

Practical Considerations to Enhance Culturally Sensitive Communication: Adapting the Serious Illness Conversation Guide for Patients from Diverse Communities

Quality Forum, February 2021



Faculty Introductions and Acknowledgment of Traditional Territories



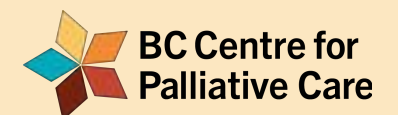
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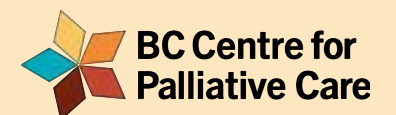


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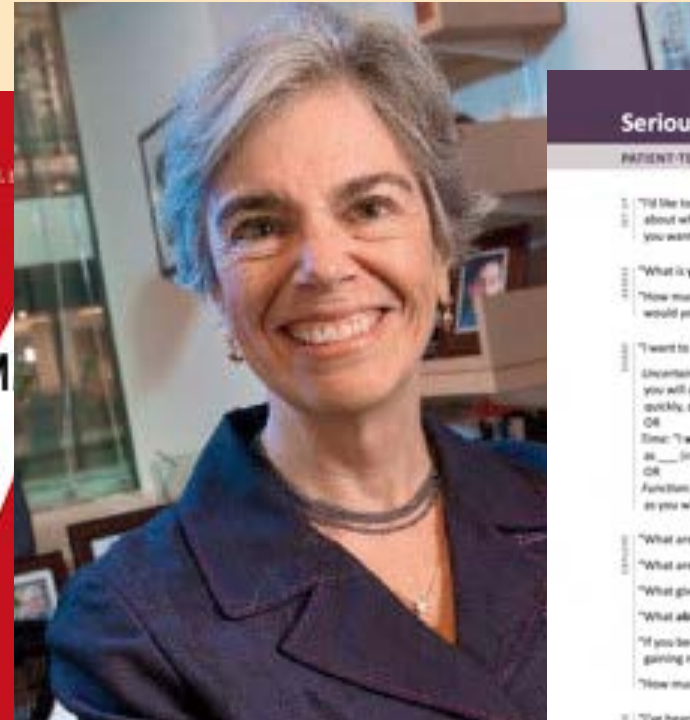
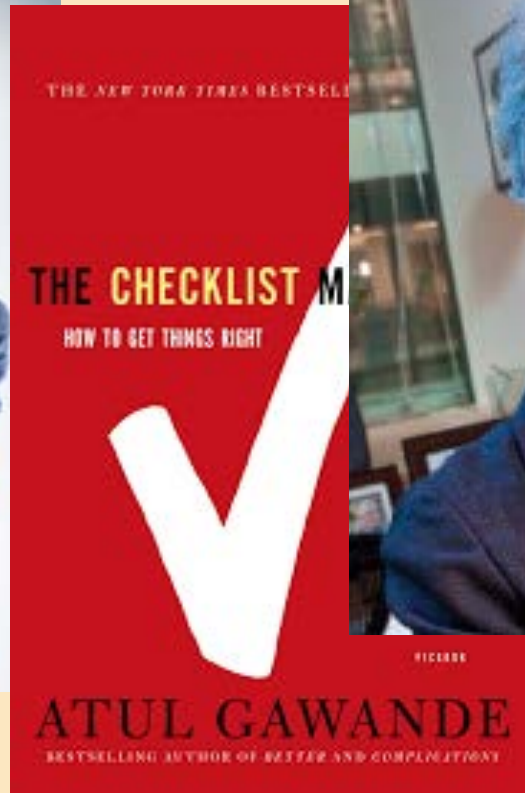


Objectives

To describe the rationale and process of adapting clinical tools to enhance cultural appropriateness for use in diverse communities, with a focus on an adaptation with First Nations.



The Serious Illness Conversation Guide: a recent history



Cultural safety:

Is an **outcome** based on respectful engagement that recognizes and strives to address **power imbalances** inherent in the health care system.

It results in an environment free of racism and discrimination, where people **feel safe** when receiving health care.

First Nations Health Authority (2020): Creating a Culture of Change

<https://www.fnha.ca/wellness/cultural-humility>

Patient/ family/ client: feels SAFE



Cultural humility

Is a process of **self-reflection** to understand personal and systemic biases and to develop and maintain **respectful processes** and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience.

First Nations Health Authority (2020): Creating a Culture of Change

<https://www.fnha.ca/wellness/cultural-humility>

Health care provider: internal process; ongoing



The Cultural Iceberg

Surface Culture

Food
Flags Festivals
Fashion Holidays Music
Performances Dances Games
Arts & Crafts Literature Language

Deep Culture

Communication Styles and Rules
facial expressions gestures eye contact
personal space touching
body language tone of voice
handling and displaying of emotion
conversational patterns in different social situations

Notions of:
courtesy and manners
friendship leadership
cleanliness modesty beauty

Concepts of:
self time past and future
fairness and justice
roles related to age, sex, class, family, etc.

