Palliative Care Education for Medical Students

- UNSW and beyond

-Frank Brennan
-Palliative Care Physician
-St George Hospital
-Sydney, NSW
Acknowledgements

• Dr JanMaree Davis FRACP

• Dr Amy Waters FRACP
• Beginnings

• Structure

• Survey of Palliative Care Education in Medical Schools in NSW/ACT

• The hidden curricula
University of NSW
Until 2005
The Palliative Care component of the medical course was:

1. In 4th year - one hour lecture on pain and palliative care.
2. In 5th year - a single day’s attachment to a Palliative Care service.
Beginnings
The development of a new curriculum
Three major phases each lasting 2 years
Each phase would have 4 Domains including:

“Ageing and Endings”
A Palliative Care Physician Dr Jan Maree Davis joined the design group for “Ageing and Endings”
Phase 1
In Years 1 and 2:

1. Lectures and tutorials on cancer, palliative care, pain management and dying.

2. Video presentation of a cancer case including a Palliative Care consultation.

3. Projects and assignments on Palliative Care
Group Assignment

To interview two health professionals working in Palliative Care, including a Palliative Care Physician
Group Project

To interview either a Medical Oncologist or Palliative Care Physician on the topic of Euthanasia
Phase 2
A week in a clinical setting
A common approach was adopted across the multiple Palliative Care sites
Involvement in a Pilot Study of the National Undergraduate Palliative Care Curriculum (PC4U)

Queensland Institute of Technology
The Palliative Care week
Week commences:

- Lecture 1 – Introduction and principles of Palliative Care
- Lecture 2 – Ethics
Mixture of clinical teaching, Hospital ward based learning, Hospice based ward rounds, Community Palliative Care visits.
## Timetable for Medical Students at Calvary Hospital

**for October 13-16 2009**

<table>
<thead>
<tr>
<th>Tuesday 13/10</th>
<th>Wednesday 14/10</th>
<th>Thursday 15/10</th>
<th>Friday 16/10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>TSH : FB:14-16,18-20</td>
<td>0830 Journal Club</td>
<td>StGH-FB and Reg : 1 - 12</td>
</tr>
<tr>
<td></td>
<td>Calv Reg A – 17, 21</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CPCT: 1-4</td>
<td>CS : 16-20</td>
<td>Calv Reg A – 13,14</td>
</tr>
<tr>
<td></td>
<td>Calv Reg B -22, 23</td>
<td>FB : 1 - 6</td>
<td>Calv Reg B– 15,16</td>
</tr>
<tr>
<td></td>
<td>St GH - AW 5-7</td>
<td>CPCT: 7-11</td>
<td>CPCT : 17-20</td>
</tr>
<tr>
<td></td>
<td>Reg: 8, 9</td>
<td>TSH – AW: 21-23</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CNC :10,11</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CNC : 12,13</td>
<td>St GH Reg : 15</td>
<td></td>
</tr>
<tr>
<td></td>
<td>11am Welcome to</td>
<td></td>
<td>1pm - Pall Care Forum</td>
</tr>
<tr>
<td></td>
<td>Hospice</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CET – 2pm</td>
<td>C Praxis -2pm</td>
<td>2pm Bereavement</td>
</tr>
<tr>
<td></td>
<td>2 pm Communication</td>
<td>Didactic Tutorial</td>
<td>Simone Connell</td>
</tr>
<tr>
<td></td>
<td>Workshop</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bedside Teaching</td>
<td></td>
<td>3pm De brief/</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Evaluation FB</td>
</tr>
<tr>
<td></td>
<td>AW : 1-4</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>FB : 5-8</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Calv Reg A : 9-12</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Calv Reg B – 13-16</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>St GH Reg - 17-20</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **CS** = Dr Christine Sanderson
- **JL** = Dr Judith Lacey
- **FB** = Dr Frank Brennan
- **AW** = Dr Amy Waters
- **St GH Reg** = Dr Carmen Holten
- **Calv Reg A** = Dr Caitlin Sheehan
- **Calv Reg B** = Dr Elaine Conroy
Organisational lessons
Critical need for careful organisation, that one senior person takes responsibility for planning the week, greeting the students upon their arrival and formally concluding the week, organising venues and ensuring that all staff are aware students are coming
• It is a whole-of-service approach

• Not just teaching load falling to a few
Evaluations very positive
• “This was so much different to what I expected”

• “One of the best organised of our weeks”

• “We’ve never seen doctors talk to patients in the way you do”

• “The week has been a revelation”
Consistently one of the highlights for the students are visits to patients at home
Survey of Medical Schools in NSW and the ACT on the content of Palliative Care education for medical students

2009
Newsletter of the NSW Society of Palliative Medicine
Considerable variations in:

Formal time devoted to Palliative Care, the content and structure of that component, the capacity of individual universities, teaching Hospitals and Hospices (including the numbers of Palliative Care Consultants that are available to teach), opportunities of exposure of students to hospitals, hospices and community palliative care and availability of educational materials.
The hidden curricula
Conclusion

• Significant developments in Palliative Care teaching at the UNSW

• Considerable debt owed to the work of Professor Yates and her group

• Considerable variations across NSW and the ACT