

CURRICULUM FOR TRAINING

PHASE 1- February 28 and March 27

The Philosophy of Hospice/Palliative Care

- Definition
- 5 key principles of care
- Importance of the multi professional teamwork
- Describe the process of dying
- Recognize the dying patient
- History of palliative care worldwide and locally
- When it should be introduced
- Who can provide it and to whom to provide

Pain Management

- Evaluation and assessment
- WHO stepladder approach to pain
- The treatment modalities

Symptom Management

Recognize the different symptoms, assessment, treatment and the need to communicate with team members

The following symptoms will be discussed

1. Nausea and vomiting
2. Dyspnea and breathlessness
3. Constipation
4. Lymphedema
5. Mouth care
6. Anorexia and cachexia, poor appetite
7. sleeplessness

PHASE 2- May 30 and June 25

Rehabilitation therapy in palliative care

The importance of rehabilitation for palliative care patients will be emphasized. The PT and OT are an important part of the team.

The topics include:

1. ADL for those with limited mobility
2. Transfers : bed to chair, chair to car etc
3. Prevention of pressure sores
4. Maintenance of muscle tone
5. Activities for the house bound and the bed bound patients

Ostomy care

A how to guide on how to take care of ostomies, including but not limited to tracheostomy, colostomy, gastrostomy, jejunostomy and the like.

Nutrition and diet planning in palliative care

Feeding has always been a challenge for the caregivers for the seriously ill patients. More so if they have specific problems like a kidney problem.

Creating a good meal for our patients will be an end goal for this session.

PHASE 3- August 22 and September 25

Hospice emergencies

Though we say that our patients are being prepared to die, there are still situations that merit emergency care. These include

1. Spinal cord compression
2. Superior vena cava syndrome
3. Bleeding
4. Hypercalcemia

Ethical issues in palliative care

1. Nutrition : to feed or not to feed?
2. When do we say enough is enough?
3. Euthanasia
4. Disclosure
5. Living will/ Advance directives

PHASE 4- October 24 and November 27

COUNSELLING

GRIEF AND BEREAVEMENT

Explore loss and grief theories, case studies and how to care for individuals facing loss and bereavement

LOOKING AFTER YOURSELF

- Burn out
- Teamwork
- Self awareness
- Caring for the carer : what are the causes of stress, how to recognize stress in yourself and others, demonstrate the effective use of coping strategies including assertiveness, reflection, debriefing and clinical supervision

PHASE 5 (Soon to come)

“If I can find the right words to say”

Discuss general communication skills, practical communication skills, difficult questions and how may respond to them, case study reviews

OTHER TOPICS THAT MAY BE DISCUSSED:

1. Palliative care for non malignant conditions
2. Children and grief: supporting the bereaved child
3. Talking to children about illness and death
4. Spirituality in palliative care: finding the meaning of life