

Presented by **Cynthia George, MSN, Family Nurse Practitioner (FNP)**
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Figure 1 consists of six panels. Panel (a) is a clinical photograph of a young child with a large, prominent abdominal mass. Panel (b) is an ultrasound image showing a large, echogenic mass in the abdominal cavity. Panel (c) is another ultrasound image, similar to (b), showing the abdominal mass. Panel (d) is an ultrasound image showing a more defined structure, likely the head of the pancreas, with a measurement line indicating its size. Panel (e) is an ultrasound image showing a similar structure to (d), with a measurement line. Panel (f) is an ultrasound image showing a similar structure to (d), with a measurement line.

A collage of four photographs. Top left: A man with long dark hair, wearing a black hoodie, walking a small tan dog on a leash. Top right: A family of four (mother, father, and two children) sitting in a field of yellow flowers. Bottom left: A woman with brown hair in a ponytail, wearing a blue sleeveless dress, sitting outdoors. Bottom right: A man in a grey and black long-sleeved shirt and dark pants, kicking a soccer ball on a grassy field.

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Complex Treatment Regimen



Typical Day when working:

6:10 am - Wake up
 6:20 am - Boil Water for Sinus Rinse, Make Tea or other beverage, Gather Nebulizers and Inhaled Medications
 6:30 am - 6:40 am - Inhale Albuterol (bronchodilator) via Nebulizer while strapped into The VEST (high frequency chest)
 6:40 am - 7:00 am - Inhale 7% Hypertonic Saline via Nebulizer while still doing The VEST
 7:00 am - 7:10 am - Inhale Pulmozyme via Nebulizer while still doing The VEST
 7:10 am - 7:30 am - Complete VEST treatment and Inhale Tobo antibiotic via Nebulizer
 7:30 am - 7:45 am - Prepare and do 8 oz hypertonic saline sinus rinse w/ baby shampoo in each nostril
 7:45 am - 8:15 am - Shower, Get Dressed and Ready for Work
 8:15 am - 8:25 am - Make tea, pack breakfast (sometimes lunch as well) and snacks/drinks for the day
 8:25 am - 8:30 am - Inhale Advair steroid, Inhale Spiriva, Squirt Nasonex in each nostril
 8:30 am - 9:00 am - Commute to work
 9:00 am - Arrive at work. (I am often late due to coughing fits while trying to shower or get dressed, or if I fall asleep du
 9:15 am - Eat breakfast at desk. Requires taking pancreatic enzymes, insulin (and checking blood sugar two hours aft
 12:00 pm - Eat lunch at desk. Requires taking pancreatic enzymes, insulin (and checking blood sugar two hours after)
 3:00 am - Eat afternoon snack. Requires taking pancreatic enzymes, and insulin if high carb.
 5:00 pm - If arthritis is flaring up, take tylenol or percocet to allow me to do effective airway clearance (exercise and che
 6:30 pm - Leave work, and drive to my mom's house for airway clearance - exercise and chest physical therapy. (This
 6:45 pm - 7:45 pm - Exercise: walking, aerobics, pilates, yoga, or strength training with light weights - depending on m
 recent hemoptysis episode, sometimes cannot tolerate high impact aerobics), always with frequent stops to
 7:45 pm - 8:30 pm - My mom performs manual chest physical therapy while I huff cough and use other clearance techn
 8:30 pm - Drive back home
 9:00 pm - Eat dinner prepared by my husband, or take out. Requires taking pancreatic enzymes, insulin (and checking
 9:20 pm - Rest (read, watch tv, email, computer) - need to take a break between dinner and evening treatment in order t
 9:40 pm - Clean all nebulizers and sinus rinse bottles (requires dis-assembling all nebulizer parts, washing in hot soapy
 10:00 pm - Gather Nebulizers and Inhaled Medications
 10:00 pm - 10:10 pm - Inhale Albuterol (bronchodilator) via Nebulizer while strapped into The VEST (high frequency che
 10:10 pm - 10:30 pm - Inhale 7% Hypertonic Saline via Nebulizer while still doing The VEST
 10:30 pm - 10:40 pm - Inhale Pulmozyme via Nebulizer while still doing The VEST
 10:40 pm - 11:00 pm - Complete VEST treatment while huff coughing or other airway clearance techniques
 11:00 pm - 11:20 pm - Inhale Tobo antibiotic via Nebulizer
 11:20 pm - 11:30 pm - Inhale Advair steroid, Squirt Nasonex in each nostril
 11:30 pm - Light snack before bed, take bedtime pills
 12:00 pm - Go to bed.

Co-production In Action



Co-Producing Interprofessional Round Work: Designing Spaces for Patient Partnership
[Qual Manag Health Care](#). 2017 Apr; 26(2): 70–82.

