



VA OpenNotes for Mental Health Clinicians

SPIKES

Difficult conversations arise in clinical care that can be challenging. The SPIKES protocol provides a six-step framework to support you in having difficult conversations with your patients.*

Step 1: S—SET UP the Discussion

Prepare for the discussion by rehearsing the information ahead of time and consider possible patient reactions or questions. Keep in mind that despite how the patient reacts, the information might be important to them. If the patient prefers, include family members or other supports.

Step 2: P—Assess the Patient's PERCEPTION

Before discussing the diagnosis, learn more about the patient's concerns, viewpoints, and understanding by asking open-ended questions. Based on the information you receive, you can tailor your response and provide clarifying information to the patient. Consider the following questions to ask the patient:

- What is your understanding of why you are receiving mental health care?
- What is your understanding about your mental health condition so far?

Step 3: I—Obtain the Patient's INVITATION

Many patients express a desire for in-depth information and details about their diagnosis, but others may not. Invite the patient to discuss the topic and to decide what is important for you to focus on. Set up the conversation to be collaborative, providing space for the patient to express their preferences, as well as participate in the conversation. Consider the following question to ask the patient:

- How much would you like to know about how I came to this diagnosis?

Step 4: K—Give KNOWLEDGE and Information to the Patient

Be transparent when explaining the diagnosis and treatment plan to the patient. It can help to be as descriptive as possible and check in periodically to assess the patient's understanding. Consider sharing diagnostic criteria to help show the patient how you came to your decision, while relating it to their experiences. Additionally, you may want to discuss diagnostic certainty and uncertainty and that diagnoses can change over time.

Step 5: E—Respond EMPATHETICALLY to Emotions

Responding to the patient's emotions during the conversation is important. Be prepared for a range of responses from the patient and offer support. Validate the patient as they process this information, letting them know that their feelings are legitimate and that you support them.

Step 6: S—SUMMARIZE the Treatment Processes and Next Steps

Be transparent when explaining the diagnosis and treatment plan to the patient. It can help to be as descriptive as possible and check in periodically to assess the patient's understanding. Consider sharing diagnostic criteria to help show the patient how you came to your decision, while relating it to their experiences. Additionally, you may want to discuss diagnostic certainty and uncertainty and that diagnoses can change over time.

*Sources:

Baile W., Buckman R., Lenzi R et al. SPIKES – A six step protocol for delivering bad news: Application to the patient with cancer. *Oncologist* 2000; 5:302-311

Seeman, M. Breaking Bad News: Schizophrenia. *Journal of Psychiatric Practice* 2010; 6:269-276