To Promote Effective Communication with Adult Patients Receiving Palliative Care For Advanced Cancer in the Inpatient Oncology Settings in Singapore: The Development of a Teaching Programme Using the Sage and Thyme Model for Registered Nurses

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BACKGROUND

The worldwide cancer incidence is projected to rise by 50% in year 2020.[1] With increasing number of older people in Singapore, the incidence of cancer is expected to escalate proportionally since cancer is primarily a disease of ageing.

Over the last few years, patients with advanced cancer are living longer in the palliative phase as a result of more effective palliative treatment.[2] It is essential to ensure that patients' information needs are met so as to improve their psychosocial adjustment and ability to manage their own condition.

However, many registered nurses working in the inpatient oncology settings in Singapore find it difficult to elicit patients' concerns and respond to them appropriately due to their lack of training and education in communication skills.[3] Consequently, these patients are not given appropriate information to cope with their concerns, which in turn adversely affect their outcomes and quality of life.

AIMS

To explore the effectiveness of using the SAGE and THYME model for registered nurses to improve their ability to identify and address the information needs of patients undergoing palliative care for advanced cancer.

METHODS

Comprehensive search was conducted in **March 2015** using **PubMed**, **CINAHL** and **Ovid SP databases**. The search terms used include '**information**', '**advanced cancer**', '**palliative**', '**training**', '**education**', '**SAGE and THYME**', '**nurse**', '**patient**', '**communication**', '**needs**', '**concerns**' and '**skills**'.

Search was limited to articles written in **English with abstracts** and **published from 2005 to 2015**. Further search was conducted using **end-text references of all eligible articles** to search for additional research studies.

ELIGIBILITY CRITERIA

Inclusion Criteria
a) Examined the information needs of adult patients (>18 years) with advanced cancer
b) Assessed the effectiveness of communication skills training and education programme for registered nurses who were caring for advanced cancer patients in the palliative phase
c) Implemented the SAGE and THYME training programme.

Exclusion Criteria
a) Secondary sources which include integrative reviews, expert commentaries and opinion pieces.

SEARCH RESULTS

Initial search (**n=181**) ➡ Abstract review (**n=112**) ➡ Full-text review (**n=55**) ➡ Studies selected (**n=8**)
3 were **quantitative**, 3 were **qualitative** and 2 were **mixed methods** studies.

STUDY QUALITY

Assessment Criteria	Qualitative Research			Quantitative Research			Mixed Methods Research	
	Lobb *et al.* 2013	Maskor *et al.* 2013	Stajduhar *et al.* 2010	Rainbird *et al.* 2009	Lau *et al.* 2013	Connolly *et al.* 2010	Connolly *et al.* 2014	Griffiths *et al.* 2015
Internal validity				✓	✓	✗	✗	✓
External validity				✓	✓	✗	✓	✗
Reliability				✓	✓	✗	✗	✓
Credibility	✓	✗	✗				✗	✓
Transferability	✓	✗	✓				✓	✗
Dependability	✓	✗	✗				✗	✓
Confirmability	✓	✗	✗				✗	✓

RESULTS

Thematic Matrix

Information-giving	Developing a nurse-patient relationship	Communication process
• The information needs of patients with advanced cancer are relatively similar cross-culturally *(Rainbird et al., 2009 and Lau, Lai and Chung, 2013)* • Majority of the end-stage cancer patients did not want to have information regarding their prognosis or disease progression so as to preserve hope *(Lobb et al., 2013)* • Conversely, giving information on cancer care to advanced cancer patients could increase their self-determination and capacity to make autonomous decisions about their own care and take charge of their own health *(Stajduhar et al., 2010)* • Hence, developing a positive nurse-patient relationship is essential for nurses to assess end-stage cancer patients' information needs *(Lobb et al., 2013)*	• Establishing relational connections allows the nurses to foster a safe and supportive environment where the patients feel comfortable disclosing more about their distress, and thus acquire emotional relief *(Maskor et al., 2013)* • In this process, the nurses are able to provide the appropriate information that addresses the patients' true concern *(Stajduhar et al., 2010)* • One of the most important elements that facilitates the development of a meaningful and sustained nurse-patient relationship is to establish an effective communication process *(Lobb et al., 2013)*	• The SAGE and Thyme model promotes patient-centred communication by assisting the nurses to withhold their advice before the patients have fully disclosed their needs and concerns *(Connolly et al., 2010)* • This structured framework has the function of facilitating the nurses in establishing trusting and supportive relationships with their patients *(Connolly et al., 2014)* • This model serves as a guide to prompt the nurses to employ evidence-based communication skills such as active listening, empathy and empowerment *(Griffiths et al., 2015)* • These communication skills are considered to be universal and thus can be implemented in the Singapore context

THE SAGE AND THYME MODEL

SETTING
If you notice concern - think first of the setting, create some privacy - sit down.

ASK
"Can I ask what you are concerned about?"

GATHER
Gather all of the concerns - not just the first few - "Is there something else?"

EMPATHY
Respond sensitively - "You have a lot on your mind."

TALK
"Who do you have to talk to or help you?"

HELP
"How do they help?"

YOU
"What do YOU think would help?"

ME
"Is there something you would like ME to do?"

END
Summarize and close - "Can we leave it there?"

DISCUSSION

Evidence consolidated from the studies was considered to be **low to moderate quality**. Research has shown that the SAGE and THYME model is effective in helping the nurses **to establish trusting relationships with their patients**. Besides, patients are more likely to **disclose openly about their distress** and **seek informational support** from the nurses when a relationship is established.

In this way, the nurses are able to **identify the patients' information needs** and **provide the appropriate advice** that focuses on their true concern, which in turn help to maximise their psychological adjustments and quality of life. However the SAGE and THYME model is not suitable for delivering bad news and dealing with denial.

CONCLUSION

This review has identified the **significance of developing a teaching programme** using the SAGE and THYME framework to **enhance the nurses' ability to explore** and **address the information needs of patients** living with advanced cancer in the palliative phase through **fostering an effective communication process** with the aim of building a positive nurse-patient relationship.

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