PALLIATIVE CARE CURRICULUM FOR UNDERGRADUATES (PCC4U):

BUILDING CAPACITY IN AUSTRALIAN NEW GRADUATE NURSES

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Objectives

- Describe how research and evaluation activities have informed the PCC4U project
- Outline how the PCC4U project responds contemporary palliative care workforce and education needs
- Outline key success factors which have contributed to sustainable outcomes
PCC4U project aim

To improve the skill and confidence of the health workforce to support people with palliative care needs by promoting the integration of palliative care training within all health undergraduate / entry to practice and relevant post-graduate curricula.
Phase 1 2003 - 2005

- Literature review
- Curriculum scoping survey
- Development of graduate capabilities and principles for including palliative care in undergraduate curricula
- Development of evidence based learning resources
- Recommendations developed for strategic implementation
Palliative Care Graduate Capabilities

• Effective *communication* in the context of an individual’s responses to loss and grief, existential challenges, uncertainty and changing goals of care.

• Appreciation of and respect for the diverse *human and clinical responses* of each individual throughout their illness trajectory.

• Understanding of principles for *assessment and management* of clinical and supportive care needs.

• The capacity for *reflection and self evaluation* of one’s professional and personal experiences and their cumulative impact on one’s self and others.
Phase 2 2006

- Pilot and evaluation of resources in 3 medical, 4 nursing and 3 allied health courses
  - **Monash University**: Medicine, Nursing
  - **University of New South Wales**: Medicine
  - **Queensland University of Technology**: Nursing
  - **University of Queensland**: Medicine
  - **Charles Sturt University**: Nursing
  - **James Cook University**: Nursing, Pharmacy
  - **University of Newcastle**: Speech Pathology, Social Work
### Snapshot pilot data – Nursing (2006)

Self-rated abilities in providing palliative care pre and post implementation

<table>
<thead>
<tr>
<th>University 1</th>
<th>Pre-Test</th>
<th>Post-Test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Mean (SD)</td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(0 = no knowledge to 10 = extensive knowledge)</td>
<td>27</td>
<td>3.44 (2.15)</td>
</tr>
<tr>
<td>Confidence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(0 = no confidence to 10 = very confident)</td>
<td>27</td>
<td>3.93 (2.25)</td>
</tr>
<tr>
<td>Preparedness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(0 = not at all prepared to 10 = very prepared)</td>
<td>27</td>
<td>3.67 (2.29)</td>
</tr>
</tbody>
</table>
Phase 3 2007 - 2010

Implementation phase to:

- actively **promote** the uptake of the PCC4U resources in **all Universities** which offer medical, nursing and allied health training
- extend and develop **networks** amongst participating universities
- develop strategies for the ongoing **sustainability** of the PCC4U project
Evaluation Framework

Level 1
Impact on, and outcomes for, consumers (e.g. students; academic staff)
- Pre and post questionnaires
- Qualitative interviews
- Database of contacts

Level 2
Impact on, and outcomes for, providers (e.g. health care organisations; academic institutions)
- Annual academic survey
- Qualitative interviews
- Post implementation report
- Workshop feedback

Level 3
Impact on, and outcomes for, the system (structures and processes, networks, relationships)
- Case studies
- Improvement initiative reports
- Website access

Based on The Project Evaluation Framework developed by The University of Wollongong's Centre for Health Service Development
## Progress to 2010 – resource implementation

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universities</td>
<td>39</td>
<td></td>
</tr>
<tr>
<td>Courses contacted</td>
<td>209</td>
<td></td>
</tr>
<tr>
<td>Currently reviewing</td>
<td>56 (26%)</td>
<td></td>
</tr>
<tr>
<td>Implementing</td>
<td>70 (33%)</td>
<td></td>
</tr>
<tr>
<td>Unsure of status</td>
<td>23 (13%)</td>
<td></td>
</tr>
<tr>
<td>Will not use / no response</td>
<td>60 (28%)</td>
<td></td>
</tr>
</tbody>
</table>

[Graph showing distribution of status]
Progress to 2010 by discipline

- Total courses (209)
- Implementing or reviewing
2009 project audit – undergraduate health courses

78% of respondents indicated that insufficient linkages and partnerships between academics and clinical experts in the design and delivery of undergraduate education are impacting on their inclusion of palliative care in undergraduate education.

74% indicated that lack of opportunity for clinical placements impacts on palliative care education in some way.

76% indicated that crowded curricula impacts on inclusion of palliative care.

52% indicated that inclusion of palliative care is limited by insufficient numbers of academic staff with expertise in palliative care.
PCC4U learning modules

Core Modules:

- Module 1: Principles
- Module 2: Communication
- Module 3: Assessment
- Module 4: Optimisation

Focus Topics:

- Topic 1. A multidisciplinary approach in palliative care
- Topic 2. Caring for Aboriginal people with life-limiting illnesses
- Topic 3. Caring for children with life-limiting illnesses
- Topic 4: Culture-centred care of people with life-limiting illnesses
Key successes

- Underpinned by Framework and aligned to national palliative care core values and principles
- National funding
  - Nationally consistent approach to palliative care education for health care students
  - Dedicated implementation support
  - Resources available at no cost
- Learning and teaching resources to support contemporary teaching
  - PCC4U website and eLearning modules
  - Curriculum blueprint
  - Implementation guide, student workbook
Testimonials

“[The PCC4U resources are]...Very good as they apply principles and give great examples of palliative care across a range of disciplines. It’s also very easy to access and to adapt to different curriculum.”

“We adapt the PCC4U video vignettes and learning modules so that they are delivered via discussion with a live MDT panel. One case study is chosen, a vignette is shown to the students, and then the MDT panel discuss how they would treat/manage the patient at their current stage of illness.”

(PCC4U users, 2016 Academic Survey)
PCC4U project team

Project Director: Distinguished Professor Patsy Yates
National Project Manager: Kylie Ash
National Clinical Educator: David Sachse
Senior Research Officer: Lynda Carnew
Senior Research Officer: David Klug

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