Report

The Europe-wide core palliative care competencies for undergraduate nursing education

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ABOUT THE PROJECT

THE TEAM

The NursEduPal@Euro strategic partnership is an international consortium collaborating on innovation in palliative care education for undergraduate nurses.

THE GOAL

The Erasmus+ project aims to improve the quality of palliative care nursing education by enabling, supporting and empowering nurse educators to use a range of innovative teaching resources to ensure palliative care is included in their undergraduate nursing curriculum.

The project has developed a competence-based European matrix including innovative blended training tools for educators. This enhanced training resource aims to enable nursing students to achieve core competencies in palliative care so they are better equipped to contribute to palliative care in clinical practice.

THE APPROACH

The project consists of four phases in which nine Intellectual Outputs are realised:

1. Defining the core competencies to be achieved in palliative care (IO1);
2. Developing innovative teaching methods on palliative care topics and providing teaching materials (IO0, IO2, IO3, IO4, IO6, IO8);
3. Creating a European matrix for curriculum development and training educators in its use (IO7);
4. Facilitating a European network of palliative care educators (IO5).

The project has developed teaching materials to support nurse educators in achieving the appropriate knowledge, skills and attitudes to deliver palliative care education to their undergraduate nursing students in an innovative and engaging way. By implementing gamification, clinical reasoning, and simulation as experiential and immersive teaching methods in nursing curricula, the consortium anticipates having a positive impact on the development of palliative care knowledge and skills of the future nursing workforce.

https://nursedupal.eu/
Content

Preface ............................................................................................................................................... 1
Acknowledgements ............................................................................................................................... 1
1. Why do we need core competencies? .......................................................................................... 2
2. What do we know about competencies? .................................................................................... 3
3. How were the core competencies developed? ........................................................................... 5
4. How to use the Europe-wide core palliative care competencies ................................................... 6
5. References ..................................................................................................................................... 9
Preface

The rate at which populations are ageing and living with chronic health conditions emphasises the need for nurses to possess adequate competencies and be confident to provide palliative care. This requires innovative and engaging teaching and learning approaches for educating nursing students to develop their understanding, knowledge and skills about the philosophy, principles and practices of palliative care. To achieve this, we need educators who have the palliative care subject and pedagogical expertise to educate nursing students.

Prior to developing education programmes, agreed Europe-wide core palliative care competencies for undergraduate nursing education need to be defined, informed by research.

The NursEduPal@euro project aims to contribute to these needs by defining Europe-wide core palliative care competencies as a step towards unification of palliative care nursing education across Europe.

In this report, we summarise our journey developing the core palliative care competencies for nursing education and offer suggestions on how they can be used. We hope you enjoy the ride!

Acknowledgements

The NursEduPal@Euro team would like to express their gratitude to all the professionals who participated voluntarily in the working groups where participants shared their views about the core palliative care competencies. It has been a privilege and honour to develop these competencies together with professionals and experts from different countries.

The NursEduPal@Euro team is also thankful to Vanessa Taylor, RGN, EdD, MSc, PGCE, Professor of Cancer and Palliative Care & School Director of Practice and Care Partnerships, University of Huddersfield and Megan Best, Associate Professor, The University of Notre Dame Australia and Honorary Associate Professor, University of Sydney for reviewing this report.
1. Why do we need core competencies?

In Europe, palliative care is considered an integral part of care that should be provided across a wide range of health and social care settings (see Box 1). Palliative care is recognised as a human right according to the Council of Europe (2018). Nevertheless, palliative care is still not consistently provided across Europe. Member states should fully integrate palliative care into their healthcare systems and ensure that all healthcare professionals have access to palliative care education and training.

