

64 **A FRAMEWORK FOR FINDING COMMON GROUND  
WITH SUBSTITUTE DECISION-MAKERS TO ACHIEVE A  
PATIENT'S GOOD DEATH**

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Conflict with substitute decision-makers of dying patients is not uncommon in end-of-life care. Understanding how to best manage these conflicts may improve relationships between physicians and substitute decision-makers, reduce stress, and ultimately improve the care of dying patients. To gain insight, we explored the experiences of Canadian Family Physicians who encountered conflict with a substitute decision-maker of a dying patient. We employed a Grounded Theory methodology with in-depth, semi-structured, audiotaped interviews about recent experiences of conflict. Purposeful sampling sought a maximum sample variation for physician participants. The verbatim transcripts, field notes and project memos were analysed using an iterative process involving the constant-comparative method to identify emerging key themes and concepts. Our study found that the physicians' main concern was for the patient to have a death free from avoidable distress, and in accord with the patient's wishes. A framework for achieving a "good death" through Finding Common Ground is described. This process involves: 1) building trust through clarifying roles, bringing key players together and delivering small bits of information at a time; 2) understanding through active listening, and finally; 3) informed shared decision-making. Preliminary findings also describe barriers to achieving Common Ground and what to do when an impasse occurs. This presentation will describe a framework for developing Common Ground between Family Physicians and substitute decision-makers to assist in achieving a "good death". Discussion of these primary results may help physicians, allied healthcare professionals, learners, and the public, improve end-of-life decision-making.