Attitudes toward:
elders adolescents dependents
rule expectations work authority
cooperation vs. competition
relationships with animals age sin death

Approaches to:
religion courtship marriage raising children
decision-making problem-solving

Serious Illness Conversation Guide

Updated – Version 3

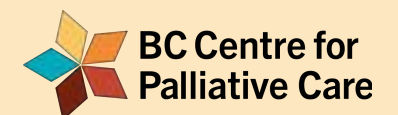
Organized as
2 parts:
Checklist &
Language

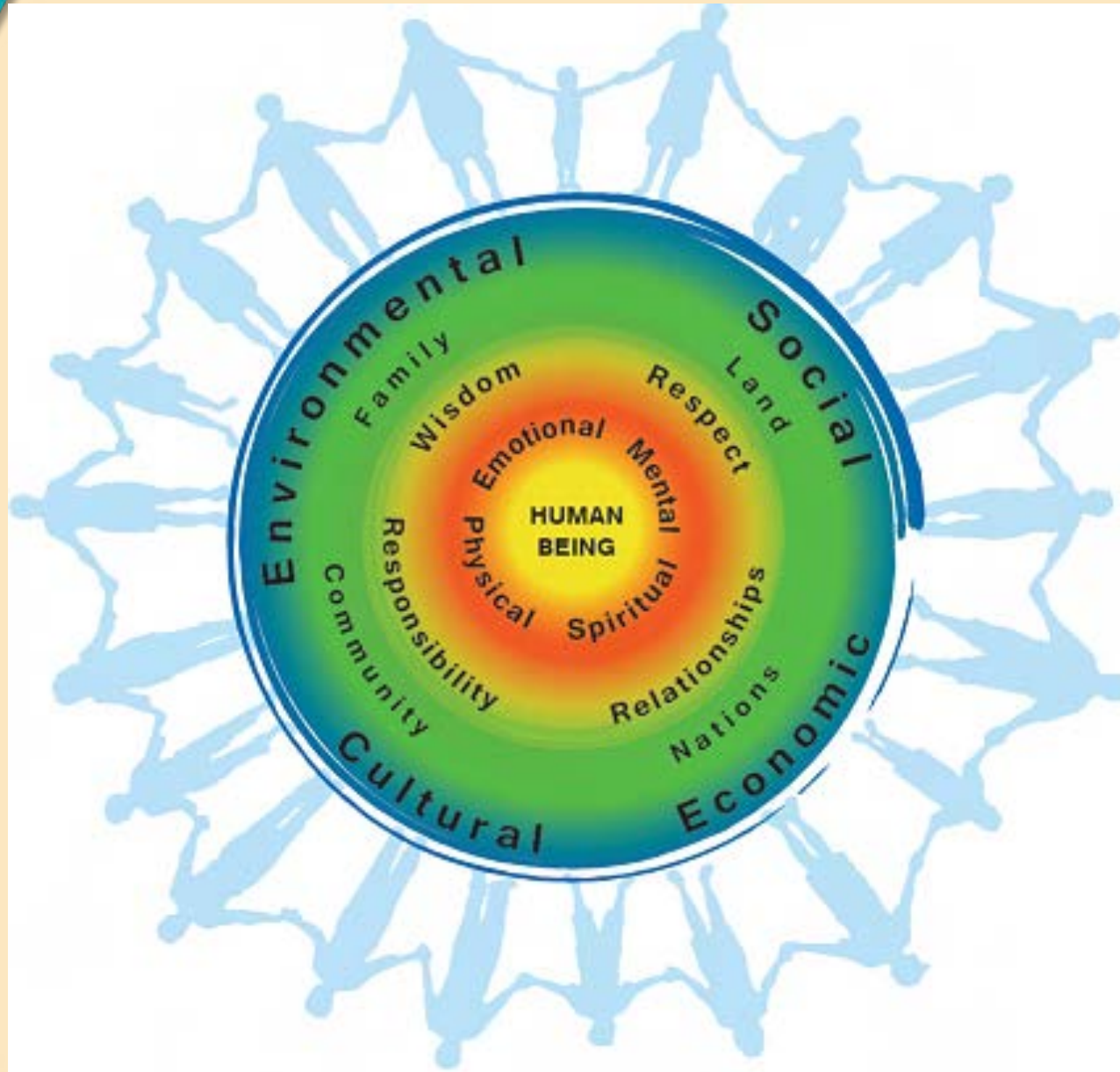
Serious Illness Conversation Guide	
CONVERSATION FLOW	PATIENT-TESTED LANGUAGE
1. Set up the conversation <ul style="list-style-type: none"> Introduce purpose Prepare for future decisions Ask permission 	<p>"I'd like to talk about what is ahead with your illness and do some thinking in advance about what is important to you so that I can make sure we provide you with the care you want — is this okay?"</p>
2. Assess understanding and preferences	<p>"What is your understanding now of where you are with your illness?" "How much information about what is likely to be ahead with your illness would you like from me?"</p>
3. Share prognosis <ul style="list-style-type: none"> Share prognosis Frame as a "wish...worry", "hope...worry" statement Allow silence, explore emotion 	<p>"I want to share with you my understanding of where things are with your illness..." Uncertain: "It can be difficult to predict what will happen with your illness. I hope you will continue to live well for a long time but I'm worried that you could get sick quickly, and I think it is important to prepare for that possibility." OR Time: "I wish we were not in this situation, but I am worried that time may be as short as ___ (express as a range, e.g. days to weeks, weeks to months, months to a year)." OR Function: "I hope that this is not the case, but I'm worried that this may be as strong as you will feel, and things are likely to get more difficult."</p>
4. Explore key topics <ul style="list-style-type: none"> Goals Fears and worries Sources of strength Critical abilities Tradeoffs Family 	<p>"What are your most important goals if your health situation worsens?" "What are your biggest fears and worries about the future with your health?" "What gives you strength as you think about the future with your illness?" "What abilities are so critical to your life that you can't imagine living without them?" "If you become sicker, how much are you willing to go through for the possibility of gaining more time?" "How much does your family know about your priorities and wishes?"</p>
5. Close the conversation <ul style="list-style-type: none"> Summarize Make a recommendation Check in with patient Affirm commitment 	<p>"I've heard you say that ___ is really important to you. Keeping that in mind, and what we know about your illness, I recommend that we ___. This will help us make sure that your treatment plans reflect what's important to you." "How does this plan seem to you?" "I will do everything I can to help you through this."</p>
6. Document your conversation	
7. Communicate with key clinicians	



