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| ***Lesson Plan*** | |
| **Topic** | Communication |
| **Teaching Unit** | **Communication Challenges in Palliative Care - 2h** |
| **Learning Outcome** | Evaluate and respond to challenging situations that may be encountered by employing facilitative communication skills and strategies. |
| **Summary** | Telling the patient and family bad news is one of the biggest challenges in medicine.  Patients may react differently when receiving bad news which will change their whole life within one moment.  The session aims to empower students to use communication strategies such as the communication model SPIKES (setting-perception-invitation-knowledge-empathy-summary) to best deal with the difficult task to give bad diagnosis and prognosis. |
| **Learning Objectives**  **C – Cognition**  **S – Skills**  **A – Attitudes** | **Cognition**  The student…   * recognizes when information may be perceived as “Bad News” * critically understand the sequence and relationship between the steps in breaking Bad News (from an accepted model – e.g. SPIKES.   **Skills**   * can demonstrate patient centered approaches to breaking bad news to simulated patients/family member.   **Attitudes**   * values the individual wishes of patients and their families - responds with patient centered, empathetic communication responses and questions. |
| **Learning Methods** | * C 1-2: Online plus seminar, interactive seminar * S 1: Simulation with actor patients or bedside training * A 1: Seminar |
| **Timing** | Following the suggested Learning Methods above here **an example schedule** for a 90 minutes teaching unit:  **10 min** (Online) seminar with an introduction video on the theory behind the SPIKES model.  **60 min** (2 x 30 min) small group work with 2 parallel performed simulated patients’ scenarios in which trained actor patients challenge the skills of the students to demonstrate the ability to use SPIKES.  A small group of 8 to 16 students should be divided by two (4 to 8 students) for the work in the simulated scenario (2 parallel scenarios!), there would be a change of the subgroups within the scenarios after 30 minutes. Only one student out of each subgroup could perform as a “doctor”, the others give feedback and reflect on the performances. The whole session is supervised by an academic moderator.  **20 min** Showing a video (8 min) in which the situation escalates (Judith by Grunenthal) followed by an interactive discussion taking into account the contents of the video and the own experiences within the role play situation. |
| **Bibliography/Resources** | *Oxford Textbook of Palliative Medicine*. Section 6: Communication and palliative medicine. 6.1. Communication with the patient and family.  pp 337-44. Fifth Edition 2015; paperback edition 2018 |