this to 'Notice, Normalize, Next Steps'. Found 'worry' can increase patient anxiety○ SPIKES another tool: Setting, Perception, Invitation, Knowledge, Emotions, Summary• Different conversation frameworks exist and can be adapted to different settings and personal styles• Conversations about serious illness should be a process rather than a one-time event• Building trust and rapport is essential before using any conversation framework.• Adapted versions of SIC guide co-created with specific populations: Adaptations of the Guide
	<p>Discussion</p> <ul style="list-style-type: none">• Discussed how using SIC language in conversations with patients and caregivers fits for participants• Caregivers hold valuable information and should be included in conversations when appropriate• Palliative care involves caring for everyone around the patient, not just patient themselves• Team-based approaches can help ensure patients and caregivers receive attention
	<p>Virtual care</p> <ul style="list-style-type: none">• Considerations for virtual care include policies, decision support tools, technical requirements, privacy concerns and cultural safety• Discussed how conversations with patients over the phone can be challenging trying to hold emotions with sensitive topics• Video calls can be easier as it allows for visual cues• Privacy considerations are important with virtual care – unsure who else might be in the room• Should complement but not replace in-person care when possible• Virtual care toolkit: https://www.healthcareexcellence.ca/en/what-we-do/all-programs/virtual-care-together/
Concluding thoughts	<ul style="list-style-type: none">• Preparation: take a moment to center yourself before engaging with a patient to ensure you are fully present.• Holistic View: recognize patients as individuals beyond their illness, acknowledging their entire being and life experiences.• Hold space: ask permission, presence, witnessing• Feedback and Improvement: encourage feedback in training settings to refine and improve communication skills continuously.