Parents' briefing notes

Title

Delivering difficult news to children's families

Summary/overview

This workshop aims to equip allied health professionals with skills in how to effectively deliver difficult news to children's families in a team environment. There is a particular focus on developing awareness of communication skills in these situations.

Following an introduction to the workshop, which will briefly cover aspects of simulation; there will be a short education session which will address communication skills required in delivering difficult news. Following this, participants will be divided into 2 groups and take part in a simulation activity with parents. The learners will be divided into 2 groups – A and B. There are 4 components to this simulation:

 i. Group A participates in the simulation activity initially with Group B observing (20 min)
 ii. Groups A and B debrief – parents not involved in this debrief (40 min)
 iii. Group B participates in the simulation while Group A observes (20 min)
 iv. Groups A and B debrief again – parents involved in this debrief (40 min)

Following simulation activities A and B, you will be asked to take part in a debriefing session which will address what happened in the scenarios and relate back to the learning objectives. In the debriefing, the parents come into the room *out of character* and discuss with the participants their observations as to how the simulation went.

Learning objectives

By the end of the simulation, participants will be able to:

 1. Identify the communication skills required in effectively delivering difficult news.
 2. Identify the key aspects of their own communication style.
 3. Demonstrate the communication skills required in effectively delivering difficult news.

Scenario

This simulation activity is set in a meeting room in a clinic setting and will involve two parents who will be involved in discussions regarding their son Thomas. Thomas has not been making progress in therapy and the treating therapists suspect cerebral palsy. They agree that a referral to a developmental clinic or paediatrician is necessary. Previous discussion with parents has indicated a refusal to acknowledge the child's lack of progress and a request that therapists' reports are kept confidential from the child care centre.

Participants' tasks

The aim is for participants to incorporate the material discussed in the workshop into the meeting with parents. Material discussed: delivering difficult news; emotional fall out and therapeutic communication style.

Names / age	Michael and Anita / Mid 30s
Reason for meeting	Michael and Anita have an 18 month old son, Thomas, with global developmental delay. Their son is currently receiving physiotherapy, occupational therapy, speech pathology and social work input. The treating therapists suspect cerebral palsy and agree that a referral to a developmental clinic or paediatrician is essential but are aware that this will be challenging for the parents to agree to.
Background	Anita has 3 older children from a previous marriage. None of the children are present at the meeting. Thomas lives at home with his parents and 3 older step-siblings. Father works shift-work and Mum has started working part-time recently. Thomas has recently commenced child care where his teachers have identified global delay and have also raised these concerns with his parents. Thomas' history has included: • Full-term normal vaginal delivery with Apgars 8 and 9 • Low birth weight • Slow to establish feeding • Unsettled baby Presentation: Small for age, not yet walking independently – bottom shuffles. Delayed gross and fine motor skills, delayed speech and language and continued feeding delays. Previous discussion between parents and allied health professionals has indicated a refusal to acknowledge their child's lack of progress and a request that therapists' reports are kept confidential from the child care centre. Parents previously failed to follow-up on initial referral to the team from the general practitioner when Thomas was 6 months old.
Opening lines	Anita: "Why did we have to come in today? Thomas seems to be going really well and we are not sure why we have to come." Michael: "This better be important as I should be asleep!"
Wardrobe/ makeup	Clothing as appropriate for parents.

Responses to participants

Physiotherapist *	You think that the physiotherapist is concentrating too much on his walking - you are aware that lots of children don't walk until they are 2!
Speech pathologist*	You are not sure why the speech pathologist is seeing Thomas – the teachers told you they were worried about his walking not talking.
Social worker*	You feel that the social worker is listening to you and you want them to 'stand up for you' with the rest of the team.
Occupational therapist*	You don't understand why an occupational therapist is saying Thomas is 'slow' in everything he does.
	*these roles may vary according to allied health professionals participating and one person will be identified as team leader.