ECHO MOLST + eMOLST: Honoring Preferences at End-of-life
Session 5
Crucial Conversations: Use Both Sides of Your Brain

Presenter

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Learning Objectives

• Recognize MOLST is a communication process that requires both reason and compassion
• Apply the 8-Step Protocol
• Demonstrate effective communication skills
Crucial Conversations Require Wisdom

- When one prevents one’s emotions from overtaking one’s rationality it is called **reason**.

- When one prevents one’s rationality from overtaking one’s emotions it is called **compassion**.

- When one can do both, it is called **wisdom**.
Thoughtful MOLST Discussions: Require Effective Communication Skills

- Express yourself clearly
- Ask open-ended questions
- Actively listen
- Reflect: paraphrase the message and communicate understanding back
- Resolve conflicts
Listen to Your Words and What the Family Hears

He’s “stable.” (ICU, multiple pressors, intubated, mechanical ventilation, dialysis, low blood pressure)

• What family hears: “He is getting better.”

Do you want us to do CPR?

• What family hears: “She has a chance of surviving if we do CPR.”

Do you want us to “trach” him?

• What family hears: “He has a chance of coming off the ventilator and going home.”
Avoid Language with Unintended Consequences

Avoid

• Do you want us to do “everything”?

• Will you agree to discontinue care?

• It’s time we talk about pulling back.

• I think we should stop aggressive/heroic therapy.

Consider

• Despite trying these treatments for several days, and around the clock, expert care, he is unfortunately too sick to respond.

• We will change treatment based on what she would want based on current goals for care.

• We will intensify care; his comfort and dignity are our highest priorities.

• Let’s discontinue treatments that are not providing benefit.
Communication Pearls
Clara Hopes and Fears

• What does your illness mean to you?
• What do you hope we can accomplish with our medical care?
• What are your greatest hopes about your health?
• What are your greatest fears?
• How can I help you best today?
• How can I help you and your family cope?
Hoping and Preparing

• “Lets hope for the best…”
  • Join in the search for medical options
  • Open exploration of improbable/experimental therapy
  • Ensure fully informed consent

• “...and prepare for the worst.”
  • Make sure affairs (financial/personal) are settled
  • Think about unfinished business
  • Open spiritual and existential issues
8-Step MOLST Protocol

1. Prepare for discussion
   - Understand patient’s health status, prognosis & ability to consent
   - Retrieve completed Advance Directives
   - Determine decision-maker & PHL legal requirements

2. Determine what the patient/family know

3. Explore goals, hopes and expectations

4. Suggest realistic goals

5. Respond empathetically

6. Use MOLST to guide choices & finalize patient wishes
   - Shared, informed medical decision-making and conflict resolution

7. Complete and sign MOLST
   - Follow PHL and document conversation

8. Review and revise periodically

Developed for NYS MOLST, Bomba, 2005; revised 2011
Step 1:
Prepare for the Discussion

• Screen patients to ensure patients are appropriate for MOLST
• Offer the opportunity to have a MOLST discussion
• Remember MOLST is voluntary
• Invite key individuals to hear the discussion – health care agent/surrogate and family
• Engage, educate & empower the patient, family and medical decision-makers
Step 1: Recognize Culture and Faith

- **Culture**
  - Group of people share race, language, religion, life values

- **Groups**
  - Ethnic, religious, regional, institutional or interest

- **Subcultures**
  - Traditional, bicultural, acculturated

- **Religion**
  - Christianity, Judaism, Islam, Hinduism, Sikhism, Buddhism, Jehovah Witness, etc.

- **Primary Language**

- **Look for commonalities**

- **ASK THE PATIENT!**
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**Step 2: Determine What the Patient & Family Know re: Health Status & Prognosis**

| Begin | Begin with an open-ended question. Be present. Actively listen.  
*What have you heard from other doctors about your condition?* |
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Inform</td>
<td>Inform the patient they are appropriate for a MOLST discussion based on MOLST screening questions.</td>
</tr>
<tr>
<td>Offer</td>
<td>Offer the opportunity to continue. Patient may not ready to accept his condition and prognosis. If so, return to discussion at a future date.</td>
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<tr>
<td>Respond</td>
<td>Respond with emotion and empathy.</td>
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Step 2: Discussing Prognosis

What sort of information about the future would help you?