Three levels of palliative care provision have been described and, in each of these levels, nurses have an essential role (Krisman-Scott & McCorkle, 2002; De Vlieger et al., 2004; Sawatzky et al., 2016):

1) The **palliative care approach** involves adopting the foundational principles of palliative care, adapting palliative care knowledge and expertise to people with chronic life-limiting conditions, and embedding this knowledge and expertise into the delivery of care across different healthcare sectors and professions. For example in primary care, nursing homes and hospital wards;

2) **General palliative care** is provided by professionals and specialists treating people with life-threatening and life-limiting conditions who are frequently involved in palliative care, but do not provide palliative care as the main focus of their work. These professionals have enhanced knowledge and skills in palliative care to provide general palliative care;

3) **Specialist palliative care** is provided by services and professionals whose main focus of practise is the provision of palliative care for people with life-threatening or life-limiting conditions experiencing complex or difficult needs which requires highly specialised knowledge, skills and resources. For example specialist palliative care units, services and hospices (Radbruch & Payne, 2009; Radbruch & Payne, 2010).

In order to deliver these different levels of palliative care, also different types of education and training for nurses are required (De Vlieger et al., 2004; Connor 2020). Indeed, providing high-quality palliative care at any of these levels requires nurses with the appropriate education, knowledge and competence (Gamondi, Larkin, Payne, 2013a; Gamondi, Larkin, Payne, 2013b).

Despite increasing attempts to include palliative care in nursing curricula, there remains considerable variation between, and within, European countries regarding the provision of undergraduate palliative care education. In 56% of European countries, palliative care is not a mandatory subject in undergraduate nursing education (Martins Pereira et al., 2021). As a result, a multitude of studies report that nurses do not feel they have the knowledge, attitudes and skills required to deliver the palliative care approach appropriate for the setting they work in (Arboura & Wiegandba, 2014; Smets et al., 2018; Achora, 2019; Dobrowolska et al., 2019; Zhou, Li & Chang 2020; Chover-Sienna & Martinez-Sabater, 2020; Gilissen et al., 2020, Hökkä et al. 2022a).
Undergraduate nursing students also report that they feel unprepared to provide palliative care and to encounter death (Malone et al., 2016; Croxon et al., 2018; Hökkä et al. 2022b; Hökkä 2022).

These findings reinforce the urgent need to develop palliative care as an integral part of nursing education programmes across Europe (Cavaye & Watts, 2014; Saarto & Finne-Soveri, 2019b; Arias-Casai et al., 2019; Martins Pereira et al., 2021). Due to the Bologna process (European Higher Education Area, 2018), nursing education has undergone major changes and cooperation at the European level provides opportunities for competence-based learning (Öhlen et al., 2011; Collins, 2014).

Box 1 - Palliative care definition and concepts

Palliative care ...

- is an approach that improves the quality of life of patients and that of their families who are facing challenges associated with life-threatening illness, whether physical, psychological, social or spiritual. The quality of life of caregivers improves as well (World Health Organization, 2020).
- should be based on the need instead of the diagnosis or prognosis (Connor, 2020).
- should be provided at all levels of palliative care provision and in different healthcare settings when needed, according to the location of the person (Connor, 2020).
- focuses on the patient, their family and surrounding community (Radbruch and Payne, 2009).
- is an active and interdisciplinary approach (Radbruch and Payne, 2009).

2. What do we know about competencies?

There are two approaches to define competencies: (1) ability to perform a particular task, (2) as a set of measurable indicators that demonstrate the quality of clinical performance, based on knowledge, technical skills, behavioural attitudes, all of which are acquired by a theoretical and practical learning programme of specialisation (Whitty & Whilmott, 1991; Box 2).

Box 2 - Competencies: definition and value

- Competence is defined as the knowledge, technical skills, behavioural attitudes and clinical judgement required to practise safe care with respect for the principles of medical ethics (Ontario, 2014).
- Professional competencies are considered directly responsible for ensuring quality care in clinical practice, provide a framework for developing palliative care education programmes, and a common ground for demonstrating what is essential and unique to robust palliative care education (EAPC, Gamondi, Larkin, & Payne, 2013).
Nursing competencies describe the professional competencies of nurses that are important for providing safe nursing (Axley 2008). They also refer to the nurse’s roles, the activities they undertake and their professional standards (Axley, 2008; Valloze, 2009). In a holistic light, nursing competencies have been defined as the functional adequacy and the capacity to integrate knowledge, skills, attitudes and values (Meretoja et al. 2004, p. 330).

