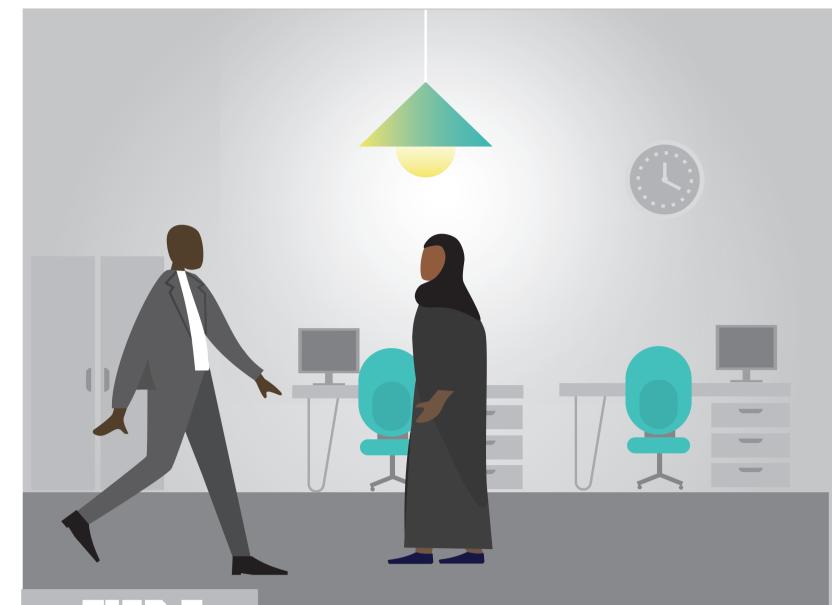
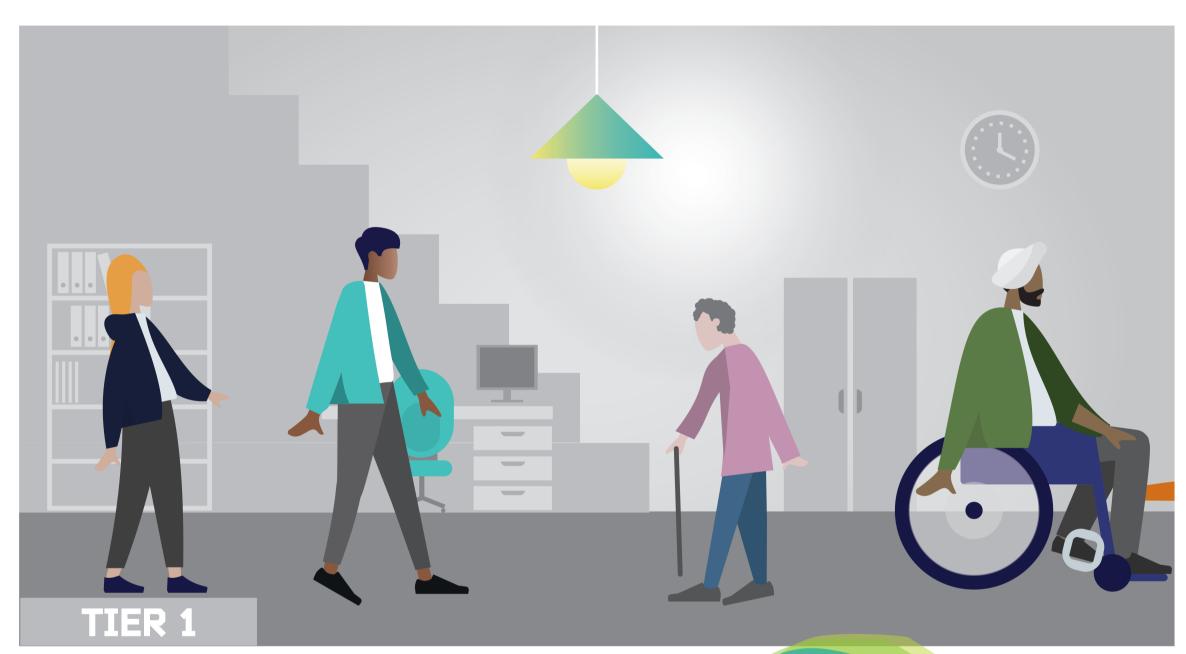
Enhancing communication skills across the workforce:

implementing a pilot for Tier 1, Tier 2 and Tier 3 EoLC education









Treetops
Hospice

Background:

Good communication skills are fundamental to the care that we give to patients and families. In line with the End of life Core Skills Education & Training Framework 1 all three Tiers of communication skills training were piloted in a blended approach, on line and face to face, to be accessible to all and with the ability to enhance confidence and embed skills across the multiprofessional community workforce. This included Tier 1 (incorporating Advance Care Planning (ACP) / LISTEN 2), Tier 2 (enhanced courageous conversations) and Tier 3 (Advanced Communication Skills Training/ ACST).