Karin Thörne, MD, Boel Andersson-Gäre, PhD, Håkan Hult, PhD, and Madeleine Abbrandt-Dahlgren, PhD

Recognize Different Perspectives

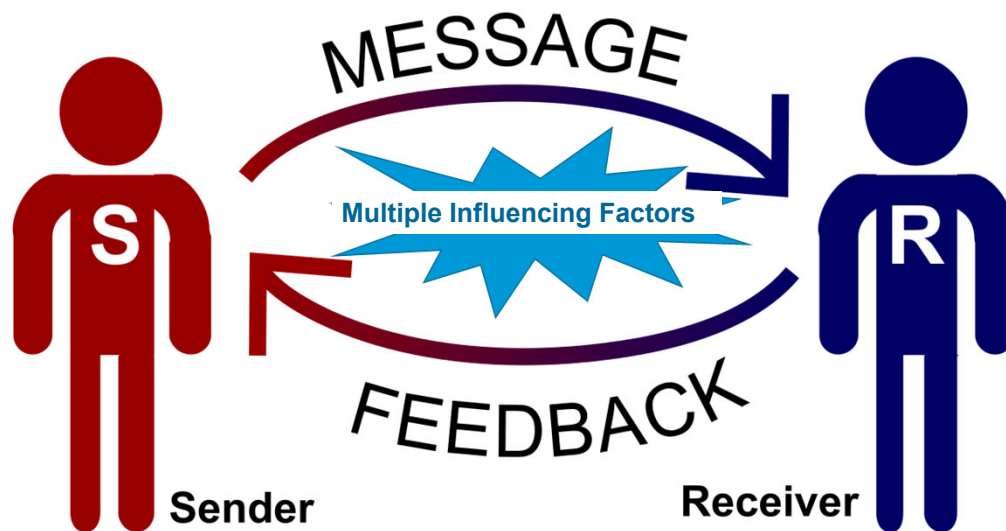


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Please stand if....

- If you have had difficulty discussing healthcare issues with a healthcare professional or patient or family member?
- If you have ever felt upset by a miscommunication in healthcare interactions.
- If you have ever experienced a communication conflict in healthcare interactions.



Personal Reflection

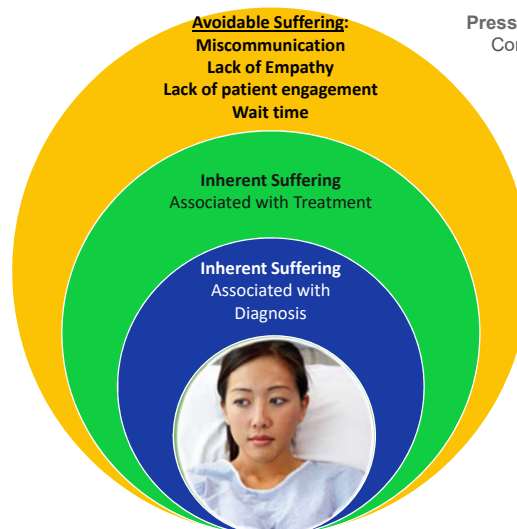
1. **Recall a time when a conversation with a healthcare professional, patient, or family member felt productive and successful**
 - What was your contribution that benefitted the encounter?
 - What did the other person contribute?
2. **Think about an interaction that did not go as planned**
 - What might you have contributed?
 - What might the other person have contributed?

Engaging as Partners



Focus on improving the bi-directional sharing of information

Relief of Suffering



Press Ganey's Compassionate
Connected CareModel™

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the Cystic Fibrosis Foundation 2019

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Relationship-Centered Communication leads to Better Outcomes



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Clinical Communication Preference Research

- Need for better conversations around:
 - social, psychological and economic challenges
 - preparation for transition to adulthood
 - sustaining daily care (for example: adherence/compliance to treatments).



Cooley, L, et al. Clinical communication preferences in cystic fibrosis and strategies to optimize care. Ped Pulm 2020:1-11

Research Findings

- Relationship is important
- How we communicate can foster or hinder relationships
- Request for advanced communication skills that enhance:
 - Trust – building
 - Negotiating agendas
 - Active listening
 - Collaborative goal - setting

Cooley, L, et al. Clinical communication preferences in cystic fibrosis and strategies to optimize care. Ped Pulm 2020:1-11

Partnership Enhancement Program (PEP)

- Relationship-Centered Communication Course
- Developed with the Academy of Communication in Healthcare (ACH)
- Full-day intensive workshop held at CF centers
 - Led by certified Trainers
 - Physicians, Nurse Practitioners, Social Workers, Registered Dietitians, a Mother of a young adult with CF, Physician Assistant, Doctoral Communication Specialists
- Developing a learning community
- Evaluating curriculum impact



PEP Skills

Establish
Trust

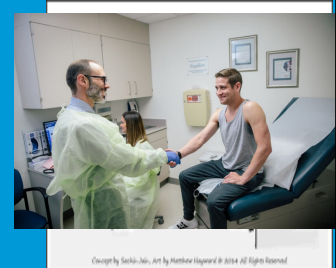
Create Open
Dialogue

Set Goals By
Partnering

PEP Skills

Establish
Trust

- Create rapport
- Minimize barriers
- Elicit list of patient/family items
- Negotiate the agenda





