Palliative Care New South Wales

SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT
palliative & end-of-life care

Reviewing an education e-module: Improving Access and Impact

June 2025 – April 2026 | Sue Morris, CNE, St George Hospital, Sydney
Huge Acknowledgement & Thanks to A/Professor Amy Waters, Palliative Care Physician, St George, Sydney

Why create an online communications skills e-module for PC nurses?

Feedback from nurses attending palliative care education at St George Hospital was similar to research findings, that nurses do not feel equipped and lack confidence when communicating with patients and families with a life limiting illness and emotionally challenging conversations

Research consistently shows poor communication at end-of-life leads to distress for patients, families and staff
Patients & families want to be able to talk about difficult topics and empathetic communication leads to better outcomes for patients/families

The belief palliative care nurses are in the perfect position with valuable insights and opportunities to help patients and families clarify information around a life-limiting illness and opportunities to connect and provide empathetic support to their patients and families .

Many clinicians don't have the tools to initiate these conversations — they simply don't know where to start.

— Nurse respondent

Addressing myths around communication skills

1

Communication skills can't be taught
> You either 'have it' or you don't

FACT:
We can all improve our communication skills through formal training

2

I don't have time to have these type of conversations

FACT:
Using the skills covered in the module makes communication more efficient and well as effective

3

I will make patients more upset by talking about difficult topics

FACT:
We can't harm people by exploring emotions. Patients and families want to be able to talk about difficult topics. In fact, greater empathy leads to better patient outcomes

4

I might not be able to cope myself if I have these conversations

FACT:
Good communication skills decrease clinical burnout, increase job satisfaction and reduce complaints

Core Principle: The structured communication frameworks and tools used in the module guide nurses in expressing empathy, exploring feelings and supporting patients compassionately during challenging conversations

The Context: Conversations in the Palliative Care Setting are **HARD**!

Expect Emotion

Emotions mean they have heard and are processing

Understand Emotion

Palliative care patients and families face many difficult situations which can cause strong emotion. The ‘flight’ or ‘fight’ response is a deeply ingrained primeval reaction we don’t have control over.
A key concept is that **emotion blocks cognition.**
Time and space is needed to help a person process the emotion before moving on in the conversation

Be Brave

Do not be afraid of emotion.
One of the most important skills we can learn in palliative care to make our lives easier is to develop the skill of sitting with and being able to acknowledge emotion

What the Module Teaches: 4 Fundamental Communication Skills

1 Ask-Tell-Ask Method

A patient-centred technique to assess understanding, share information clearly, and confirm comprehension in difficult discussions. Reminds us to find out what the person already understands.

2 Picking up on Cues

Learning to notice and understand subtle hints or signals.
Cues can be verbal or non-verbal. Picking up on cues can elicit important concerns as well as facilitate compassion and patients feeling like they have been listened to.

3 NURSE mnemonic – Responding to Emotion

* NAME * UNDERSTAND * RESPECT * SUPPORT * EXPLORE
> A structured framework for navigating emotionally charged conversations. Understanding and expecting there will be emotions when communicating in the palliative care setting is important.

4 Tell Me More

Is another patient-centred, low-pressure tool that encourages open communication, helps to clarify what someone is saying and helps to avoids making assumptions. It signals genuine curiosity and gets to the heart of what is the biggest issue/concern for the person.

Why Are These Skills Considered Fundamental?

The Four fundamental skills

- Ask-Tell-Ask
- Picking up on Cues
- Responding to Emotion
- Tell me More

"These four skills are called fundamental not because they are easy or basic, they are fundamental because if we know how to do these four key skills the majority of challenging conversations will become easier for us"