Aim:

Funding supported by ICB for 3 pilots, to establish uptake to differing staff groups, with evaluation to measure impact on confidence and competence in practice using East Midlands Evaluation Tool (EMET) ³. Assumptions and misconceptions within communication skills lead to lack of confidence and barriers in effective communication ⁴. Effective training has been shown to enhance professional behaviours and improve confidence / competence in initiating EoLC conversations with compassion.

Method:

- · 100 places for Tier 1, 3-hour communication skills. 3 x workshops online and 2 face to face, target all staff groups health and social care.
- · 100 places Tier 2, full day communication skills. 3 x workshops online and 2 face to face target clinical staff.
- · 50 places Tier 3. Two day workshops all face to face, target GP's and EoLC Leads

Profession Type	Tier 1	Tier 2	Tier 3
Advanced Care Practitioners	2	9	O
Allied Health Professionals	4	5	O
Registered Nurses	12	40	O
Enhanced Care Practitioners	0	9	О
Social Prescribers/Care Coordinators	30	7	О
GPs	4	14	45
End of Life Care Leads	0	O	3
Administrators	9	0	О
Others	12	3	О
Cancelled places	27	13	2

Results:

Delivery of Tier 1 and 2 evaluated with growth in confidence and competence equally whether delivered face to face or online. Tier 3 remains face to face, practice and feedback are both essential for ongoing development within competence and confidence building 5.

Examples of two questions taken from the adapted EMET³.

I feel confident to listen and talk with a dying person about issues surrounding their death

	Tier 1 Pre (%)	Tier 1 Post (%)	Tier 2 Pre (%)	Tier 2 Post (%)	Tier 3 Pre (%)	Tier 3 Post (%)
Strongly Agree	16.3	44.9	15.2	52.7	9.9	42.1
Agree	47	45.6	43.9	40	46	57.2
Total	63.3	90.5	59.1	92.7	58.9	99.3

I feel competent to recognise a person's verbal/non-verbal cues

	Tier1 Pre (%)	Tier 1 Post (%)	Tier 2 Pre (%)	Tier 2 Post (%)	Tier 3 Pre (%)	Tier 3 Post (%)	
Strongly Agree	16.1	44.9	25.8	70.9	11.2	60.7	
Agree	41.8	45.6	59.1	29.1	59	37.9	
Total	57.9	90.5	84.9	100	70.2	98.6	

Top 5 Skills to take back to practice (no particular order).

Empathy

3. LISTEN ² tool

- 2. Active listening
- 4. Be brave to have tender conversations
- 5. The power of silence and pauses

Tier 1

Communication Skills, essential to role, incorporating LISTEN ² principles

s is for support is for time is for endings N is for now

is for important

is for life

TIER 2

For more information on the LISTEN tool, contact education@treetops.org.uk

'Really insightful and good to have time to learn and develop skills which I can apply in everyday life and work. All staff should have to attend this training."

Tier 2

Communications Skills. Enhanced, courageous/tender conversations (including ReSPECT conversations), embedding RealTalk.

Find out more about RealTalk: www.realtalktraining.co.uk

'This (RealTalk) was very powerful ... being able to see real patients in real time.'

Real

Tier 3

Communication Skills. Advanced Communication Skills Training (ACST), experiential learning and learner led course, including role play with actors.

'Learning from each other in a safe environment. I enjoyed the fact we had a diverse group from different professions.'

Communications skills training at Treetops Hospice



Skill building is essential across all 3 Tiers, communication skills cannot be built by experience alone. Pedagogy of teaching approaches to further provide opportunities to embed and equip by labeling micro skills and role modeling skills of empathy are successful.