Globally, several countries have already developed national guidelines and frameworks for palliative care competencies for nursing students (Table 1). Additionally, in 2004, the European Association for Palliative Care (EAPC) provided a guide for the development of palliative nurse education in Europe (De Vlieger et al., 2004). Based on these documents and our own research, we defined palliative care competencies for undergraduate nursing students following a multistep procedure.

Table 1. National guidelines and frameworks for palliative care competencies.

<table>
<thead>
<tr>
<th>Country</th>
<th>Short description</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Kingdom/Scotland</td>
<td>Scottish Partnership for Palliative Care, NHS Education for Scotland</td>
<td>2007</td>
</tr>
<tr>
<td>New Zealand</td>
<td>Palliative Care Nurses New Zealand</td>
<td>2014</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>Palliative Care Competence Framework Steering Group - Ryan et al.</td>
<td>2014</td>
</tr>
<tr>
<td>Romania</td>
<td>Mitrea et al.</td>
<td>2014</td>
</tr>
<tr>
<td>United States</td>
<td>American Association of Colleges of Nursing</td>
<td>2018</td>
</tr>
<tr>
<td>Finland</td>
<td>Hökkä et al. Expert group, Universities of Applied Sciences, Universities, funding Ministry of Culture and Education</td>
<td>2020</td>
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</tbody>
</table>
3. How were the core competencies developed?

The NursEduPal@Euro approach to define common Europe-wide core palliative care competencies consisted of an iterative process which began in 2020 and was completed in 2022 (see figure below). The study focused on “What are the most important core palliative care competencies in undergraduate nursing education programmes in Europe?” We explored this question by interviewing a variety of healthcare professionals in multidisciplinary palliative care teams in four European countries and by reviewing available literature on the topic.

We synthesised the findings into a framework of core palliative care competencies for undergraduate nursing students. Table 2 summarises the 12 analytical themes resulting from our work and the descriptive themes related to them. Additional detail findings will be published in a scientific paper.
4. How to use the Europe-wide core palliative care competencies

The core palliative care competencies have the potential to make a difference to nursing education across Europe by providing guidance for integrating palliative care into curricula. Although nursing programmes may vary in different countries, these core competencies provide clarity about the palliative care knowledge, skills and attitudes that nurses need to deliver the palliative care approach.

The core palliative care competencies can be used to ensure that nursing students are appropriately prepared and able to contribute to high-quality palliative care to people with palliative care needs and those important to them. The first step towards integrating the competencies into nursing education is to raise awareness of, and familiarity with, the core competencies.

The core competencies can be used to:

- evaluate the extent to which the nursing curriculum includes the elements of the core competencies;
- guide educators to develop learning objectives aligned to the competencies;
- assess and evaluate students’ learning to establish if they have achieved the palliative care competencies.

Alongside defining the core palliative care competencies, this project has also developed other Intellectual Outputs. We offer examples and provide templates of innovative educational formats through which the core competencies can be taught. The matrix of Intellectual Output 7 summarises these teaching formats alongside the core competencies. We invite you to visit our virtual showroom at the project’s website and to explore and try the NursEduPal@Euro resources (www.nursedupal.eu).

Further information about the project is available at: www.nursedupal.eu
Table 2. The Europe-wide core palliative care competencies for undergraduate nursing students (part 1).

