

# KHA Quality Webinar

## Compassionate Conversations: Navigating Palliative Care Discussions

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KHA Quality Team  
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# Compassionate Conversations



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## Palliative vs End-of-Life

### *Palliative Care:*

- Purpose
- Timing
- Scope
- Beneficiaries

### *End-of-Life Care:*

- Purpose
- Timing
- Scope
- Beneficiaries

## Navigating Palliative Care Discussions

### *Five Powerful Phrases:*

- 1) “We’re in a different place now.”
- 2) “I’m worried that treatment will do more harm than good.”
- 3) “Help me understand your priorities.”
- 4) “Who else do you need input from?”
- 5) “Would a recommendation be helpful?”

## Tools to Assist in Becoming “Conversation” Ready

### *Approach*

- Exemplify
- Connect
- Engage
- Steward
- Respect

### *IHI Toolkit (it's free!)*

- Process are in place
- Challenges

[How to Talk to Your Patients about End-of-Life Care: A Conversation Ready Toolkit for Clinicians | Institute for Healthcare Improvement](#)

## “The Conversation” Project

### *What it is:*

- Initiative by the Institute for Healthcare Improvement (IHI)
- Care wishes are exposed and respected
- Provides resources and tools
- Emphasizes aligning care with personal values

### *Achievements:*

- Significant strides
- Reached millions of people
- National survey concerning comfort levels
- Expanding impact

## Resources & Links

- [theconversationproject.org](https://theconversationproject.org)
- [theconversationproject.org-Kelton-Findings-Press-Release.pdf](#)
- [Crucial-conversations-through-end-life](#)
- [Conversation-ready-framework-improving-end-life-care](#)
- [5 Simple Phrases to Transform Conversations | IHI](#)
- [Conversation Ready Toolkit for Clinicians | IHI](#)



# The Hard Conversation and How to Become Conversation Ready



# Pikeville Medical Center

- Pikeville Medical Center, located in the heart of Eastern KY, is licensed for 348 bed and is home to Kentucky's only Level 2 Trauma center.
- We have the nation's largest Autism Center offering Applied Behavior Analysis (ABA) therapy.
- Eastern Kentucky's only Level 2 Advanced Neonatal Intensive Care Unit
- We have approximately 3,700 direct and contract employees and we employ 600 licensed medical providers.

# Pikeville Medical Center

- We have 11 Centers of Excellence.



# Lawson Cancer Center

- 4 Medical Oncologist
- 3 Radiation Oncologist
- 1 Surgical Oncologist
- 2 Oncology Certified Nurse Practitioners
- 1 Radiation Nurse Practitioner
- 1 Registered Dietician
- In clinic lab
- 24 chemo suites
- 4 non-chemo infusion chairs
- 2 Varian TrueBeams w/BrainLab technology
- New 4D CT Scanner
- 15 bed in-patient oncology unit



# Lawson Cancer Center

## 2024 Volumes

- 14,826 infusions
- 6390 Radiation Treatments
- 872 New Cancer Cases
  - Top 5 Cancers:
    - Trachea, bronchus, lung
    - Breast
    - Prostate
    - Colon
    - Bladder

