

Core Competencies for a Palliative Care Educator

What will the development of core competencies potentially achieve?

- A common core of acceptable key skills, person qualities and attributes that reflect the unique role of palliative care educators
- A baseline specification to assist employers in the appointment of suitably able educators
- An indicator of the diversity and complexity of the role which can inform pay remuneration that is commensurate with both experience and responsibilities.
- Can be used by the educator and employer in annual appraisal interviews in job planning, review and professional development
- The statements offered within the job description can be selected and adapted by employers to suit the requirements of the job in question

Limitations of this exercise:

- The range of professional qualifications of palliative care educators is very diverse and reflects the fact that they come from a range of health care disciplines. This can be seen as a strength rather than a limitation. It is, however, beyond the remit of this exercise to advise employers in this area
- The range of educational qualifications which will provide individuals with the required baseline knowledge and skills in the planning, delivery and evaluation of education, differ hugely in both design, length and quality. This is also a matter for employers to consider and is beyond the scope of this project.
- Competencies, once defined, cannot be realistically linked to either academic or professionally determined levels without more extensive work. If educators and employers wish to use them in this way then descriptive adjectives can be attributed at their discretion to turn these into learning outcomes or behavioural objectives.
- The core skills required of cancer educators are essentially similar, but also distinctly different in certain respects. This exercise acknowledges that cross over of core skills and competencies, but concentrates on those attributes seen as essential to palliative care educators

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Background literature which has informed the core competencies on offer.

Hostad J (2004) Core qualities: Empathy, Genuineness, Warmth, Creativity, Passion and Positivism? Attributes: Compassion, Sensitivity, Charisma, Enthusiasm, Reflexivity, Tenacity, Sense of humour

Key Skills: Advanced communication: Listening with acceptance, Ability to tune in to emotions, Ability to enable and facilitate emotional expression and recovery, Increased sensory acuity High level of non verbal skills, Advanced feedback techniques, Counselling skills, Ability to effectively link theory to practice, Extensive knowledge base, Relevant clinical experience, Motivational skills.

- Ability to constructively challenge students' behaviours, beliefs, attitudes, values and horizons
- Research awareness and experience
- Leadership skills
- Ability to act as an agent of change
- Ability to facilitate individualised, holistic, student centred learning

Roach 1987 - , compassion, competence, confidence, conscience and commitment.

Campbell 1984 – skilled companionship

Benner – The expert teacher- caring as a vital ethos embedded in education

Becker R 2000, 2004 & 2007 – Defining the competencies for palliative care nurses. Reflective maturity required of the palliative care educator. Framework for competence.

Kearney 1996 – sharing feelings, emotions and experiences – deeper understanding of the human condition

Doyle D 1999 - we should be trying to change attitudes..... We shall be judged by our willingness, indeed our eagerness, to share our facts and figures and sensitive insights about Man and how he reacts to suffering and loss with our students and colleagues in other disciplines and specialities.”

Macleod & James 1994 – Palliative care is not a logical and linear discipline it is conceptually complex and multidisciplinary – reflection on self attitudes and beliefs is important - only then can we go on to inspire and effect change in others. Positive role modelling.

“PC is best characterised by forms of knowledge that are personal and shared, which communicate real meaning through interpretation, and have moral and spiritual dimensions. “ Education methodology must match this challenge and draw upon ways that understand how practitioners have acquired their expertise

“Palliative care cannot be seem simply in terms of skills and knowledge that we would associate with cognition. Meta cognitive and reflective processes must play a part. “

National Council for Palliative Care 1996: “teachers may not be of the same discipline or profession as their learners. There are many possible benefits when they come from different professions. There is a need for many more teachers of palliative care provided they have had substantial experience in its clinical practise.

EAPC 2004 : Educators need to be innovative and person centred in their development of education initiatives which value prior learning and enhance practise knowledge.

It is recognised that palliative care training for teachers should:

Include continuing personal education in palliative care

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Advocate a multidisciplinary approach to teaching and learning
Take into consideration ability in group dynamics, communication, negotiation and conflict resolution
Include human resource skills, openness, respect, empathy, adaptability and self awareness

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These competencies are closely indicative of the specific skills, knowledge and attitudes required of an educator in palliative care, above and beyond those generic skills expected of any competent adult educator. The framework used to categorise the competencies is taken from

Becker R (2007) Ch 2 The use of Competencies in Cancer and Palliative Education, in Cancer and Palliative Care Education Editors: Foyle L & Hostad J Pub: Radcliffe Press (for publication in early 2007)

and is representative of the domains of professional competence in a palliative care context. It is recognised that many of the identified competencies are transferable to those colleagues who are cancer educators.

