

GP Shadowing in Hospices: refreshing the parts that other approaches cannot reach

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Aim of the Project

To develop 36 GPs' palliative care knowledge & skills through shadowing their specialist palliative care colleagues.

From Policy to Practice

- Recent UK policy initiatives emphasise the importance of educating generalists in palliative & end of life care.¹⁻³
- Access to education about end of life care is essential for generalists to maintain & develop their palliative care knowledge & skills.⁴
- The value of experiential learning has been highlighted, especially in primary care, where GPs work in a 'zone of complexity.'⁵

Method

- The project uses a self-directed work based learning approach.
- Macmillan funding includes backfill cover for 5 day GP placements.
- GPs complete a palliative care self-assessment tool to identify their learning needs & create their programme with the hospice team.
- Options include shadowing hospice staff; meeting patients & families; visiting external palliative care agencies; & taking reflective time to discuss, read & write about palliative care.
- Semi-structured interviews are used to evaluate each GP's learning experience.

Tangible Outcomes

'I felt wiser managing their symptoms & feel more comfortable discussing death & issues surrounding this. I have made more contact with my specialist palliative care colleagues regarding patient management. I definitely feel more confident managing palliative care patients. I've cascaded information to my Partners during palliative meetings & increased our register of palliative patients.' Dr EE

'My knowledge & confidence have much improved. I've learned about the importance of managing hydration & co-morbidities, about recognising delirium versus dying, recognising difficulties in withdrawing treatment & the rationale behind it... I'm now able to use LCP/Anticipatory prescribing & have increased confidence in drug use.. I hope to produce a primary care based web site.' Dr GG



Intangible Outcomes

'In General Practice you often lack confidence in bringing up DNACPR as you're not using them frequently. It was helpful to see how others do it & how they raise difficult topics. You need confidence & to know how to do it well. Observing the Community Specialist Palliative Care Nurse was insightful, how cleverly she would pick up on a cue & worded things in a really nice way.' Dr G

'I learned to have a more holistic approach & to change my viewpoint.. to be less focussed on making people live at any cost & more on what they want. I feel much more confident about identifying & managing patients with palliative care needs.' Dr T

'The ward rounds were the most valuable part of my placement – seeing the different contributions in the MDT meetings helped me realise the importance of the team approach rather than the medical model.. & seeing that the physio has a greater role than I expected & that patients valued complementary therapies so much.' Dr DD

Shadowing: a refreshing learning approach

'It's great, life changing. I feel very positive about it because it renewed an interest I had anyway & gave me the opportunity to change the way that we organise palliative care in the Practice.. change the way we run the Palliative Care Register, offer bereavement support & run palliative care meetings.' Dr E

'It's a great opportunity to step out of General Practice & be immersed in the Specialist Palliative Care Team for a week. It's enjoyable, very educational & worthwhile to help co-ordinate our palliative care better & make appropriate use of specialist palliative care services.' Dr H

Shadowing: an inspiring learning approach

'Absolutely superb project. I think it's great.. Can't think of a better way of learning – you could sit in a lecture theatre & gain nothing from that.' Dr L

'I have learned a great deal from it & feel inspired to learn more from the resources I've gained. I believe it will change my practice. It was also great fun to be part of a team of extremely friendly & motivated staff.' Dr BB

Conclusion

The project evaluation data (2008 -2011) illustrates the power of shadowing to influence GPs attitudes & develop their palliative care knowledge & skills, which will undoubtedly enhance patients' & families' quality of palliative care.

Key References

1. Department of Health. *End of life care strategy: promoting high quality care for all adults at the end of life*. London: DOH, 2008.
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3. Scottish Government. *Living & dying well: building on progress*. Edinburgh: Scottish Government, 2011.
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5. Fraser, S. & Greenhalgh, T. Coping with complexity: educating for capability. *British Medical Journal* 2001; 323: 799-803.