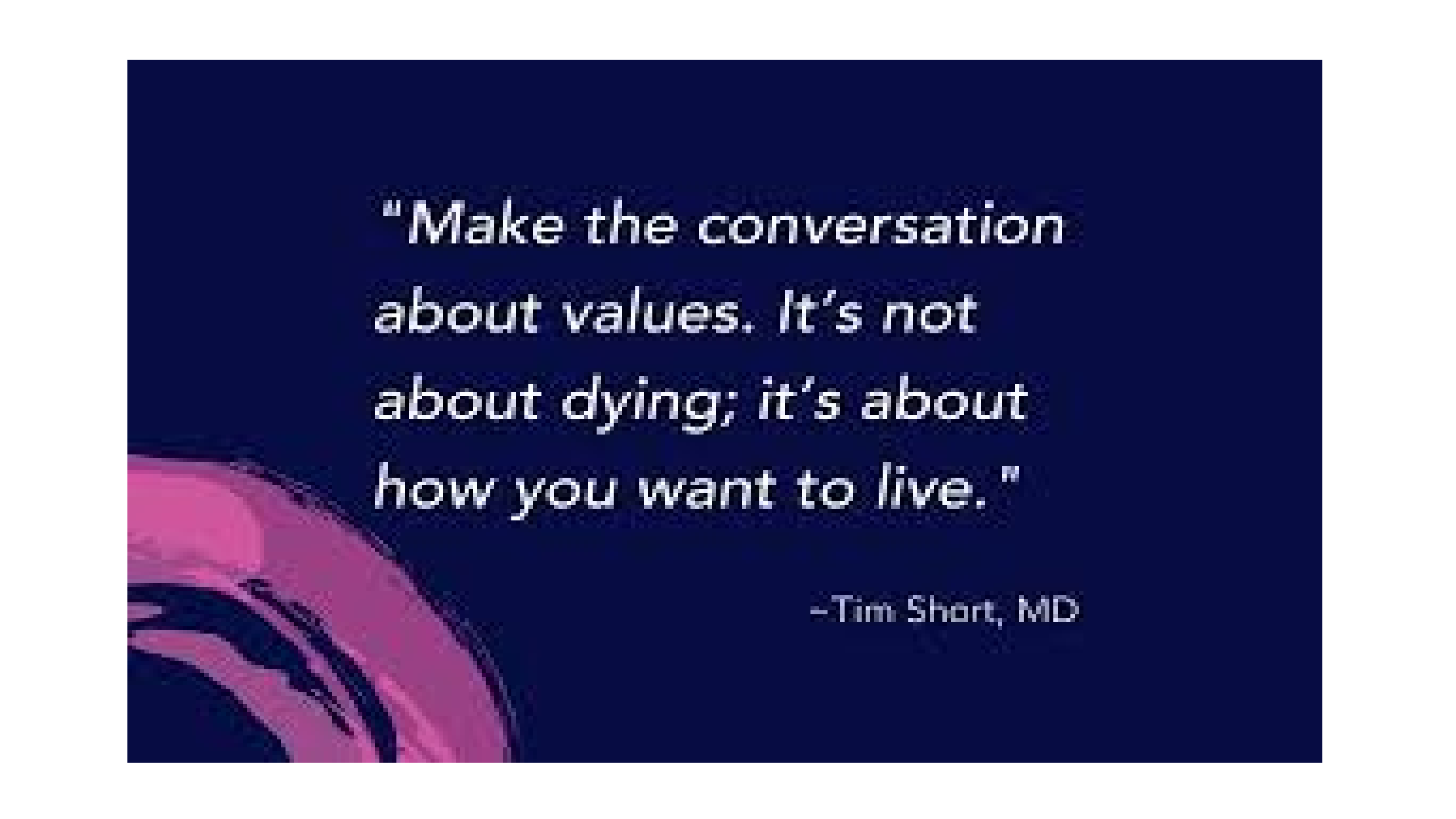
# Palliative Care Team

- Board Certified Physicians
- 1 Family Nurse Practitioner
- 1 Registered Nurse
- 1 Chaplain
- Palliative Care Team sees inpatient consults.
  - 532 consults in 2024
- Palliative Care Symptom Management Clinic at the Lawson Cancer Center.
  - 1593 patients seen in 2024

# DID YOU KNOW?

- 90% of people will agree that having end-of-life discussion is important.
- Only 27% actually have the conversation.