Amy Waters

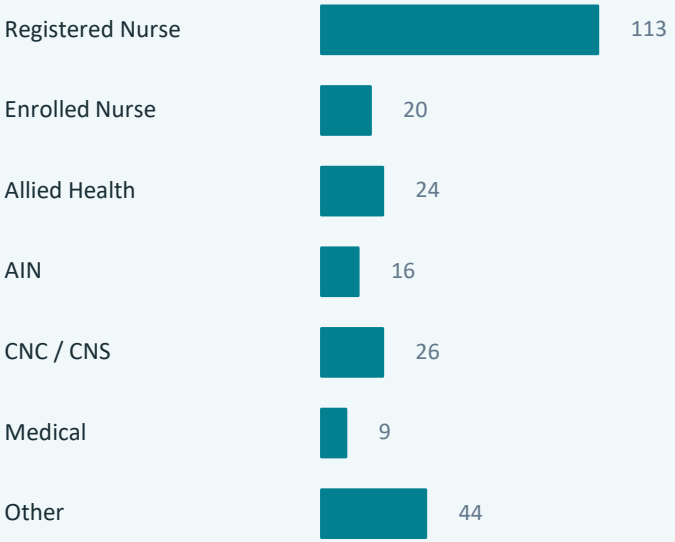
Palliative Care Physician

Who Completed the Module

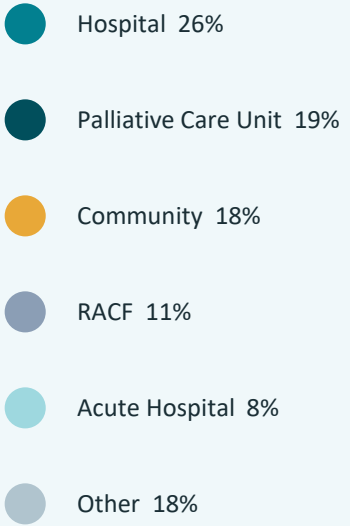
252

Total Respondents
Jun 2025 – Apr 2026

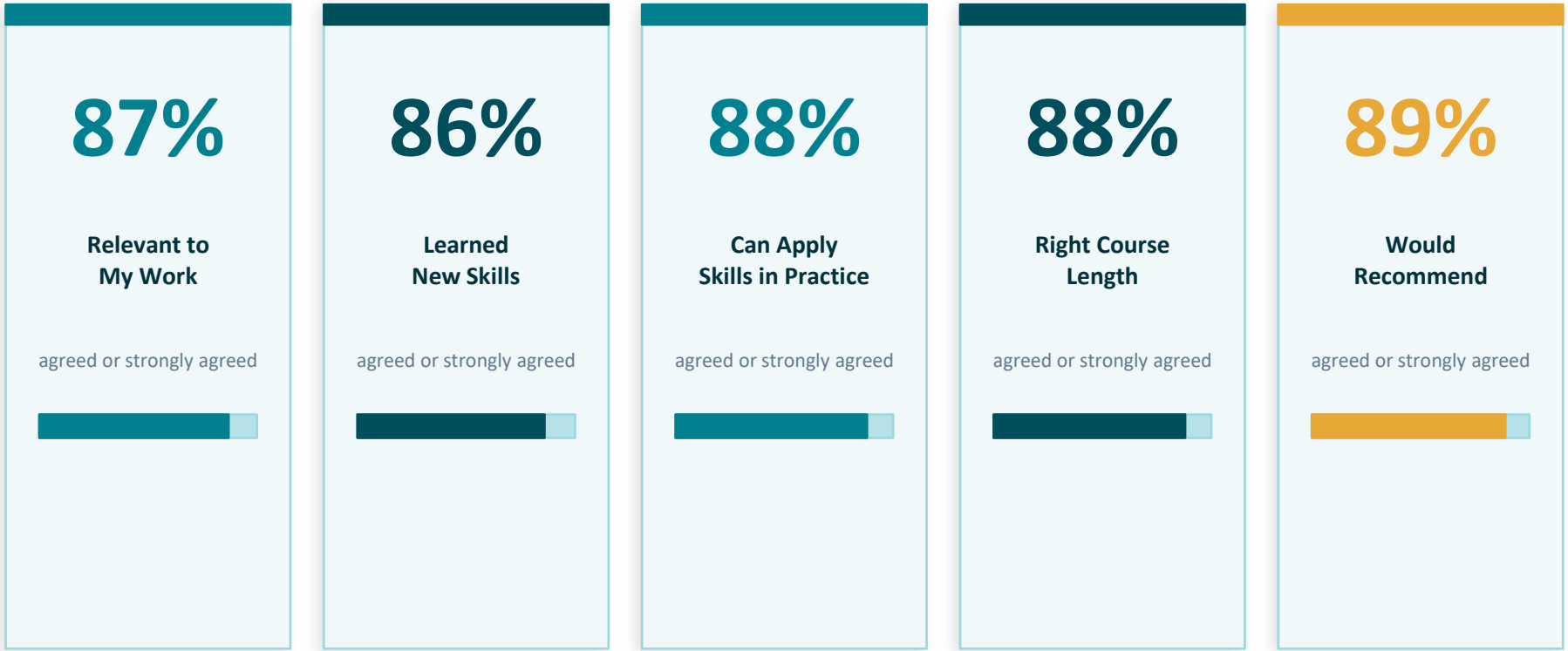
Respondents by Role



Respondents by Workplace



Key Outcomes: The Data



n = 248–252 respondents across all questions

What Nurses Loved: Top Themes

Realistic Video Scenarios

Most mentioned

"Fantastic acting in scenarios! Usually, they are terrible, but they were so real. Real situations presented — really great engaging exercises."

Practical Frameworks & Tools

Skills-focused

"Easy to remember steps. I have taken much from the 4 key communication skills and the NURSE acronym."

Knowledge-Reinforcing Activities

Highly valued

"The videos and testing knowledge with clever little tests… clear information, activities to check understanding."

Pitched at the Right Level

Experienced clinicians

"Excellent module pitched to the appropriate level of an experienced health worker — so many others are pitched lower."

Why Has This Module Appeared to Work?

01 Clinician-Led Design

Scenarios were scripted by practising palliative care nurses and physicians, ensuring authenticity. Respondents reported the videos as realistic compared to other resources

02 Memorable Frameworks

The research backed NURSE acronym and Ask–Tell–Ask method give nurses portable mental tools they can recall under pressure. The focus on remembering the value of silence in providing space was also cited in many responses as immediately practical.

03 Evidence Based Skills & Interactive Exercises

The medical education literature clearly demonstrates communication skills can be taught. The 3 video scenarios are followed by reflective activities, true/false checks, and skill-ordering exercises that reinforce content — moving beyond passive watching into deliberate practice and learning.

04 Significant Resourcing!

** Led by an experienced palliative care clinician and skilled VITALTALK Facilitator at no financial cost to the project (aka A/Prof Amy Waters)*
** Accessed grant monies of $30,00 used to commission a proven software developer in InkySmudge and access professional filmmaking & actors via Real Play Media*

In Their Own Words

"

I have had a lot of experience in palliative care and I still learnt something in this course. Very well done.

Experienced clinician

"

Overall, this was a very valuable module. It has increased my confidence in having difficult conversations and responding to emotional situations in a calm and supportive way.

— Support Worker

"

This is absolutely brilliant and can be used for training learners from all the craft groups.

Nurse Educator

"

Such a wonderful resource, thank you for creating and sharing. Great topic — many colleagues do not feel like they can have these conversations.

— Community Nurse

Building Confidence, One Conversation at a Time

252 nurses and allied health professionals have taken the first step.
89% would recommend this module to their colleagues.

Access the Module Free at palliativecarensw.org.au

Thank you for Listening! 

Questions?

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Online training module
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helping staff communicate compassionately and effectively with patients and families facing a life-limiting illness.