

COVID-19 Telehealth Communication Tips

A RESOURCE FOR CONDUCTING COVID-19 CONVERSATIONS VIRTUALLY*

Opening a COVID-19 Outpatient Conversation visit: environment and privacy

Patients may or may not want family members involved when discussing their priorities. Make sure to cue the patient to invite those they want to be involved and/or to consider moving to a private setting, if possible and desired.

Techniques for responding to emotion: verbal and non-verbal

Normalizing and validating positive and negative emotions: This response can help patients feel heard and understood. For example: *“It makes perfect sense that it feels difficult to live with this uncertainty.”* OR: *“I’m so glad that you’ve been able to laugh with your family during this difficult time.”*

Silence: Pausing with silence after sharing hard news allows time for patients to process their emotions. During silence, continue to look into the camera and use head-nodding to maintain connection. Patients will break the silence by re-initiating eye contact or talking again. You can also put your hand to your heart as a gesture of empathy.

Reflection and curiosity: Allowing patients the space to explore their emotions and thoughts supports relationship and connection. Statements like *“I hear how sad it is to think about this”* or *“Tell me more about what you’re thinking”* enable patients to share their complex experiences during this difficult time.

Attending to cues during the visit

Since patients are in their home, their environment may change during the visit. For example: their kids or grandkids may enter the room. You can check in with patients to make sure they are ok to continue the discussion.

Pay attention to signs that the patient is struggling with the discussion. If they are breaking eye contact, shifting in their seat, or appear uncomfortable, you can say: *“I know this is hard to talk about, and I think we covered a lot today. Thank you so much for sharing. What are your thoughts about shifting gears and talking about something else?”*

Ending the session

Ending a telehealth session, especially one that focuses on a potentially sensitive discussion, can feel unnatural and abrupt. **Toward the end, begin to wind down the conversation so the patient can feel more integrated and less emotional.** For example: *“We are committed to caring for you and will do everything we can to support you through this.”*

Consider naming when you have a short amount of time left: *“I see that we have 10 minutes remaining. I wonder what might be most helpful to discuss as we finish up our appointment for today?”*

*These tips are adapted from a document created by Drs. Vicki Jackson, Isaac Chua, Mihir Kamdar, and Jennifer Temel at Massachusetts General Hospital and Dana-Farber Cancer Institute as part of the REACH Palliative Care Study. The document is available at www.capc.org/documents/758.

