

Nunavut Palliative Care Training
February 25-27, 2014
Iqaluit, Nunavut

Summary Report



Saint Elizabeth

Well beyond health care

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Submitted to: Government of Nunavut



March 31, 2014

Summary Report

Acknowledgements

We would like to acknowledge the Land and those whose traditional territory that the training took place in, the Iqalummiut.

With deep gratitude we acknowledge Elder Andrew Tagak Sr. who provided valuable Teachings and shared wisdom, knowledge and experiences regarding palliative care traditions and the cultural considerations of his people. The participation of Elder Andrew Tagak Sr. played an integral role in creating an atmosphere that was supportive, respectful and inspiring.



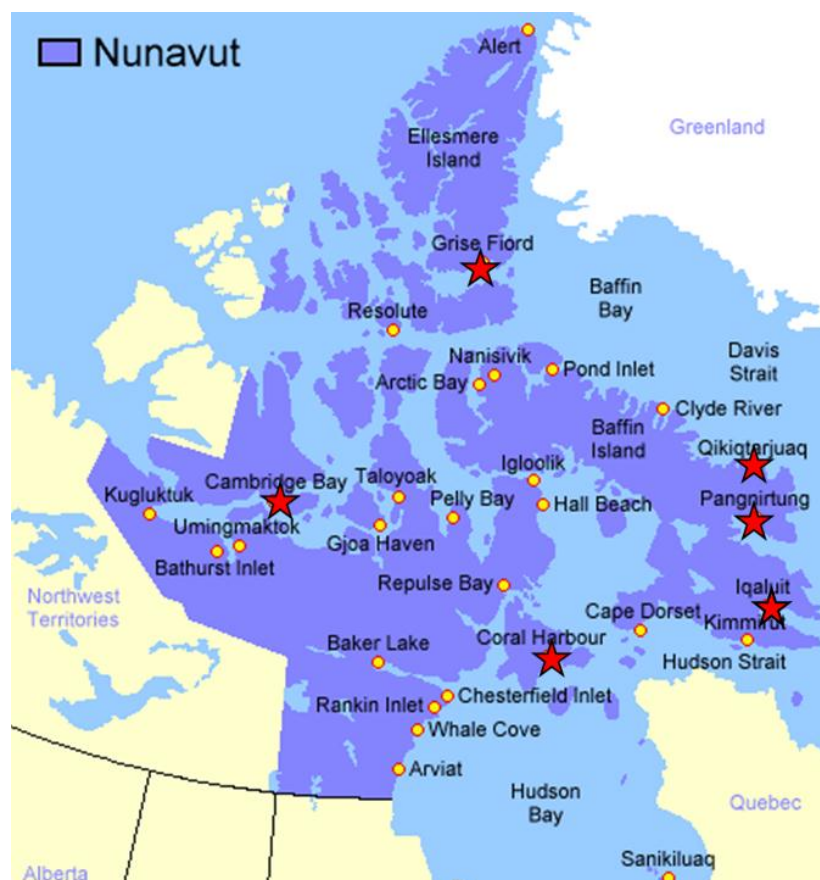
Background and Overview

The Saint Elizabeth First Nations, Inuit and Métis (FNIM) Program was the successful proponent to an invitational bid distributed by the Government of Nunavut to provide Palliative Care Education and Training for Nunavut's Home Care Nurses.

Saint Elizabeth was excited by the opportunity to collaborate with the Government of Nunavut to share and support the goal to enhance the palliative care knowledge, skills and confidence of home care nurses working in the territory.

This collaboration represents the commitment of the Saint Elizabeth's First Nations, Inuit and Métis Program to work in partnership with communities and organizations to understand and solve complex health care issues, improve access and address barriers to care.





The 3 day in-person palliative care training was delivered February 25-27, 2014 in Iqaluit, Nunavut to fifteen health care professionals. Participants attended from all regions of Nunavut.