<table>
<thead>
<tr>
<th>Analytical themes</th>
<th>Descriptive themes*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Competence in the holistic nature of palliative care</strong></td>
<td>The philosophy of palliative care&lt;br&gt;The purpose of palliative care&lt;br&gt;Epidemiology in palliative care&lt;br&gt;Quality of life in palliative care&lt;br&gt;Death and dying as a topic in palliative care&lt;br&gt;Palliative care in different patient groups</td>
</tr>
<tr>
<td><strong>Competence in organising palliative care</strong></td>
<td>Organising palliative care&lt;br&gt;Critical evidence-based thinking and decision-making in palliative care&lt;br&gt;Advanced care planning in palliative care&lt;br&gt;Advocacy in palliative care&lt;br&gt;Palliative care services</td>
</tr>
<tr>
<td><strong>Competence in pain management in palliative care</strong></td>
<td>The multidimensional aspects of pain in palliative care/Total pain&lt;br&gt;Pain assessment in palliative care context&lt;br&gt;Pain management in palliative care</td>
</tr>
<tr>
<td><strong>Competence in symptom management in palliative care</strong></td>
<td>Identifying and assessing symptoms in the context of palliative care&lt;br&gt;Principles of symptom control in palliative care&lt;br&gt;Symptom management in palliative care&lt;br&gt;Non-pharmacological symptom management in palliative care&lt;br&gt;Pharmacological symptom management in palliative care</td>
</tr>
<tr>
<td><strong>Competence in holistic support in palliative care</strong></td>
<td>Responsiveness and supportiveness to psychosocial needs in palliative care&lt;br&gt;Person-centred supporting when working with palliative patients and those most important to them&lt;br&gt;Culturally sensitive supporting in palliative care&lt;br&gt;Maintenance of hope in palliative care&lt;br&gt;Grief and supporting in bereavement during the different phases of the palliative care process</td>
</tr>
<tr>
<td><strong>Holistic communication, encounter, and interaction competence in palliative care</strong></td>
<td>Open and active verbal and non-verbal communication in palliative care&lt;br&gt;Open and active listening in palliative care&lt;br&gt;Discussion of difficult topics in palliative care&lt;br&gt;The importance of being present in palliative care&lt;br&gt;Responsive appropriate interaction in palliative care&lt;br&gt;Encounters with the closest ones to patients in palliative care&lt;br&gt;Communication, and interaction with those most important to patients’ in palliative care</td>
</tr>
</tbody>
</table>

*Themes in blue colour have emerged from the literature
Table 2. The Europe-wide core palliative care competencies for undergraduate nursing students (part 2).

<table>
<thead>
<tr>
<th>Analytical themes</th>
<th>Descriptive themes*</th>
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<tbody>
<tr>
<td>Competence in empathy in palliative care</td>
<td>Empathy in palliative care</td>
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<tr>
<td></td>
<td>Empathic communication in palliative care</td>
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<td></td>
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<tr>
<td>Spiritual competence in palliative care</td>
<td>Meaning of spirituality in the context of palliative care and its importance to patients</td>
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<tr>
<td></td>
<td>Assessment of the spiritual needs of the patients in palliative care</td>
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<tr>
<td></td>
<td>Support patients with spiritual needs in the context of palliative care</td>
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<td></td>
<td>Openness and confidence towards spiritual, religious and existential issues in palliative care</td>
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<tr>
<td>Competence in ethical and legal issues in palliative care</td>
<td>Ethical issues in palliative care and end of life situations</td>
</tr>
<tr>
<td></td>
<td>Working according to moral and ethical values in palliative care</td>
</tr>
<tr>
<td></td>
<td>Legislation in palliative care</td>
</tr>
<tr>
<td></td>
<td>Awareness of euthanasia (or assisted dying) and the wish of hastened death</td>
</tr>
<tr>
<td>Teamwork competence in palliative care</td>
<td>Interdisciplinarity in palliative care</td>
</tr>
<tr>
<td></td>
<td>Cooperation in interdisciplinary palliative care team</td>
</tr>
<tr>
<td></td>
<td>Active, pro-active and confident communication with other disciplines involved in palliative care</td>
</tr>
<tr>
<td></td>
<td>Teamwork in palliative care</td>
</tr>
<tr>
<td>Self-awareness and self-reflection competence in palliative care</td>
<td>Recognising and dealing with own emotions arising in palliative care</td>
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<tr>
<td></td>
<td>Reflecting own emotions of death and loss</td>
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<tr>
<td></td>
<td>Self-reflection concerning values and own actions in palliative care</td>
</tr>
<tr>
<td></td>
<td>Openness to personal and professional growth</td>
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<tr>
<td>Competence in end-of-life care</td>
<td>Identifying and anticipating the dying phase of life</td>
</tr>
<tr>
<td></td>
<td>End of life symptom management</td>
</tr>
<tr>
<td></td>
<td>Psychological and spiritual supporting of the dying patient and family</td>
</tr>
<tr>
<td></td>
<td>Care after death</td>
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<tr>
<td></td>
<td>Knowledge and supporting in grief and mourning in dying phase</td>
</tr>
</tbody>
</table>

*Themes in blue colour have emerged from the literature
5. References