AUTHOR



sharan.harris-christensen@treetopshospice.org.uk

AUTHOR

Alison Hembrow Advanced Communications Skills Facilitator and I P and C Lead, Treetops Hospice

alison.hembrow@treetopshospice.org.uk

References:

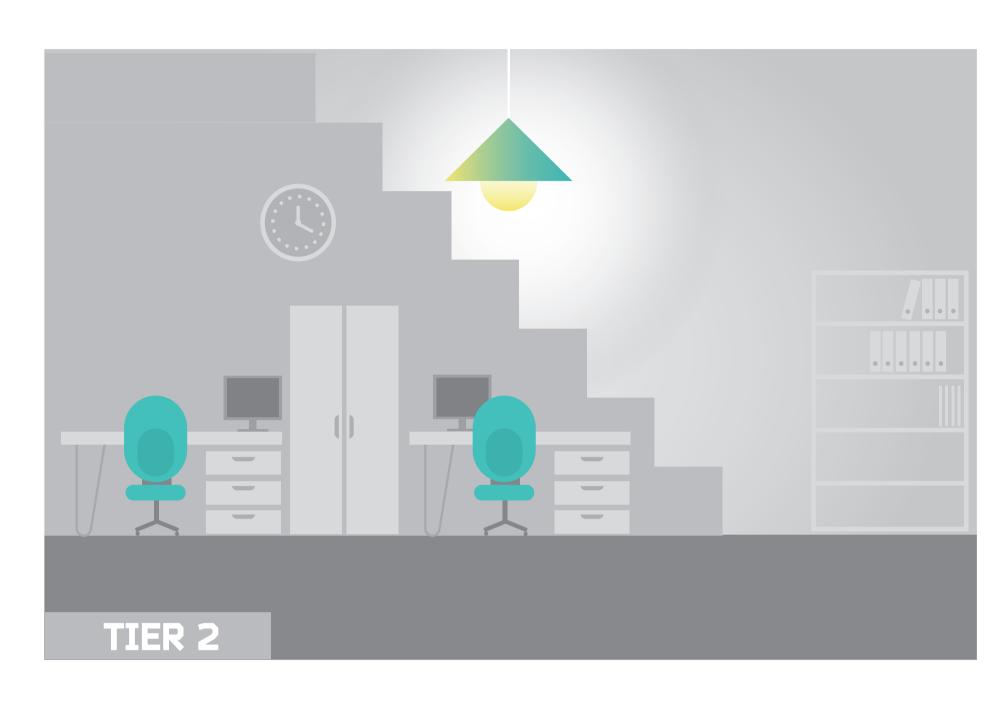
- 1. HEE & SFH. Common Core Principles and Competences for Social Care and Health Workers Working with Adults at the End of Life, Health Education England & Skills For Health; 2017.
- 2. Watson, S., and Hembrow, A. Exploration of volunteers and support workers initiation of quality of life conversations in hospice palliative day care. BMJ Supportive & Palliative Care; 2019: 129 (A55-A56).
- 3. Whittaker, B., Parry, R., Bird, L., Watson, S. and Faull, C. Development, validity, and reliability testing of the East Midlands Evaluation Tool (EMET) for measuring impacts on trainees' confidence and competence following end of life care training. BMJ Supportive & Palliative Care, 8(4); 2018,pp.439-446.
- 4. RCP. Talking about dying 2021: How to begin honest conversations about what lies ahead, Royal College Physicians; 2021.
- 5. Norman MK, Lotrecchiano GR. Translating the learning sciences into practice: A primer for clinical and translational educators. Journal of clinical and translational science. 2021 Jan;5(1):173.
- Further reading Parry, R., Pino, M., Harris-Christensen, S. RealTalk Resources for Clinical Trainers: Embedding Naturalistic Recordings and Conversation Analytic Evidence into Existing Practice in Communication Training. In: Sneijder, P., Klarenbeek, A. (eds) Interventions in Health Care Interaction. Palgrave Studies in Discursive Psychology. Palgrave Macmillan. 2024, Cham. https:// doi.org/10.1007/978-3-031-59551-6_2



