Leading Family Conferences: Recognizing and Applying Oncology Social Work Strengths

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May 2015

Why family conferences in oncology and palliative care?

- An ongoing need for improving communication in oncology, palliative and end of life care
- Conferences allow for coordinated communication among patients, family members and health care providers
- Family conferences offer opportunity for inclusion of families in care, exchange of information, listening, decision making, and emotional processing.

Importance of family orientation

- Illness and death occur in the social context of family, regardless of family functioning or family presence/absence
- Family should be defined by the patient (not limited to biological or legal relatives)
- Family members’ experience of their loved one’s end of life will remain in their memory and influence their grief process
Family conference benefits

- Demonstrate providers’ interest and support
- Increase family’s sense of involvement in the patient’s treatment
- Help determine and meet the family’s needs
- Provide useful and important information
- Help determine misinformation and elicit concerns
- Offer opportunities for problem solving
- Provide a forum for discharge planning
- Offer opportunities for consensus building

Benefits (continued)

- Promote a working alliance between family and health care providers (relationship building)
- Provide an opportunity for interdisciplinary collaboration, including provision of consistent and unified information to the patient and family
- Offer possibility of bringing all participants to the "same page" about a situation
- Enable staff to assess and observe family’s coping styles, concerns and support

Family conferences: Potential for optimal interdisciplinary care

- Centrality of the patient, family, and patient care
- Unity of purpose; shared goal setting
- Coordination of practice
- Element of interdependence
- Cooperation rather than competition
Family conference: working definition

- Family conferences in the health care setting are most commonly (pre-planned) one session meetings involving patients, family members, and health care providers to discuss issues relevant to the patient’s health.
- Family conferences are not family therapy.

A research based model

- 24 inpatient family conferences for patients facing serious illness and end of life were videotaped and/or audiotaped in 2 medical centers
- Semi-structured interviews were conducted with conference participants and audiotaped to learn about their experiences and views of the conference
- A multidisciplinary team of researchers conducted the qualitative analysis that led to the model

Conference composition

- Organizational elements: important
  - Setting, participants, structure
  - Structure: the “list” that has appeal
- Process components: critical
  - Negotiation
  - Personal stance
  - Emotion work
Organization: Structure
- Preparation
- Introductions
- Agenda setting
- Patient history
- Diagnosis/prognosis
- Patient/family explanatory models
- Care plan/discharge plan
- Closing/wrap up
- Follow up

Organization: Setting
- Room size
- Chairs
  - Number in relation to space and participants
  - Configuration
    - Patient/family/provider arrangement
- Comfort/discomfort

Organization: Participants
- Multidisciplinary professional team
  - All providers relevant to the conference topic
- Having “everyone” there - simultaneous presence
Preparation

- Written information for family (resources, brochures, numbers)
- Patient’s information; test results
- Interdisciplinary team coordination
- Cultural familiarity and acknowledgement

Interdisciplinary team preparation

- Communicate ahead of time; meet if possible
- Decide who will lead the meeting and the roles of team members
- Provide a consistent, united approach to family
- Recognize that team agenda may differ from patient/family agenda

Introductions

- Frequently forgotten
- Orient all participants
- Demonstrate respect
Agenda setting

Whose agenda?

Patient history
- Overview of what has happened up to this point in patient’s illness/care (how did we get here)
- Orients the group
- Excellent opportunity to determine misinformation, misunderstanding, and major differences in explanatory models

Diagnosis / Prognosis
- Diagnosis information
- Prognosis information

Patient/family explanatory models

How do people understand and make sense of their experiences?
**Care plan / Discharge plan**

- Honest
- Clear
- Specific - people want the “nitty gritty”
- Frequently involves negotiation

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**Closing / Wrap up**

*Reviewing what was concluded / decided and how everyone will proceed*

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**Follow up**

- Follow through on agreements from family conference: phone contact, resources, etc.
- Continues stream of communication
- Builds trust
Negotiation

- Negotiating parties
  - Provider - provider
  - Provider - patient - family
  - Patient - family

- Negotiated content
  - Explanatory models of illness and events
  - Recommendations and care plans
  - What matters (values), what is needed and what is possible

Personal stance

- Active listening
- Communication elements
  - Honesty
  - Respect
  - Empathic behavior
  - Jargon-free plain language
  - Humor
- Body language
  - Open/closed - sitting position, hand motions
  - Physical touch as expression of empathy

Emotion work: the gatekeeper

- Emotion work
  - Empathic, sensitive and clear approach to the patient/family emotional needs
  - Addresses psychosocial and spiritual realms
  - Self awareness of one’s own emotional reactions - sadness, anger, frustration, guilt, helplessness, inadequacy, vulnerability…..

- Providers’ engagement in emotion work in the family conference is CENTRAL to achieving meaningful connection
Advice to providers: the voice of patients and families

- Conduct more family conferences throughout the course of care
- Have conferences sooner in the trajectory of care
- Create family conferences that encourage questions, concerns and full participation
- Be honest
- Venture into the realm of emotion - yours and theirs

Social workers are outstandingly educated and qualified to coordinate, lead and co-lead this clinical intervention.

Social work strengths in this setting

- Communication skills
- Organizational skills
- Active listening skills
- Understanding of group process
- Knowledge about family systems and family dynamics
Social work strengths in this setting (continued)

- Understanding the systems approach
- Active use of the biopsychosocial-spiritual perspective
- Advocacy for the vulnerable
- Emphasis on cultural sensitivity
- Orientation for introspection and insight

Oncology social work roles in family conferences

- Creating opportunity for open exchange and discussion
- Sharing and exchanging information
- Shared hearing of information and discussion
- Clarifying misinformation and misunderstanding
- Identifying participants’ understanding of situation
- Identifying patient and family explanatory models for the illness and situation
- Decision making and negotiation

- Problem solving
- Addressing conflict/resolving conflict
- Building consensus
- Building trust
  - Empowering families in the medical setting
  - Facilitating family involvement in care
- Advancing interdisciplinary team collaboration and communication
- Providing a cohesive team message
- Providing a focus on care, not treatment alone
- Demonstrating empathy
Oncology social work roles in family conferences

- Demonstrating importance of family-oriented care
- Observing family dynamics
- Exploring family communication patterns
- Identifying family strengths
- Inviting and identifying family concerns
- Addressing family concerns
- Establishing an emotional connection with the family
- Listening to family
- Providing time for families to speak
- Expressing/demonstrating non-abandonment

A great fit: OSW roles and leadership in family conferences

- Team building
- Vision and goal setting
- Respect
- Care
- Clarity
- Integrity
- Compassion
- Engagement
- Effective communication
- Empowerment
- Collaboration
- Genuineness
- Self-awareness
- Sharp perception
- Responsiveness to the group’s needs
- Knowledge of the organizational / environment
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Demonstrating our expertise

- Oncology social workers bring a unique skill set to family conferencing that is very valuable to excellent patient/family care

- Applying our knowledge and skills in family conferences is a powerful method for educating others about the extensive range of our professional contributions
Related references