PEP Skills

Create Open
Dialogue

- Explore perspectives to understand ideas, expectations
- Acknowledge emotion
- Respond with empathy

"TO LISTEN"

Ear

聽

You
Eyes
Undivided
Attention
Heart

Attentive Listening: Skills Practice

- Work in pairs. You will be in two different roles for 30 secs each
- Storyteller: Describe a challenge that you are currently facing and willing to share (i.e., packing for trip, cleaning out house)
- Listener: Respond with **attentive listening skills**
 - Non-verbal's - nod head, lean forward, keep eye contact and be silent

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Debrief

1. For the storyteller roles:
What was it like to tell your story and experience attentive listening?
2. For the interviewer roles:
How was it to listen with attentive listening skills?

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PEP Skills



Set Goals By Partnering

- Understand what is known and expectations
- Share information in chunks
- Check understanding
- Agree on plan of care

A Download Encounter: Clinical



"Nasogastric tubes are inserted through the nose into the stomach. They can be inserted and removed every night or left in for up to a month at a time. The NG tube is then connected to a longer tube and a pump at night, delivering a high-calorie formula while the patient sleeps. With this method, it is possible to get an extra 1,000-1,500 calories at night.... Do you have any questions?"

ART Dialogue

ASK: *What do you know about NG-tubes?*

Parent: I have read about NG-tubes on the mom's CF blog and others say it is not easy to use.

RESPOND: *It sounds like what you've read raises concerns for you that it might be difficult to use.*

Parent: I think I just don't know enough about it.

TELL: *I brought a NG-tube to show you what it looks like.*

ASK: *Have you ever seen one of these?*

Parent: Yes on the mom's blog but it is good to be able to touch it. It's scary to think that I will need to feed her with this.

RESPOND: *It's understandable that you're scared when facing a new treatment. We are going to do this together and we will provide you with home health nursing each night until you feel comfortable doing it yourself.*

TELL: *Let's look at this video together about the NG-tube and then we can go over it step by step.*

Result of Using PEP Skills

Ensure what
matters to
patient/family is
addressed

Better
understanding of
patient/family
perspective

Increase
understanding of
information being
conveyed by each
person

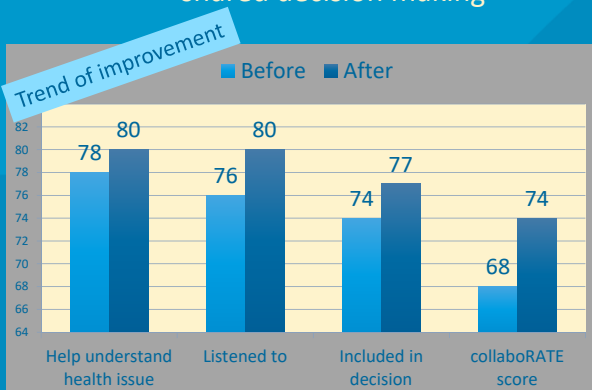
What We Learned

100%
Rated workshop good or excellent

- **Ease and wide applicability of skills**
 - “Can use skills in all settings – outpatient, inpatient, and phone encounters.”
- **Roadmap for effective and efficient communication**
 - “We learned 3 skill sets that can pretty much help guide us in any situation we might find ourselves in while interacting with patients and/or families.”
- **Opportunity to connect as a team and enhance clinic culture**
 - “...This was team building and gives us the opportunity to change the clinic culture together.”

Patient and Family Experience of Care

collaboRATE a measure of
shared decision making



integRATE a measure of
team integration

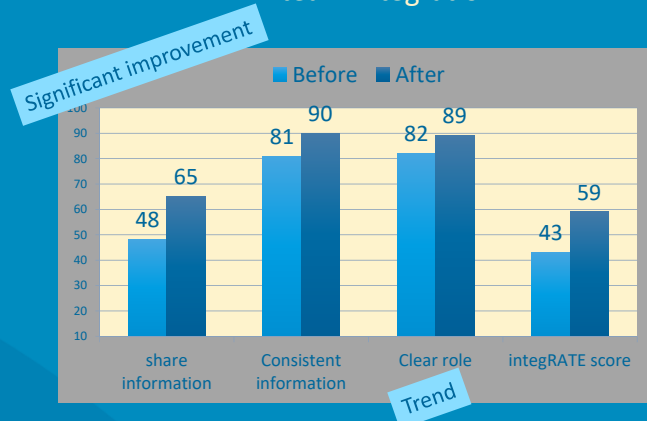


Table Talk

- What do you think could facilitate or hinder the use of relationship centered communication in your life experience?

Final thoughts and reflections?



Thank you!
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