Afternoon breakout group – Communication Scenarios:

Scenario 1

Ethan is a 4 year old boy with an undiagnosed neurological condition. In the last 12 months his condition has deteriorated, and his swallow has become unsafe. He has been admitted to ITU four times, twice requiring invasive ventilation and cardiovascular support. Each time he recovers to a lower baseline health than before. At a multidisciplinary team meeting it is discussed that in the event Ethan becomes unwell again, admission to intensive care, ventilation and invasive intravenous access are unlikely to be in his best interest.

* Discuss the team’s concerns about Ethan’s deterioration with his parent and discuss treatment options should Ethan become unwell again. You can use the PAC plan to support this conversation or fill it in with the parent after the discussion.

Scenario 2

Lilly is a 9 year old girl with severe cerebral palsy. She is physically very dependant but able to communicate using an i-pad and attends school. She suffers with chest infections requiring admission every few years. Her condition has been stable for some years now. Her parents provide all her care and have declined community nursing support. Her father has recently been unwell with a heart complaint and her maternal grandmother is unwell in a hospice with cancer.

Lilly’s parents want to meet with you to discuss her condition. They have an old PAC plan for full active treatment. They wish to change it to comfort care only and for no admission to hospital if Lilly became unwell. They both look exhausted and are clearly struggling to cope with everyone having been so unwell. You are concerned that their wishes to limit life-sustaining treatment for Lilly might not be in her best interests.

* Discuss their concerns about Lilly and explore their views on her advanced care plan. You can use the PAC plan to support this conversation or fill it in with the parent after the discussion.

Scenario 3

Paul is 16 years old. He has cancer of the Larynx. He has had surgery and radiotherapy but his tumour has continued to grow. Paul’s prognosis is very poor and he is weak and increasingly sleepy. His oncologist is currently exploring options for treatment trials and Paul remains optimistic that a cure will be found. The team are concerned that Paul has not planned for if experimental treatment fails and may have a short time to realise any goals and wishes in this scenario.

* Discuss with Paul the possibility of experimental treatment not working and what treatment and support could be offered should Paul’s condition deteriorate. You can use the PAC plan to support this conversation or fill it in with the parent after the discussion.

Scenario 4

Paul is 3 years old he has a neurological condition and has deteriorated significantly over the past six months. His seizures are getting difficult to control and his parents have asked to complete a PAC plan as they are afraid Paul will die at home - they have heard of another family whose child died at home and the police attended as an ambulance was called.  
  
 - Discuss the parents’ wishes for Paul and complete the PAC plan. 

Scenario 5 (Nurse or care assistant specific scenario)

Sophie is 8 years old and has severe cerebral palsy. She has recently had several chest infections which have required admission to hospital and the last admission resulted in her being ventilated. You are at Sophie's house for a respite shift and mum tells you one of the doctors asked her if Sophie has a PAC plan she says she has heard about them from other parents and was wondering if you thought Sophie should have one.

* Explore with Sophie's mum/dad what they understand about the process and what thoughts she has in relation to PAC planning.

Scenario 6 (Joint scenario with two parents)

Jeremy is an 18 months old with a rare neurometabolic condition that has uncertain prognosis. He is constantly in the hospital for seizures and chest infections requiring intensive care admissions. He is back in the hospital yet again with pneumonia. His parents ask to talk to you about a phrase they heard a doctor mention, ‘ceiling of care’. Mum is adamant that Jeremy is suffering because of the medical interventions and the kindest thing is to “let him go”. Dad does not agree and he feels we should give Jeremy a chance as he has always “bounced back” after each life-threatening episodes. Jeremy, when out of hospital, enjoys reasonable quality of life. Ideally you would like to meet with both parents together but parents are not talking to each other and you are asked to meet with them separately.

* Discuss with Jeremy’s mother/father options for treatment should he become more unwell, specifically addressing the conflict between his parents and importance of joint decision making.