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Comfort with Communication in Palliative and End of Life Care (C-COPE)

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Comfort with Communication in Palliative and End of Life Care (C-COPE)

The items below describe situations pertaining to palliative and end of life communication.

Items 1-10 refer to talking with *patients*.

Please rate how difficult these situations are for you.	Not difficult	Slightly Difficult	Uncertain	Difficult	Very difficult
1. Talking with patients once they have received “difficult news”	1	2	3	4	5
2. Talking with patients about spiritual and/or religious concerns	1	2	3	4	5
3. Talking with patients about spiritual and/or religious concerns that are different than my own beliefs	1	2	3	4	5
4. Remaining silent while listening to the expression of feelings from patients	1	2	3	4	5
5. Talking to patients about end of life decisions	1	2	3	4	5
6. Talking with patients from cultures other than my own	1	2	3	4	5
7. Talking with patients about physical symptoms	1	2	3	4	5
8. Talking with patients about psycho-social symptoms	1	2	3	4	5
9. Talking with patients about suffering	1	2	3	4	5
10. Talking with patients without using medical jargon	1	2	3	4	5

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The items below describe situations pertaining to palliative and end of life communication.

Items 11 - 21 refer to talking with *families*.

Please rate how difficult these situations are for you.	Not difficult	Slightly Difficult	Uncertain	Difficult	Very difficult
11. Talking with families once they have received "difficult news"	1	2	3	4	5
12. Talking with families about spiritual and/or religious concerns	1	2	3	4	5
13. Talking with families about spiritual and/or religious concerns that are different than my own beliefs	1	2	3	4	5
14. Discussing decisions to be made when a family member is the patient's proxy	1	2	3	4	5
15. Remaining silent while listening to the expression of feelings from families	1	2	3	4	5
16. Talking to families about end of life decisions	1	2	3	4	5
17. Talking with families from cultures other than my own	1	2	3	4	5
18. Talking with families about the patient's about physical symptoms	1	2	3	4	5
19. Talking with families about the patient's psycho-social symptoms	1	2	3	4	5
20. Talking with families about suffering	1	2	3	4	5
21. Talking with families without using medical jargon	1	2	3	4	5

C-COPE

The items below describe situations pertaining to palliative and end of life communication.

Instructions: *Please use the definitions below for items which refer to palliative or end of life care.*

Palliative care focuses on the patient with serious advanced illness, and their family, and seeks to enhance quality of life throughout the illness trajectory by “addressing physical, intellectual, emotional, social, and spiritual needs” (National Hospice and Palliative Care Organization, n.d., para. 1).

End of life care provides emotional, physical, spiritual, and social care to patients with a life limiting prognosis and includes the family. This care “may include a range of services, including disease specific interventions” (Institute of Medicine, 2015, p. 1-6).

Items 22-26 refer to talking with **physicians, nurses, and members of the interdisciplinary team.**

Please rate how difficult these situations are for you.	Not difficult	Slightly Difficult	Uncertain	Difficult	Very difficult
22. Talking with physician(s) about palliative care issues	1	2	3	4	5
23. Talking with nurse(s) about palliative care issues	1	2	3	4	5
24. Talking with physician(s) about end of life issues	1	2	3	4	5
25. Talking with nurse(s) about end of life issues	1	2	3	4	5
26. Talking with other members of the health care team (i.e., chaplains, social workers, advanced practice providers, physical therapists, etc.) about palliative care and/or end of life issues	1	2	3	4	5

27. When caring for patients and families facing serious illness, please rank the following **patient** communication in order of difficulty with '1' being the *least difficult* and '6' being the *most difficult*.

- _____ Initial Diagnosis
- _____ Treatment Options
- _____ Remission
- _____ Recurrence of Disease
- _____ End of Life Care
- _____ Palliative Care

28. When caring for patients and families facing serious illness, please rank the following **family** communication in order of difficulty with '1' being the *least difficult* and '6' being the *most difficult*.

- _____ Initial Diagnosis
- _____ Treatment Options
- _____ Remission
- _____ Recurrence of Disease
- _____ End of Life Care
- _____ Palliative Care