Having difficult conversations

Introduction

Difficult conversations are often an integral part of speech and language therapy. Having the confidence, knowledge, and skills to facilitate those conversations enables service users and employees to share their concerns, understand their needs and ultimately make choices, decisions and plans.

Difficult conversations in speech and language therapy may include:

- giving diagnosis
- feeding-back assessment results
- discussing management plans and treatment options
- preparing for discharge
- interactions with families/relatives/friends/other professionals
- managing and supervising staff

These are all essential conversations, difficulties usually arise when there is a mismatch between understanding and expectations.

Please **contact us** with any feedback on these pages.

Responsibilities

View our page on **HCPC standards** for guidance to support you in adhering to the standards of the regulator, the Health Care Professions Council (HCPC).

The Health and Social Care Act (2008) Regulation 20: **Duty of Candour** states that every healthcare professional must be open and honest with patients when something that goes wrong with their treatment or care, causes, or has the potential to cause, harm or distress.

Being prepared

Anticipating that a conversation may be difficult enables you to be prepared and achieve the best possible outcomes for the conversation.

You should consider:

- where the conversation will take place, in terms of comfort and privacy
- your body language, facial expression, positioning
- your knowledge of, and relationship with, the service user/employee
- timing of the discussion
- time for questions
- support from others/family members/advocates/key workers
- having associated written information ready
- how you will document the conversation.

Ask what the service user's/employee's understanding is and what is important to them. Don't make assumptions. Listen to them. Know the legal processes behind consent, confidentiality, capacity and documentation.

Building skills

- Peer, clinical and managerial supervision is an excellent way to reflect on difficult conversations – **view our supervision guidance**.
- Some trusts and organisations offer training in managing conflict or difficult conversations.
- See our **professional development scenarios**.

Resources

- ACAS, the Advisory, Conciliation and Arbitration Service, provides information on **challenging conversations and how to manage them**.
- Seek advice or support from your peers and reflect on actions using the **RCSLT Clinical Excellence Networks**, **RCSLT Hubs** and **professional networks**.
- **Better Conversations with Aphasia** – University College London's free online course aimed at SLTs, other health professionals, carers and people with aphasia.
- **Talking about end-of-life care: communication** – video by the General Medical Council and Hospice UK (formerly the National Council for Palliative Care) with insights from service users about what constitutes good communication.
- See our **professional development scenarios**.

Contributors

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The RCSLT develops guidance to promote good **clinical** and **professional** practice in line with HCPC standards. **Please read our statement on guidance** to understand how it is developed and how to use it.