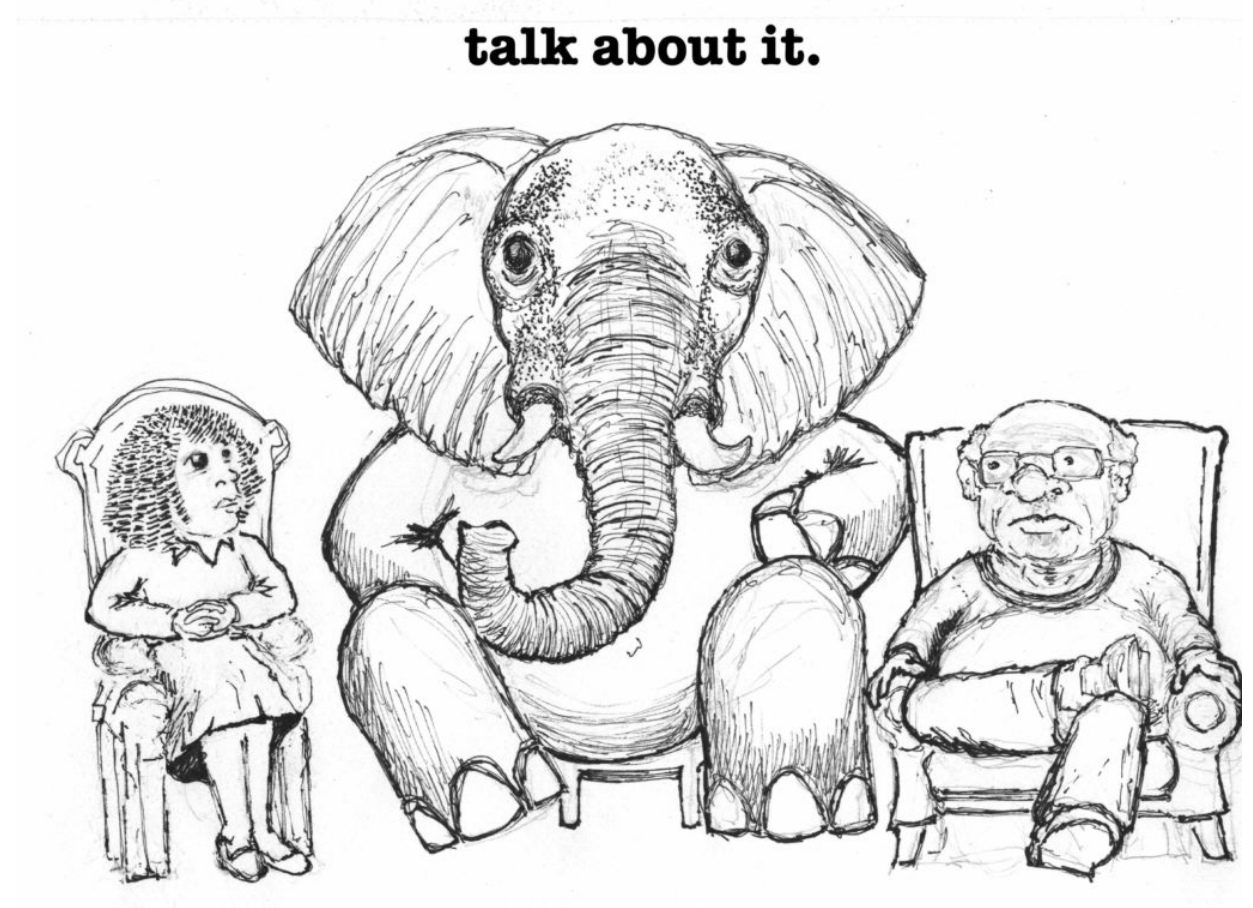


*"Make the conversation  
about values. It's not  
about dying; it's about  
how you want to live."*

—Tim Short, MD

# Becoming Conversation Ready

- Thinking about death and dying can be difficult. Talking about it is usually very uncomfortable, at best.
- The positive effect of getting your affairs in order, or knowing the wishes of a loved one, can bring peace to the patient and their loved ones. It allows them to be able to focus on the little things and enjoy their remaining time together.



# Becoming Conversation Ready



- Put your feelings and bias aside.
- Choose a private and comfortable setting
- Use clear, straight forward language, no medical terminology.
- Assess the patient's understanding of their condition.
- Practice active listening
- Ask permissions to facilitate open discussions about the patient's goals and desired medical care.
- These conversations should start early and be on-going.
- Acknowledge the difficulty.

Palliative  
Care....it's  
more than  
they think



# Know the Difference Palliative Care vs Hospice

- **Palliative Care**

- Focus: relieve suffering and improve quality of life. Can help you manage symptoms such as pain or side effects of treatment.
- Timing: Provided at any stage of a serious illness – from diagnosis onward.
- Used alongside: curative or life prolonging treatments
- Goal: Improve quality of life for patient and their family. The ultimate goal is to help your patient live as well as possible for as long as possible

- **Hospice Care**

- Focus: Providing comfort and support to individuals with a terminal illness, focus on end-of-life care.
- Timing: Specifically for individuals with a terminal illness and usually with a life expectancy of 6 months or less.
- Curative treatments are stopped, and the focus shifts to comfort.
- Goal: Make patient as comfortable as possible during the final stage of life.



# Assessing Understanding

- Ask the patient about their illness
- Be mindful of the patient's emotional state
- Make sure the patient is ready to have the conversation
- Be considerate of cultural and personal beliefs.

