

Talking with children

Name / initials:

1 / 3 Agree the facts before you talk

You do not need perfect words. Start with what is known, use simple language and make space for more conversations. Avoid names or identifying details that you do not need to record.

Type in a form-capable PDF reader, save a copy, then close and reopen it to check. Completed files are not encrypted; keep them securely. Text boxes can scroll: for long answers, keep the full text in your own document labelled with this worksheet and question, and enter "See attached notes" here. Print your completed copy from the reader and check print preview. If your language does not display correctly, use a document that supports it, or print and write by hand.

Age or developmental needs / language or communication needs

What the child already knows or may have overheard

Facts the adults have checked with the treating team; what is not yet known

Who will lead the conversation; a trusted adult available afterwards

A simple explanation of cancer, treatment and what may change at home

For long answers, enter "See attached notes" and print the full response separately. Check that all intended text is visible in print preview.

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2 / 3 Words, questions and daily routines

Reassure the child that cancer is not their fault and is not caught through ordinary contact. Do not promise a recovery or a date that nobody can know.

Words we will use; honest answers to "Will you get better?" or "Are you going to die?"

Questions the child asked / answers we gave / what we will find out

School, meals, transport, bedtime and activities: main adult and backup

With appropriate permission, what school or another trusted adult needs to know

How the child can stay connected without feeling responsible for medical care

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3 / 3 Keep checking in

Children may return to play, ask the same question again or want privacy. Seek professional help if distress is persistent, worsening or affecting daily life. Urgent safety concerns need prompt help.

Changes in sleep, school, mood or behaviour to discuss with a professional

Trusted support: family, school, counsellor or treating-team contact

Plan for hospital changes, a parent being less well or an unexpected absence

Next gentle check-in: when, with whom and what we will ask

Support the adults need so that they can support the child

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