What is not included are administrative and systems management skills that are an important part of the role but are extraneous to the learning situation.

Core Competencies

Knowledge competence – the retained (baseline and advanced) knowledge of a given subject which is needed for the execution of both technical and interpersonal skills.

The ability to:-

- Utilise a strong evidence base of knowledge across the range of subject areas pertinent to palliative care
- Appreciate and communicate the rapidly developing and dynamic, nature of palliative care as a recognised speciality
- Facilitate a culture of critical research awareness in the learning environment pertinent to the subject areas of palliative care
- Explore the use of clinical and interpersonal skills relevant to such situations as
 - The giving of significant news
 - Dealing with anger
 - Handling conflict
 - Avoiding blocking behaviour
 - Seeking consent
 - Withdrawal and withholding treatment
 - Supporting the bereaved
 - Supporting colleagues
 - Care at the end of life
 - Essential comfort measures
 - Pain and suffering in advanced illness

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- Managing symptoms other than pain
- Existential distress
- The needs of carers and families

Technical competence – the learned psychomotor skills and techniques necessary to perform specific tasks.

The ability to:-

- Utilise both a uni and multi-professional approach to teaching and learning that emphasises the unique characteristics of the palliative care team
- Master and use a variety of teaching aids and tools to add diversity and creativity to the learning environment to enable the student to safely explore issues of
 - Self awareness
 - Attitudes to death and dying
 - Personal maturity
 - Reflective practice
 - Communication skills

Cognitive/analytical competence – the development of intellectual skills and revolves around accumulated knowledge and the ability use high level thinking skills to resolve problems effectively.

The ability to:-

- Manage discussion using facilitation skills to inform, debate and reflect opinion to enable constructive exchange about sensitive palliative care issues in a supportive non threatening environment
- Role model and demonstrate the effective use of non-verbal communication skills for clinical practice as a powerful medium of communication with the dying and their family
- Role model and demonstrate the skills of paraphrasing, reflecting, clarifying, summarising and the use of empathy to illustrate active listening techniques appropriate in the delivery of significant news to both patient and family.
- Role model and demonstrate the skills of reflective, open, probing and analytical questioning as a therapeutic tool in the palliative care scenario

Ethical/Personal Behavioural Competence - the possession of appropriate personal and professional values and behaviours and the ability to make sound judgements when confronted with ethical dilemmas.

The ability to:-

- Demonstrate respect for the inherent worth and dignity of others, coupled with a predisposition to look for the good things in people, and an intrinsic belief in this.

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- Articulate and reflect palliative care philosophy and practice in attitude, values and actions as an educator
- Articulate the ethical, moral and legal reasoning behind accepted good practice in clinical judgements in a palliative care context.
- Use careful judgment in the graduated use of experiential teaching techniques to enhance learning taking into account issues from the group related to past loss and difficult life events
- Utilise a non judgemental attitude and respect and accept verbal contributions in the classroom and clinical environment as valued and worthwhile

Affective competence – this can be described as emotional intelligence and alludes to our ability to deal with emotions and develop appropriate attitudes.

The ability to:-

- Be perceptive and responsive to the changing emotional atmosphere in a learning situation due to the exploratory nature of palliative care subjects
- Recognise the potential for emotional trauma that accompanies such teaching and
 - Create and maintain a safe learning environment
 - Mould and shape cohesive and supportive group dynamics
 - Team teach where appropriate so that support is available for learners
 - Utilise strategies and approaches that effectively draw teaching to a close in a positive manner
- Recognise the need for emotional support with colleagues and students and provide this where appropriate in a trusting, confidential manner

Intrapersonal competence – this can be understood as the personal and professional maturity to address the challenging intrapersonal issues intrinsic in supportive palliative care.

The ability to:-

- Acknowledge the need to maintain self esteem and self worth by questioning personal behaviours and feelings as an integral part of effective functioning as a palliative care educator
- Recognise and attempt to understand personal reactions and feelings towards dying and bereavement and reflect on how this affects both themselves and the education process
- Recognise and value personal skills and competence as a palliative care educator and seek to improve these via a recognised professional development strategy

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