

Adapted SPIKES Communication Framework for Paramedics

S — Set up	<ul style="list-style-type: none"> • Prepare yourself for delivering difficult news to people – practise communication skills just as you would clinical skills • Have a ‘script’ or ways of speaking about specific situations that you know and can adapt as needed • Recognise that these kinds of conversations are difficult for you too and acknowledge your own emotions • Think about the nonverbal aspect of the communication – position yourself at eye level rather than speaking from above, use touch to reassure and comfort if appropriate and the person is receptive to it • Consider reducing distracting noises, such as from your portable radio (where safe and appropriate) and put down medical equipment before starting the conversation • Make sure the patient and their family have the people with them who they consider important and want to be involved in the conversation • If English is not their strength in communication, find out if another person in the family group can support. Whenever possible arrange for professional interpreter services to support conversations about serious illness.
P — Perception	<ul style="list-style-type: none"> • Find out how much the patient understands about their illness and how serious they think it is (eg, <i>What do you know about your illness? What have you been told so far?</i>) • Give them time to answer, and listen actively • Watch for emotional cues and body language that indicate anxiety, confusion, understanding – this can help you to decide on the pacing and content of the conversation.
I — Invitation	<ul style="list-style-type: none"> • Use their names and speak politely • Ask if it’s okay to have this conversation: <ul style="list-style-type: none"> ○ <i>We need to talk about how serious the situation is, will that be okay with you?</i> ○ <i>Can I tell you what I understand about your illness and how things are at the moment?</i> ○ <i>I’d like to talk about what’s important to you so that we can provide you with the care you want, is that okay?</i> • Find out how much they want to know and the words to use: <ul style="list-style-type: none"> ○ <i>Some people like to know lots of details and prefer to speak very directly about what will happen, others don’t want to know too many details and use less direct words to talk about things – what would you prefer?</i> • Let their responses guide the information you give them in the next stage of the conversation.

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<p>K — Knowledge</p>	<ul style="list-style-type: none"> • Consider what the patient knows and needs or wants to know in order to work with you on managing their illness. This can include prognosis, treatment plan, support available etc, • Give them a warning immediately before the ‘bad news’: <ul style="list-style-type: none"> ○ <i>This might be difficult news to hear</i> • Share difficult news by framing as a ‘wish/hope... worry’ statement: <ul style="list-style-type: none"> ○ <i>I wish we were not in this situation, but I am worried that your illness is now at a point where the time you have left is getting short,</i> ○ <i>I hope that this is not the case, but I’m worried that you will not get any stronger, and that you’re likely to feel worse in the next days or weeks.</i> • Be clear and to the point when discussing options relating to resuscitation or other life-sustaining care: <ul style="list-style-type: none"> ○ <i>I am worried that when someone with your kind of illness needs CPR / a breathing tube, they are unlikely to recover afterwards.</i> • Ask questions about their goals, wishes and choices: <ul style="list-style-type: none"> ○ <i>Given the situation we’re in at the moment, what matters most to you?</i> ○ <i>If you were to take a turn for the worse, knowing what’s important to you can really help the us make the right decisions.</i> • It is important to make sure that family members do not feel burdened by decision-making. You can reassure them that it is the role of the healthcare team to make the decisions, but that knowing what’s important to them helps you make the right decision for them • Let people ask questions and answer them to clarify what you know and do not know. It is better to say that you don’t know the answer than to speculate or guess at the answers • Check understanding often and clarify where required: <ul style="list-style-type: none"> ○ <i>I know this is a lot to take in at the moment, do you need me to explain anything again?</i> • Give information in small chunks, be clear and direct, use plain language, use diagrams or drawings to help them understand • Repeat important points – people who are upset or shocked are not able to listen well.
<p>E — Emotions and empathy</p>	<ul style="list-style-type: none"> • Encourage and validate / check emotions: <ul style="list-style-type: none"> ○ <i>I can see that this is really upsetting for you</i> ○ <i>You seem angry – is that right?</i> • Ask the patient what they are thinking or feeling: <ul style="list-style-type: none"> ○ <i>What are you most worried about right now?</i> ○ <i>What is most important for you to know / do at this point?</i> • Respond with empathy, allow time for silence • Resist any temptation to minimise the distressing news or make it seem better than it is. Instead, continue to provide support: <ul style="list-style-type: none"> ○ <i>I know this is really difficult and I wish I had better news</i> ○ <i>I will do everything I can to help you through this situation</i>
<p>S — Summary and strategy</p>	<ul style="list-style-type: none"> • Provide a short summary of the plan or next steps, including information on tests, treatment options, referrals or other aspects of care • Help the patient and their family to identify coping strategies and suggest sources of support that they can access.

References:

1. Kaplan, M., *SPIKES: a framework for breaking bad news to patients with cancer*. Clin J Oncol Nurs, 2010. **14**(4): p. 514-6.
2. Ariadne Labs and Dana-Farber Cancer Institute. *Serious Illness Conversation Guide*. 2015.
3. Florin, A., *Breaking Bad News: A Mnemonic to Help*. EMS World, 2022(51): p. 1.

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