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SI-00 2017-04-18





We were surprised to learn from the nurses that serve First Nations Communities that it may not be culturally safe.

Identify the issue

- We presented the SICG to nurses working with First Nations people and received feedback

Clarify the issue

- Nursing Online surveys
- Nursing sharing circles

Learn from others

- We reached out to others who have tested the guide within 'non white' populations

Seek feedback

- We tested the language within First Nations Communities

Seek Feedback



We asked the Elders and community members if the questions were appropriate

Green: We are happy with it as it is

Orange: Could do with some work

Red: We don't like it. It needs a rethink.

White: Is there any question that we did not ask that we should have?



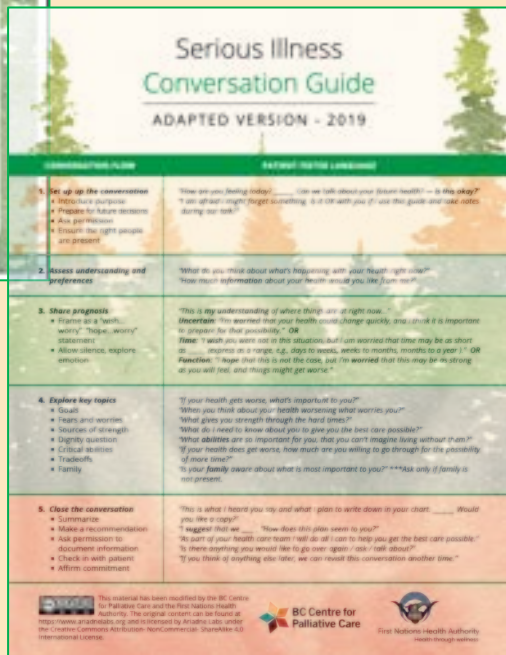
What they told us...



- Be direct
- Always ask to include family
- Do not have the SIC if you do not have a relationship with the client
- Always ask permission
- Do not use "we" – it is the client's illness not the clinician's
- Allow time for "Story Telling"



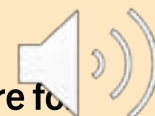
Preparing for and having a Serious Illness Conversation – Adapted Version



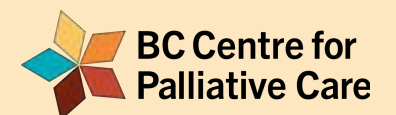
Some changes I would like to suggest for this session:

I recall the serious illness conversation in the past. I recall feeling it was really not through an indigenous lens. I can only say. Kudos for the updated version & new suggestions this N.E.F. Way to go FNHA & BC Center for Palliative Care.

I would like to know more about:



Adapting tools to enhance cultural sensitivity can have unintended consequences



What tools are available?

- Adapting the Conversation Guide

<https://implementation.aria.ariadnelabs.net/aria2/?s=Adapting+the+Conversation+Guide>

- Customizable version of the Serious Illness Conversation Guide in Word

<https://implementation.aria.ariadnelabs.net/aria2/resources/>

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Thank you!

BC Centre for Palliative Care
<https://bc-cpc.ca/cpc/>