★ Participant community

Identified Need

A learning needs assessment (Appendix 1) was conducted with the home care staff to guide planning for the training workshop. With 10 respondents providing feedback, the following responses to the question “What kind of education or training have you had in Palliative care?” suggest that the health care providers had varied education experiences around palliative care:

1. What kind of education or training have you had in Palliative care? (Check all that apply)			
		Response Percent	Response Count
None		0.0%	0
Self-reading/learning		60.0%	6
Employer in-service/training		50.0%	5
On-line Course		0.0%	0
College Course		0.0%	0
CNA certification		10.0%	1
University course		20.0%	2
@YourSide Colleague course		0.0%	0
Other (please specify)			1
answered question			10
skipped question			0

Comment: “Minor education while in nursing school”

Learning Needs

The learning needs assessment asked respondents to identify their Palliative related education needs. The following list identifies palliative care learning needs according to priority, 1= High, 2= Medium and 3= Low:

7. Define your Palliative Care learning needs. Please rank according to priority, 1=high 2=medium and 3 = low, you can rate as many topics as you like according to this scale. There may be more than one topic that is a high priority.

	High	Medium	Low	Rating Average	Rating Count
Assessment and management of pain	55.6% (5)	33.3% (3)	11.1% (1)	1.56	9
Assessment and management of symptoms	33.3% (3)	55.6% (5)	11.1% (1)	1.78	9
Advanced Care Planning	60.0% (6)	30.0% (3)	10.0% (1)	1.50	10
Psychological Care	40.0% (4)	50.0% (5)	10.0% (1)	1.70	10
End of Life / Death Management	40.0% (4)	40.0% (4)	20.0% (2)	1.80	10
Loss, Grief and Bereavement	30.0% (3)	60.0% (6)	10.0% (1)	1.80	10
Caring for the Professional Caregiver	40.0% (4)	50.0% (5)	10.0% (1)	1.70	10
Caring for Family or Informal Caregivers	50.0% (5)	30.0% (3)	20.0% (2)	1.70	10
answered question					10

Approach

A three day, in-person palliative care training was delivered by Saint Elizabeth to 15 health care providers including, Registered Nurses, Physiotherapists and Occupational Therapists, based on the identified learning needs. Participants were also introduced to ongoing education and supports that are available, at no cost, through Saint Elizabeth's award winning on-line education program, @YourSide Colleague® (aYSC)*.

- The training was designed to address the identified need of participants to incorporate Elders/Traditionalist as a part of the training to ensure the session was both respectful and culturally responsive by including local traditional beliefs, perspectives and cultural practice.

The agenda (Appendix 2) was designed around capacity building in the areas of palliative care and was based on those areas identified as greatest needs from the survey. A palliative care manual (Appendix 3) was also developed and distributed at the training to provide participants with palliative care training content, resources, case studies, activities, tools, and templates. An electronic version was also provided after the session with inclusion of on-line resources links and website links for participants to share and utilize in their communities.

The Saint Elizabeth FNIM Program provides over 13 professional development courses on our award winning e-learning platform, @Yourside Colleague (aYSC) at **no cost to FNIM communities, for more information on the courses visit <http://www.saintelizabeth.com/FNIM/Home.aspx>*

Overview of Nunavut Palliative Care Training



**“Beautiful and open- thank you for always taking time to address questions and discussions about related topics and experiences.”~
Participant**

The training commenced with a round table discussion where participants were given the opportunity to introduce themselves, describe their role and identify past experiences with hospice palliative care and personal learning goals for the training session.

The palliative care content for each day was developed based on the identified learning needs and priorities provided by the participants. The training schedule incorporated a mix of presentation styles such as PowerPoint's, videos, case studies, along with fun activities to keep the participants engaged in the learning. Group discussions allowed for the sharing of community wise practices. This was identified as an important aspect of the training by participants.

