

Date:		Unit:	
Nurse/ Doctor assessed:			
Non-Compliant:	<80% compliance		
Compliant:	80-100% Compliance		

Equipment required:			
1. Real parent OR Role-player	2. N/A	3. N/A	4. N/A

Scenario *See details in table overleaf

State: "You are a health professional in a District Hospital. You have been asked to tell the mother about their child's suspected diagnosis of leukaemia. The child is 2 years old. The mother is 20 years. Her name is Thandi."

NO.	INDICATOR	NC	C	Comment
Setting & Set-Up				
1.	Ensures appropriate physical setting*			
2.	Introductions & use of mother and child's names			
3.	Shows awareness of mother's emotional state			
4.	Uses SOLER technique (if culturally appropriate)*			
Perception				
5.	Uses open-ended questions*			
6.	Encourages mother to tell story			
7.	Uses minimal encouragers*			
8.	Uses paraphrasing *			
Invitation				
9.	Clarifies any maternal misconceptions in her story			
10.	Ensures the mother is ready and listening			
11.	Highlights the need to give information as further decisions need to be made			
Knowledge				
12.	Uses language that is easily understood			
13.	Avoids using jargon			
14.	Gives information using the WPC approach*			
15.	Ensures understanding			
16.	Corrects any incorrectly understood information			
Empathy				
17.	Explores mother's feelings			
18.	Normalises mother's emotions			
19.	Shows empathy*			
20.	Avoids unrealistic expectations			
Summary & Strategy				
21.	Addresses any concerns of the mother			
22.	Describes all treatment options			
23.	Supports/encourages shared decision making*			
24.	Describes the plan going forward			
25.	Discusses the need for a follow-up session			
26.	Summarises and checks mother's understanding			
27.	Refers if necessary			
Totals				
Compliant total /27				
Final Percentage X100 =				%

In Discussion with the Individual:	
Gaps Identified:	
Action Plan:	

Assessed by:			
Sign:		Print:	Desig:

*Explanation of Communication Techniques	
Physical Setting	<ul style="list-style-type: none"> • Ensures privacy • Sitting space for all people • No barriers between provider and caregiver
SOLER Technique	<p>S – Sit squarely, facing the caregiver</p> <p>O – Open posture</p> <p>L – Lean slightly forward</p> <p>E – Eye contact (if culturally appropriate)</p> <p>R - Relax</p>
Open-ended Questions	<p>Questions that enable the caregiver to tell their story and not just give yes or no answers.</p> <p><i>Eg. "Could you tell me what has been happening to XX up till now?"</i></p>
Minimal Encouragers	<ul style="list-style-type: none"> • Head nodding • Use of phrases eg. "I see" or "mmm"
Paraphrasing	<p>Summarising what the caregiver has said using their terminology to ensure that the counsellor has understood what the caregiver communicated.</p>
The WPC Chunk Method	<p>Step 1 - Warn:</p> <p>To give the person a chance to prepare and brace themselves.</p> <p><i>Eg "I would like to talk to you about something that you will probably find difficult"</i></p> <p>Step 2 – Pause and Present:</p> <p>Pause until they are ready then present only one piece (chunk) of information at a time</p> <p><i>Eg. "I have some bad news about your diagnosis"</i></p> <p>Step 3 – Check Back:</p> <p>Ensures they have correctly understood & embeds the news in the person's memory</p> <p><i>Eg. "Shall we discuss that a bit before we move on"</i></p>
The Empathic Response	<ol style="list-style-type: none"> 1. Identify the caregiver's emotion. What is the caregiver feeling? 2. Identify source/cause. What exactly is causing the caregiver to feel that way? 3. Respond in appropriate manner
Shared Decision Making	<p>A collaborative process where caregivers & HCP work together to make healthcare decisions.</p> <p>Contains 3 main elements:</p> <ol style="list-style-type: none"> 1. Information sharing 2. Deliberation/ Discussion 3. Making the treatment decision