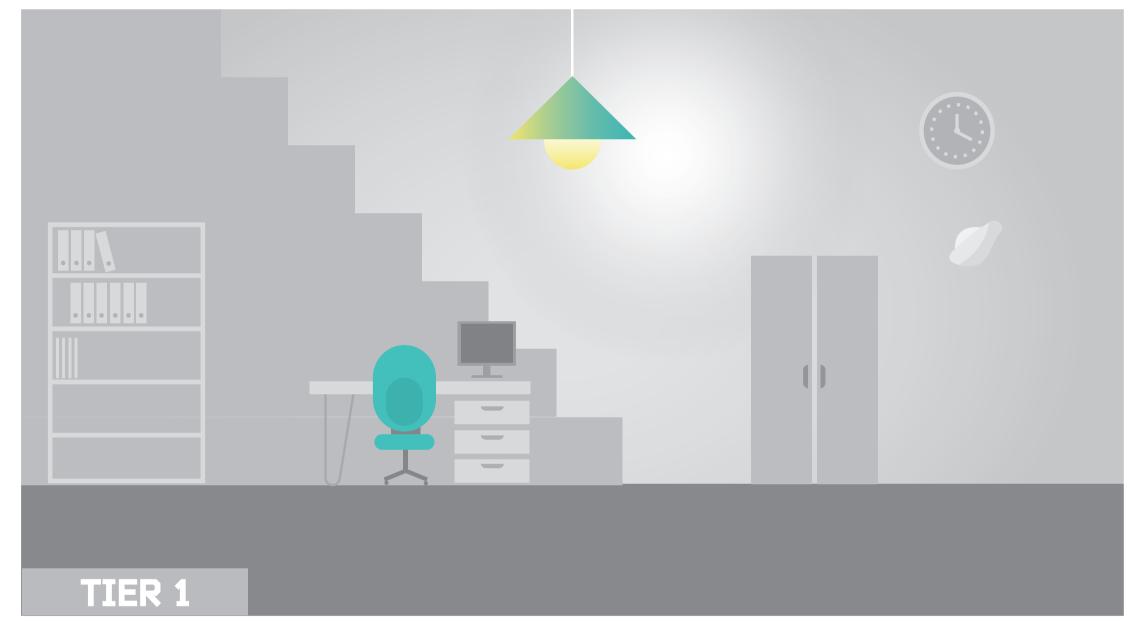


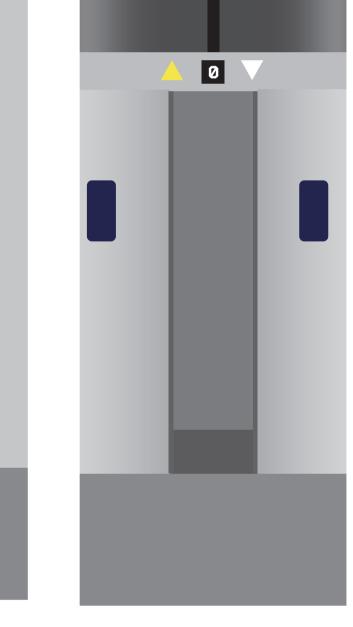
Enhancing communication skills across the workforce:

implementing a pilot for Tier 1, Tier 2 and Tier 3 EoLC education



TIER 3





Treetops
Hospice

Background:

Good communication skills are fundamental to the care that we give to patients and families. In line with the End of life Core Skills Education & Training Framework 1 all three Tiers of communication skills training were piloted in a blended approach, on line and face to face, to be accessible to all and with the ability to enhance confidence and embed skills across the multiprofessional community workforce. This included Tier 1 (incorporating Advance Care Planning (ACP) / LISTEN 2), Tier 2 (enhanced courageous conversations) and Tier 3 (Advanced Communication Skills Training/ ACST).

Aim:

Funding supported by ICB for 3 pilots, to establish uptake to differing staff groups, with evaluation to measure impact on confidence and competence in practice using East Midlands Evaluation Tool (EMET) ³. Assumptions and misconceptions within communication skills lead to lack of confidence and barriers in effective communication ⁴. Effective training has been shown to enhance professional behaviours and improve confidence / competence in initiating EoLC conversations with compassion.