Most people want to know about their prognosis – and don’t want to know – at the same time. What about you?

Would it be best to talk about the best case, the worst case and the usual case?
Step 2: Estimate and Communicate Prognosis

• Physicians markedly over-estimate prognosis
• Accurate information helps patient/family cope & plan
• Offer a range for average life expectancy
  • days to weeks
  • weeks to 3 months
  • 3 – 6 months (PCIA, PCAA, Hospice*)
  • 6 months to 1-2 years (MOLST**)
  • > 1 year (MOLST: e.g., persons of advanced age may have explicit wishes.)

* Would it surprise you if this person died in the next 6 months?
** Would it surprise you if this person died in the next 1-2 years?
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Step 3: Explore Patient Values, Beliefs, Goals for Care, Expectations

- Identify patient’s personal values and beliefs
  - What makes life worth living
  - What matters most

- Recognize patient’s personal goals for care
  - Longevity
  - Functional Preservation
  - Comfort Care

- Patient’s personal goals align with

- Are goals realistic?
- Does COVID-19 or other emergency change this?
Align Language with Person-Centered Goals

- **Longevity**: We want to ensure you receive the kind of treatment you want and needs in order to attend your son’s wedding

- **Functional Preservation**: We’ll do everything we can to help you maintain your independence

- **Comfort Care**: Your grandmother’s comfort will be our top priority
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Step 4: Suggest Realistic Goals

What do you understand about your father’s condition?

What do you hope we can accomplish with our medical care?

I wish for that too....

Unfortunately, no medicine, surgery or all the love you have for him...
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Step 5: Respond empathetically

- When you notice an emotion, respond with:
  - **Naming**: put emotion into words
  - **Understanding**: explain how you see it from their perspective
  - **Respecting**: admire what you genuinely feel good about
  - **Supporting**: offer your caring, expertise and presence
  - **Exploring**: when you’re not sure where to go, ask for more data
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Shared, Informed Medical Decision Making

- Will treatment make a difference?
  - Will treatment help or harm the patient?

- What are the burdens and benefits?
  - Will treatment help or harm the patient?

- Is there hope of recovery?
  - If so, what will life be like afterward?

- What does the patient value?
  - What are the patient’s goals for care?
Key Points

Physicians, NPs, PAs and clinicians need effective communication skills to conduct thoughtful MOLST discussions.

A thoughtful MOLST discussion is based on trust. Respect culture and faith perspectives. Ask your patient.

MOLST is voluntary. Screen and offer MOLST to appropriate patients. Ascertain the readiness to continue a MOLST discussion.

Use the 8-Step MOLST Protocol.

Ascertain the patient, Health Care Agent or Surrogate and family’s perception of current health status and prognosis.

Examine values, beliefs and current goals BEFORE discussing specific life-sustaining treatment.

Respect for patient’s goals and values has the potential to humanize the relationship and improve decision-making.
Resources
References


Thoughtful MOLST Discussions

8-Step MOLST Protocol

More at Resources on MOLST.org

VitalTalk.org – Vital Talk app available

CAPC.org/training – Communication Skills
Videos

CompassionAndSupportYouTubeChannel (ACP/MOLST video playlists)
http://www.youtube.com/user/CompassionAndSupport?feature=mhee

Demonstrating Thoughtful MOLST Discussions
Hospital & Hospice Settings
Nursing Home Setting
Using the 8-Step MOLST Protocol Video Series

Patient & Family Education
Writing Your Final Chapter: Know Your Choices. Share Your Wishes - Original release 2007; revised to comply with FHCDA - MOLST Video Revised 2015! (28:14)
https://youtu.be/CITAG19RX8w
Community Partners in Advance Care Planning
https://youtu.be/JKEMouEgGh8