

Project Number: 2020-1-PL-KA202-082075





## 1.1 TIP/Good practice Developed by



# **COVID-19 EMERGENCY** How to Communicate Bad News Over the Telephone

COVID-19 emergency is changing our way of communicating with patients' families. Often, a phone call is the only way to talk to family members. Increasingly, medical staff have to give clinical information -and often bad news- over the phone. It is normal to feel uncomfortable, nervous and worried about making a phone call to families, especially if we know that we have to communicate bad news like a diagnosis, deterioration in a loved one's condition or his/her death. It is also different than how medical staff usually handle these situations and may cause concern for the staff as well.

We can divide the phone call into 3 stages: 1. Opening; 2. Communication; 3. Closure.

#### 1. Opening

Goal: To make a phone call to a patient's family in a calm and empathic manner

Grounding: Before making the phone call, give yourself a moment (only a few seconds or minutes are necessary) to focus your attention on your body, where you are and what is surrounding you. In this way, you can compose yourself and be calm.

Pay Attention to Your Voice and Modulate its Tone: Remember that your voice is the only cue that a family member has to help him/her prepare emotionally for what you will say next.

Always Greet the Family Member Calmly: When you are calm, it helps the family member to remain calm. Remember, if you are in a hurry and anxious in your approach when speaking, it increases the alarm in the family member.

Introduce Yourself: Make sure to say your full name and from where you are calling, even if you have talked to the family member other times. Introducing yourself, or reminding the family member who you are, helps the other person reduce their alarm or apprehension.

### 2. Communication:

Goal: To communicate information about a loved one to a family member with compassion and understanding

Communicate Clearly and Briefly: Use simple words. Avoid medical terminology when possible. If you have to use medical language, be sure to explain what the terms mean.

Choose Words Accurately: Before the phone call, prepare what you want to say and how to say it, in order to be empathic and supportive.



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Give Warning that Bad News is About to Follow: Find out if the family member is alone

or with someone. Either way, invite the person to sit down: "Please sit down on a chair or on the sofa, I am afraid I have got some bad news, 2 hours ago your father, Charles...". When we have to communicate a death or a deterioration in conditions, it is essential to find a phrase to prepare the person to the fact that he/she is going to hear bad news. Use expressions like: "Unfortunately" or (only if you have to communicate the death) "I am very sorry to have to tell you that...". Use the persons' first name and the degree of relationship: "I am very sorry to tell you that your husband John..."

Be Direct and To the Point: Being direct is less stressful than saying too much. Share what happened, if it is appropriate, such as how their loved one was sedated and did not suffer during the process.

Leave Space for Silence and Grief: After communicating the bad news, leave time for the news to be digested and for the person to react. Keeping quiet while someone is crying (especially over the phone) is difficult. It is easy to feel helpless, but silence is a way to communicate that we are there, and we are not leaving the person alone. Every now and then, if appropriate, you can break the silence by saying some simple words like "I am sorry."

Leave Time for Questions: Listen, without interrupting. If the family member is not asking questions, say something like: "Are there any questions you would like to ask?" Give all the information you can, but not so much to be traumatic and overwhelming. When communicating the death of a loved one, be informed about what, when and how the death happened. It is most important to know and communicate if the person expressed a wish or said something for his/her loved ones before passing away. The family will often ask questions about that.

#### 3. Closure

Goal: To tell the family member/s what will happen next

Give Practical and Technical Information: Tell the family member/s the practical and technical information that they need to know. Explain what will happen next, who and when the family will be contacted, and where they will move the person, if relevant.

Psychological Services: Inform the family member/s that there are psychological services dedicated to helping them. Psychological service members will call, if they request it, and help them address their grief or stress, depending on what the family member/s need/s.

Inquire What Support Family Member/s Have After the Call: It is important to ask what the person will do right after the phone call and if he/she has thought about which friends or relatives to contact to have support. Help them if they have no plan.

Take Time for Yourself: Give yourself time to go back to a state of calm. The continuous requests for assistance are a burden that wears medical personnel out. Look at your emotional state without judging yourself.

Safeguard Your Emotional Health: Take advantage of the support systems offered to medical staff.

Thanks to EMDR Europe Association to share this recommendation with Psych.E.In. project.