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"@Yourside Colleague is a fantastic resource. I will encourage my colleague to use it and will also be using it as a teaching resource for my community health workers."
~ Participant

The FNIM staff provided the online training and assisted the participants in gaining aYSC accounts, increasing comfort levels in navigating the program and troubleshooting any potential technical difficulties experienced by participants.

"It was awesome to have Andrew come and share his own experiences with death/dying. Very Valuable." ~ Participant

"Presentation from Andrew Tagak excellent!" ~ Participant

On the last day of the training Elder Andrew Tagak Sr. shared some Teachings, wisdom and knowledge on palliative care traditions and cultural considerations to the group. The learning needs survey identified Elders/Traditionalists rated the highest as a need for Palliative Care resources.



Each day ended with a sharing circle and the passing of a talking rock. Participants sat in a circle and were asked to share their feelings on the day. The structure of the sharing circle was explained; *“The first speaker takes the talking rock and shares his or her views and feelings, only the person who is holding the rock can speak, the others listen respectfully. When the speaker has finished saying all that he or she wants to say, the rock is then passed to the next person on the left and it becomes that person’s turn to speak.”* The sharing circle allowed each participant the opportunity to speak and share in an open and respectful way.

Presentations ~ Key Concepts

The presentation topics and learning objectives were designed around capacity building in the areas of palliative care and were based on the areas identified as greatest needs from the survey. The topics and key concepts of the three day training included:

Hospice Palliative Care

An introduction to palliative care in the community including:

- The goals of palliative care
- Common myths
- Domains of care
- Providing client-centered care
- Communicating sensitive information
- Dying trajectories
- Measuring progressive decline
- Person Centred Care

Advance Care Planning

An overview was provided on advance care planning (ACP) and the role of the nurse in supporting clients with ACP including:

- Components of ACP
- The Importance of ACP
- The Role of the Substitute Decision Maker
- Legal Aspects

Assessment and Management of Pain

An overview was provided on pain management strategies for the palliative client, including:

- Effective management for different types of pain
- How to conduct a comprehensive pain assessment
- The types and effective use of opioids
- The stepped approach to pain

Assessment and Management of Symptoms

An overview was provided on symptom management for the palliative client, including:

- Identifying the common symptoms
- Conducting a comprehensive assessment
- Management of nausea, vomiting and dyspnea
- Utilizing the ESAS tool

End-of-Life Care and Death Management

An overview was provided on how to support clients and their families at the end-of-life, including:

- The Dying Process
- Physical, psychological and spiritual needs of clients
- Spiritual and cultural practices
- Planning for a home death

Oral Teachings on Palliative Care

Elder Andrew Tagak Sr shared Teachings, wisdom and knowledge of palliative care traditions and cultural considerations.

Loss, Grief and Bereavement

An overview was provided on how to support clients and families in dealing with loss, including:

- The different types of grief
- The phases and manifestations of grief
- Identifying complicated grief
- Supporting children in grief

Care for the Caregiver

An overview was provided on caring for the formal and informal caregivers:

- The impact on professional caregivers
- Types of caregivers including; double duty caregiver, sandwich caregiver
- Self-management strategies

Online Education

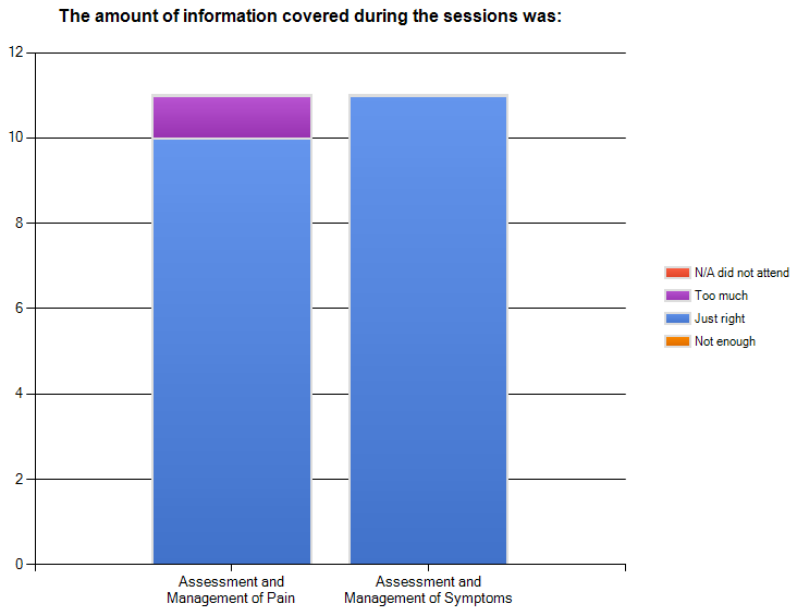
An overview of aYSC was provided to build confidence in accessing online learning. Topics included:

