

Rotation Objectives Palliative Care

The WHO defines Palliative Care as: *“an approach that improves quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.”*

Our residents are exposed to the Palliative Care Approach both in immersion and longitudinal experiences.

At the end of 2-years for sites with a longitudinal experience and at the end of an immersion-type rotation, residents' learning outcomes for Palliative Care include the following:

Medical Expert

- Apply the Palliative Care approach to all patients with terminal illnesses (not just cancer patients), including:
 - End stage renal disease
 - End stage congestive heart failure
 - End stage chronic obstructive pulmonary disease and other respiratory diseases
- Be able to manage pain effectively:
 - Identify different types of pain (somatic, visceral, neuropathic) and be able to manage each
 - Effectively prescribe opioids, specifically:
 - Equi-analgesic dosages
 - How to start, titrate, and rotate opioids
 - How to prescribe maintenance and prn dosing
 - recognize different routes of medication administration
 - monitor for side effects, including (nausea, constipation, cognitive impairment, opioid toxicity)
- Have a diagnostic approach to be able to manage the following:
 - Dyspnea
 - Nausea and vomiting
 - Acute cognitive impairment and delirium
- Considers suffering as an illness and has a structured and patient-centred approach to it
- Identifies and repeatedly clarifies patient's wishes for treatment of infections, intubation, dying at home, etc.

Communicator

- Be able to discuss end of life wishes to understand a patient's fear and wishes about end-of-life issues

- Be able to explore and address spiritual issues relating to end of life
- Demonstrates ability to develop rapport and trust with patients and families
 - Particular skill is required in dealing with “difficult patients” and families
- Articulates the principles of the “patient-centred” method and demonstrate that they consistently incorporate this into their clinical assessments
- Accurately and clearly conveys needed information and explanations to patients, families, and colleagues
- Provides clear and accurate written documentation of clinical encounters and plans

Collaborator

- Demonstrates a team-based approach, by involving and working together with other members of the palliative care team, other related disciplines, and community agencies, depending on patient needs
- Engages patients and those involved in their care as active participants
- Maintains a positive working environment
- Transfers care in a way that ensures patient safety and comfort
- Completes consultations such that the most relevant clinical information is included

Manager/Leader

- Manages their work-flow in a way that balances volume with comprehensive patient care.
- Manages their practice in a way that ensures patient safety. This includes signing off labs in a timely manner and providing follow-up assessments.

Advocate

- Able to counsel a patient and their family on social issues including guardianship, wills, finances <http://www4.gouv.qc.ca/EN/Portail/Citoyens/Evenements/perdre-son-autonomie/Pages/accueil.aspx?cit>
- Recognizes when a patient has social, cultural, and/or physical causes of vulnerability (also called ‘determinants of health’)

- Recognizes patient and community assets
- Mobilizes additional support and resources for patients and families when vulnerable

Scholar

- Demonstrates intellectual curiosity by asking relevant clinical questions and study
- Reads and acquires knowledge consistent with their ongoing needs (derived from personal reflection and feedback from supervisors)
- Teaches junior learners

Professional

- Is honest
- Is on time for shifts and clinics. When anticipates being late or absent, informs the right people in a timely manner
- Recognizes own limitations and asks for help
- Is polite and respectful even during periods of stress and conflict
- Maintains patient confidentiality
- Demonstrates an awareness of own attitudes, feelings, and impact on their practice
- Reflects on clinical events to deepen self-knowledge
- Demonstrates awareness of their own attitudes that can influence their patient assessments and therapeutic relationships

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