Method:

- · 100 places for Tier 1, 3-hour communication skills. 3 x workshops online and 2 face to face, target all staff groups health and social care.
- · 100 places Tier 2, full day communication skills. 3 x workshops online and 2 face to face target clinical staff.
- · 50 places Tier 3. Two day workshops all face to face, target GP's and EoLC Leads

Profession Type	Tier 1	Tier 2	Tier 3
Advanced Care Practitioners	2	9	0
Allied Health Professionals	4	5	0
Registered Nurses	12	40	0
Enhanced Care Practitioners	0	9	0
Social Prescribers/Care Coordinators	30	7	0
GPs	4	14	45
End of Life Care Leads	0	0	3
Administrators	9	0	0
Others	12	3	0
Cancelled places	27	13	2

Results:

Delivery of Tier 1 and 2 evaluated with growth in confidence and competence equally whether delivered face to face or online. Tier 3 remains face to face, practice and feedback are both essential for ongoing development within competence and confidence building 5.

Examples of two questions taken from the adapted EMET³.

I feel confident to listen and talk with a dying person about issues surrounding their death

	Tier 1	Tier 1	Tier 2	Tier 2	Tier 3	Tier 3
	Pre (%)	Post (%)	Pre (%)	Post (%)	Pre (%)	Post (%)
Strongly Agree	16.3	44.9	15.2	52.7	9.9	42.1
Agree	47	45.6	43.9	40	46	57.2
Total	63.3	90.5	59.1	92.7	58.9	99.3

I feel competent to recognise a person's verbal/non-verbal cues

57.9

	Tier1 Pre (%)	Tier 1 Post (%)	Tier 2 Pre (%)	Tier 2 Post (%)	Tier 3 Pre (%)	Tier 3 Post (%)	
Strongly Agree	16.1	44.9	25.8	70.9	11.2	60.7	
Agree	41.8	45.6	59.1	29.1	59	37.9	

Top 5 Skills to take back to practice (no particular order).

Empathy

Total

- 2. Active listening
- 3. LISTEN ² tool
- 4. Be brave to have tender conversations
- 5. The power of silence and pauses

70.2

Tier 1

Communication Skills, essential to role, incorporating LISTEN ² principles

s is for support is for time is for endings N is for now

is for important

is for life

For more information on the LISTEN tool, contact education@treetops.org.uk

Tier 2

Real Communications Skills. Enhanced, courageous/tender conversations (including ReSPECT conversations), embedding RealTalk.

Find out more about RealTalk: www.realtalktraining.co.uk

Tier 3

Communication Skills. Advanced Communication Skills Training (ACST), experiential learning and learner led course, including role play with actors.

Skill building is essential across all 3 Tiers, communication skills cannot be built by experience alone. Pedagogy of teaching approaches to further provide opportunities to embed and equip by labeling micro skills and role modeling skills of empathy are successful.

Communications skills training at Treetops Hospice



AUTHOR

Sharan Harris-Christensen Manager of Virtual Education Centre in PEOLC and Communication Skills, Treetops Hospice

sharan.harris-christensen@treetopshospice.org.uk

AUTHOR

Alison Hembrow Advanced Communications Skills Facilitator and I P and C Lead, Treetops Hospice

alison.hembrow@treetopshospice.org.uk

References:

- 1. HEE & SFH. Common Core Principles and Competences for Social Care and Health Workers Working with Adults at the End of Life, Health Education England & Skills For Health; 2017.
- 2. Watson, S., and Hembrow, A. Exploration of volunteers and support workers initiation of quality of life conversations in hospice palliative day care. BMJ Supportive & Palliative Care; 2019: 129 (A55-A56).
- 3. Whittaker, B., Parry, R., Bird, L., Watson, S. and Faull, C. Development, validity, and reliability testing of the East Midlands Evaluation Tool (EMET) for measuring impacts on trainees' confidence and competence following end of life care training. BMJ Supportive & Palliative Care, 8(4); 2018,pp.439-446.
- 4. RCP. Talking about dying 2021: How to begin honest conversations about what lies ahead, Royal College Physicians; 2021.

5. Norman MK, Lotrecchiano GR. Translating the learning sciences into practice: A primer for clinical and translational educators. Journal of clinical and translational science. 2021 Jan;5(1):173.

Further reading Parry, R., Pino, M., Harris-Christensen, S. RealTalk Resources for Clinical Trainers: Embedding Naturalistic Recordings and Conversation Analytic Evidence into Existing Practice in Communication Training. In: Sneijder, P., Klarenbeek, A. (eds) Interventions in Health Care Interaction. Palgrave Studies in Discursive Psychology. Palgrave Macmillan. 2024, Cham. https:// doi.org/10.1007/978-3-031-59551-6_2

Download this poster