- Saint Elizabeth First Nations, Inuit and Métis Program overview
- aYSC Colleague
- Set up accounts aYSC
- Webinar overview

Evaluation Summary

A post-training evaluation survey (Appendix 4-6) was conducted at the end of each day and responses indicate that participants' knowledge of Palliative Care was enhanced. The four key areas of evaluation feedback included; Relevancy, appropriateness, effectiveness and adequacy. The following highlights participant feedback and comments to the survey:

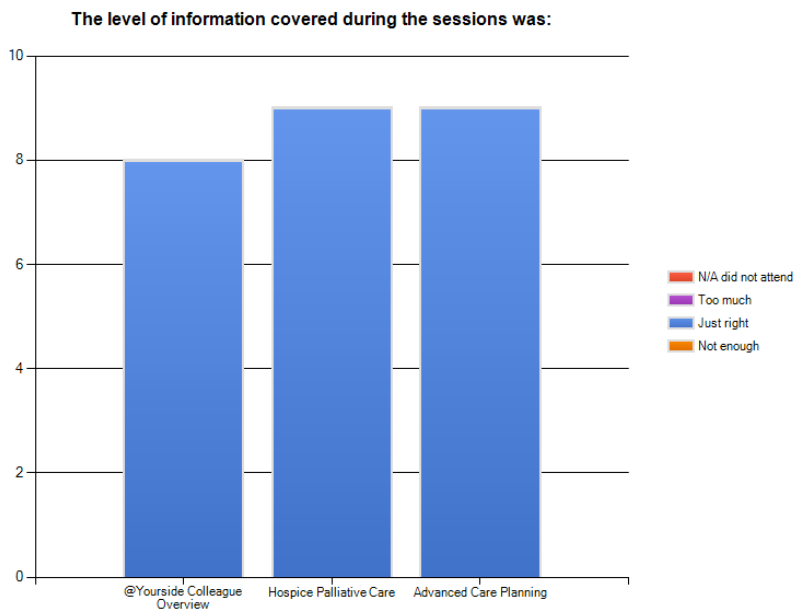
The level of information covered during the sessions was:



Comments:

- *“thanks, really needed the review of symptom management”*

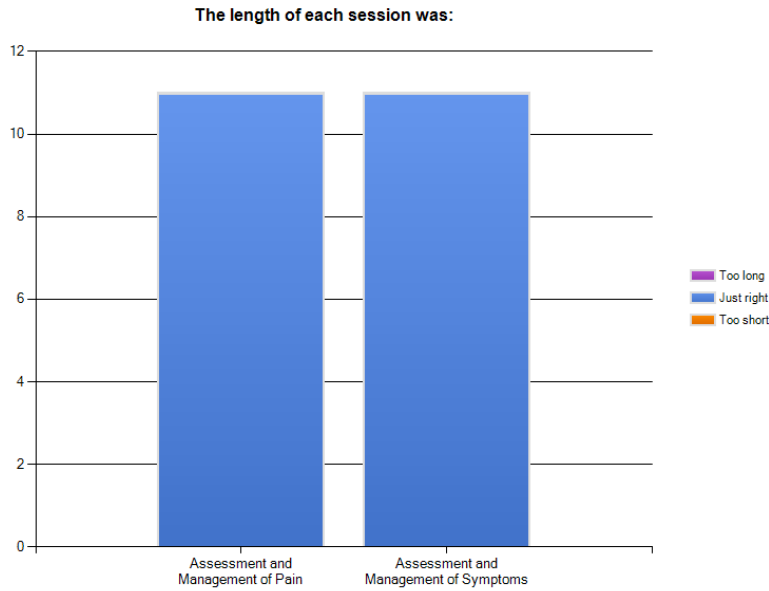
The level of information covered during the sessions was:



