



DIFFICULT CONVERSATIONS AND EMOTIONAL RESILIENCE IN HEALTHCARE

0.1 ASHA CEU and 1 Act 48 PDH

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ELEANOR SMYSER HAS NO RELEVANT RELATIONSHIPS TO DISCLOSE.

Learning Objectives

- Recognize what makes conversations “difficult” in healthcare.
- Identify communication strategies that promote clarity and empathy.
- Understand the role of emotional resilience in sustaining compassionate care.



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Speech-Language Pathologists regularly face emotionally charged conversations with patients, families, and colleagues that test both communication skills and personal resilience. This session explores strategies for navigating these high-stakes moments with clarity, empathy, and professionalism. Attendees will learn evidence-based approaches to managing their own emotional responses, maintaining compassion under pressure, and fostering connection even in the most difficult dialogues.

Summary:

1. Introduction
- Learning objectives
2. Understanding “Difficult Conversations”
3. Frameworks for Effective Communication
The SPIKES model
NURSE statements
Ask-Tell-Ask approach: ensures shared understanding and pacing.
PEARLS framework
4. Emotional Responses: Both Sides of the Conversation
Fight/flight/freeze responses in clinicians.
Impact of emotional flooding on communication quality.
5. Emotional Resilience in Clinical Practice
Definition: ability to adapt, recover, and maintain effective functioning amid stress.
Components of resilience
6. Building Emotional Resilience
A. Individual Practices
Grounding or breathing before patient interactions.
Reflective journaling or debriefs after tough cases.
Recognizing early signs of emotional overload.
Reframing mistakes as learning opportunities.
- B. Team & Institutional Practices
Debrief sessions or “resilience rounds.”
Psychological safety in supervision and team culture.
Mentorship and modeling vulnerability.
Integrating wellbeing into competency frameworks.
7. Integrating Both Concepts
Emotional resilience and communication skills are interdependent.
8. Reflection or Discussion Activity
9. Summary and Takeaways
Difficult conversations are inevitable, but trainable.
Resilience is a skill, not a personality trait.
Compassionate care requires attending to both patient emotions and clinician wellbeing.
Key takeaway: “You can’t pour from an empty cup — emotional resilience sustains empathy.”

Speaker Bio: Eleanor Smyser is an SLP at St. Luke's University Health Network and holds both SLP and A-EMT licenses. Eleanor has worked in various settings as an SLP including skilled nursing, acute rehab, and acute care. She has also completed numerous volunteer hours on ambulances for 9-1-1 services. Eleanor is a multiple ASHA ACE award recipient, Stop the Bleed Trainer, a mentor for ASHA's Student to Empowered Professional Mentoring Program, a member of the Medical Reserve Corp, a lecturer for TIMS University, and was a guest on the podcast Swallow Your Pride. Eleanor is passionate about medical speech pathology, multidisciplinary care, and lifelong learning.