

Palliative care: Succession planning

Jenny Doig

Macmillan Cancer & Palliative Care Educator, NHS Lothian.



Introduction

Palliative care educators in Scotland are ‘rare beasts’ who either work as part of a generalist team or within a small hospice education team. Thus, opportunities for staff who wish to experience the role, prior to applying for a post, are limited. A large part of the palliative care educator’s role involves collaborating and networking with specialist colleagues who work in the NHS, hospices, social care and care homes. These relationships and networks take time for a new post holder to establish.

The NHS Lothian Macmillan Cancer and Palliative Care Educator, on approaching retirement, suggested offering her Clinical Education and Training colleagues a shadowing opportunity to develop their knowledge and experience of palliative care education and the associated Lothian networks. The proposal was accepted and the development opportunity was advertised as half a day per week for a 3 month period.

Participants

In August 2018, 7 staff with an interest in palliative care education, applied and were offered consecutive shadowing placements with the agreement of their line manager. Everyone had some experience of providing generalist palliative care in their previous clinical roles and was currently teaching a variety of other topics. Two people still also worked part-time clinically.



Figure 1: A future Cancer and Palliative Care Educator.

Method

Participants used a self-assessment template prior to setting their own learning outcomes and wrote a reflective account during the shadowing process. Each person met regularly with the post incumbent to discuss their learning outcomes; conducted a literature review on their chosen topic; was introduced to palliative care network colleagues; met relevant specialist clinical staff and gave a 30 minute account of their learning to colleagues.



Figure 2: Summary of learning activities (Participant A).

Results

The results of the first 3 shadowing placements are presented.

Participant A: ‘Gained new insights and an understanding of the context, drivers, process, and factors that impact on a person’s care at the end of life. These were incorporated into my teaching and informed relevant discussions at local and national meetings.’

‘The educational approach required to support my course is being reviewed, to become part of a process, rather than a stand alone study day, incorporating the bigger picture in relation to end of life care.’

Participant B: In an acute hospital department, ‘I created an information sheet about sources of support for staff and made recommendations for practice there including, the development of a palliative care nurse link role, the implementation of Care Assurance Standard 11 – End of life care, introducing communication skills training for staff and the use of a debriefing tool after sudden traumatic deaths.’

‘Audre Lorde’s words, “Caring for myself is not self-indulgence, it’s self-preservation....” resonated with me.’

Participant C: ‘Thoroughly enjoyed my experience and learned a lot, particularly about issues around discussing DNACPR which will guide me in the future and I believe enable me to deal with such issues in clinical practice. It has also highlighted other areas within the remit that I would like to pursue.’

‘I found it quite challenging to engage with fully while continuing to deal with an additional work stream.’

There has been mutual learning for the Macmillan Cancer and Palliative Care Educator from participants about the planning, delivery and evaluation of education and training.

Conclusion

Participants appreciated and enjoyed having dedicated time to immerse themselves in a palliative care education topic of their choice, using various learning activities, especially as time for personal and professional reflection was included.

Three NHS Lothian Clinical Education and Training staff have developed their knowledge of palliative care education and learned from, and established, links with Lothian palliative care network members to inform both their teaching practice and departmental colleagues.

As far as succession planning is concerned, the project has generated interest in the Macmillan Cancer and Palliative Care Educator role, and four more staff are about to commence placements.

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REFERENCES: Lorde, A. 2017. A Burst of Light: and other Essays. New York: Ixia Press. Tucker, C.A. 2017. Succession planning for nursing leaders in a college of nursing. Doctoral Project. University of Nevada.

