Visit Summary Form Week-One
Week 1/Module 1: Recognition, Therapeutic Relationship, and Setting the Context

Student Name: ___________________ Visit Setting: _______________ (Home, NH, AFH, etc.)

Profession Observed: _______________ (Nurse, Social Worker, Physician etc.)

Assigned Site: ____________________ Preceptor Name: _______________

A major goal of the Palliative Care Track is for you to critically assess clinicians delivering palliative care to patients and families. In particular for you to pay close attention to:

- What behaviors did the clinician use during the visit?
- How well did these behaviors solicit the patient/family story (expressed values and goals)?
- How did these behaviors affect the patient/family/clinician/you as an observer?
- How these behaviors promoted or inhibited the integration of palliative care into the patient’s and family’s care?
- How the patient’s and family’s behavior promoted or inhibited the integration of palliative care into the care plan?
- Developing the skill of summarizing the patient/family story (expressed values and goals)
- Discussing with your preceptors what occurs during clinical encounters
- Providing feedback to your preceptor on the encounter

To assist in meeting the above goals you are required to fill out a Visit Summary Form on:

- One clinical encounter if you attend the Monday Clinical Case Session
- Three clinical encounters if you did not attend the Monday Clinical Case Presentation Session

Your Visit Summary Form(s) should be electronically submitted by the second Wednesday of the clerkship. A copy will be sent to your preceptor as valuable feedback to assess his or her skills.

Recognition: Was able to Recognize if patient might be at the end of Life

- Discussed death as a possibility to be considered
- Discussed death as a definite possibility
- Acknowledged would not be surprised if the patient was dead in 6-12 months
- Discussed a future of diminishment likely
- Discussed death as the only likely outcome

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<td>Did not consider or explore issue</td>
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<td>Considered issue but did not successfully integrate into interview</td>
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<td>Considered issue; accurately and skilfully integrated into interview</td>
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Developed a Therapeutic Relationship for the Palliative Care discussion

- Introduced Self
- Asked how pt/family wished to be addressed
- Had a short non-clinical interaction
- Made verbal and non-verbal statements demonstrating **Commitment**: provide care through death
- Made verbal and non-verbal statements demonstrating **Connection**: unconditional positive regard
- Made verbal and non-verbal statements demonstrating **Consciousness**: personal/professional empathy/understanding
- Made verbal and non-verbal statements acknowledging suffering
- Made verbal and non-verbal statements demonstrating **Compassionate Witness**

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<td>Poor relationship for palliative care discussion</td>
<td>Attempted to create a therapeutic relationship acknowledging patient/family values</td>
<td></td>
<td>Skillfully created a therapeutic relationship that centered on patient/family values</td>
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Set a Safe Context for the Palliative Care discussion

- Explained Palliative Care
- Defined “Good Care”
- Explained limits of biomedical model
- Explained value of pt/family expertise
- Explained value of integrating pt/family and medical expertise
- Invited pt/family to share story
- Got permission to explore pt/family story

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<td>Unsafe context for palliative care discussion, solely focused on biomedical issues</td>
<td>Attempted to create safe context acknowledging both biomedical and patient/family values</td>
<td></td>
<td>Skillfully created safe context integrating both patient/family and biomedical values</td>
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Describe at least three behaviors you observed by the clinician (or you performed) that significantly affected the outcome of the interview. Describe how each of these behaviors either facilitated or inhibited the integration of palliative care into the care plan:
Encounter Summary:

1. Brief description of the clinical situation:

2. Succinctly summarize your understanding of the patient/family story including the patient/family goals and values and share the sources you used to gain your understanding.

3. What are the important values and goals in the patient/family story that support the current Hospice/Palliative Care plan of care?

4. What are the important values and goals in the patient/family story that are not being met by the current Hospice/Palliative Care plan of care?

5. Specific recommendations based upon your understanding of the patient/family story that would improve the current Hospice/Palliative Care plan of care.
   a. Include what is already being supported well
   b. Include recommendations for changes in the plan (additions/deletions)

6. Reflect on what you learned from this encounter that will direct your future education to provide excellent palliative care to your patients.