Comments:

- *Enough to prompt further exploration (self)*

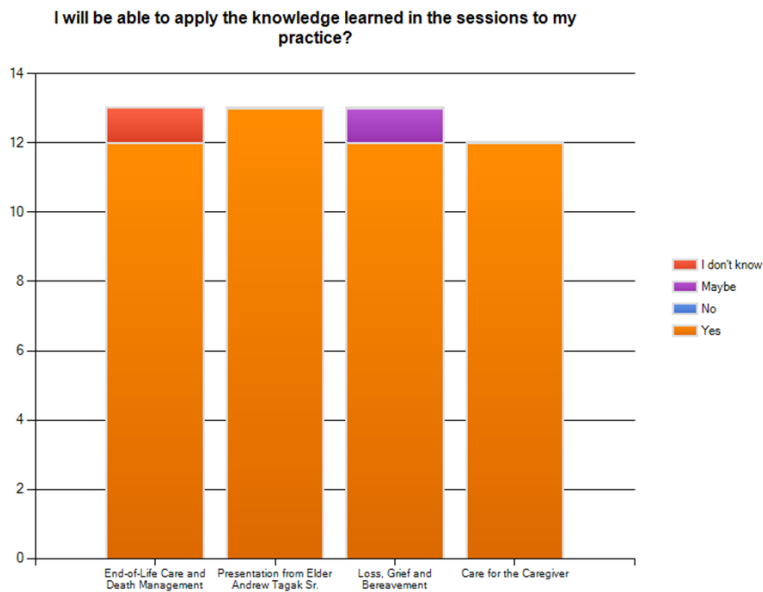
- The length of each session was:



Comments:

- *“Such a huge topic- you could spend a whole week on!”*

I will be able to apply the knowledge learned in the sessions to my practice?



Comments:

- *“Most important breakthrough was reminder to present information in positive way”*

I would be interested in attending trainings like this in the future?

- *“Absolutely”*

What did you find most helpful or supportive about today's sessions?

- *“Hearing other attendee’s experiences. Validation of my own knowledge.”*
- *“Elder (Andrew's discussion)”*

What else would you like to know about today's topics?

- *“more about the grieving process, skill to support clients through grief (talk therapy)”*

Do you have any general comments or feedback you would like to share?

- *“Lovely workshop- THANK you, Jenn, Vicki and Marnie! Strong focus on client perspective and listening to their needs (bottom-up approach) Thank you for including rehab! Very grateful for the opportunity.”*
- *“Excellent, open, safe presentation with superb sharing of info.”*

Conclusion/Next Steps

Significant learning outcomes were achieved through investments in a palliative care training that focused on the learning needs of the participants with a focus on the inclusion of Inuit traditions and culture. Relationships were formed, knowledge was enhanced and approaches were changed in relation to palliative care and on-line learning.

The FNIM Program Engagement Liaison will follow up with participants with a *“Knowledge to Practice”* survey 3 months after the training. This purpose of this survey will be to help determine the knowledge transfer to practice and the impact on client care.

The effects of this training will continue to be felt in the communities of the Nunavut Territory. This approach has encouraged and promoted those who received the training to pass on their learning within their community. This meaningful approach to learning harnessed the collective wisdom and passion of health care providers to act as agents of change in their communities.

