



Learning and teaching in clinical practice

## An evaluation of an interprofessional master's level programme in children's palliative care: The students' evaluation

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## ABSTRACT

In 2010/12 an innovative children's palliative care interprofessional educational project funded by the Irish Hospice Foundation was undertaken in a University faculty (Trinity College Dublin). This initiative responded to international educational recommendations to meet the palliative care needs of children. The project involved the development and delivery of 3 standalone modules at Master's level and a substantive research evaluation of the project to examine stakeholders and students perspectives to provide an insight into their experiences and to gather data for future developments. The research evaluation was conducted in two parts, part one sought students' evaluation and part two sought stakeholders', curriculum developers and lecturers' feedback.

This paper reports the students' evaluation. Findings indicate that students perceived undertaking the modules provided them with the opportunity for improved interprofessional learning and they found modular content and assessment challenging. They also found the modules met their educational needs and also promoted an awareness of interprofessional education and the collaborative teamwork involved in children's palliative care. These students already experienced in children's palliative care indicated that those teaching on programmes at this level need expertise and programme time needs to be available for sharing experiences and for consolidation of learning.

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## Introduction

The Republic of Ireland, in keeping with other countries internationally, has experienced an increased number of children and young people with life-limiting conditions (LLC) who require palliative care. These children have a wide range of very complex health care needs, which require sustained services for the child and family not only for the duration of the child's life but also into bereavement, have been the focus in current national and international policies. In Ireland, for example, as elsewhere there are recommendations regarding the need for service improvements and development underpinned by a sound knowledge base and

provided by an educated and competent workforce (Department of Health and Children (DOH&C), 2001, DoH&C and the Irish Hospice Foundation (IHF) (2005) and the DOH&C, 2009). Such recommendations for improvement are made clear in the following directive indicating "the need for staff to develop the competencies required to address the palliative care needs of children" together with "the development of a core module of integrated learning for all health professionals" (p.vii).

In addition to policy directives in curriculum development in health care programmes the need for interprofessional education is emerging nationally and internationally (World Health Organisation (WHO) 2010) to ensure optimal health care is delivered. Interprofessional education is said to occur when members or students of two or more health and/or social care professions engage in interactive learning activities to improve collaboration and or the delivery of care (Reeves et al., 2010; Barr, 2013). In the United Kingdom the Care Quality Commission (2009) identified the potential contribution of interprofessional education in safe health care delivery. The need for interprofessional education is also

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included in many recent educational initiatives (Kitto et al., 2013) and is linked to the need to reinforce interprofessional practice internationally (Craddock et al., 2013). Interprofessional education has been linked to the reduction in medical errors, hospital readmissions, decreased mortality rates and improved health outcomes for those with chronic conditions (WHO, 2010).

## Background

In response to the above recommendations and directives, and because there were no inter professional programmes in children's palliative care available in the Republic of Ireland, the IHF in 2010/2011 provided funding for the development and delivery of standalone interprofessional Master's level modules at level 9 under the Bologna agreement. This significant funding enabled the establishment of a research and teaching team to develop an interprofessional children's palliative care education programme, a first in the country. The three modules were developed in the School of Nursing and Midwifery, (Trinity College Dublin) in 2010/2011 and from the outset this modular programme was planned and delivered in close collaboration as has been identified as central to interprofessional healthcare education (Webster, 2013) with key stakeholders from a range of professional background including clinical and specialist experts. The programme curriculum was guided by the philosophy of interprofessional education (Mac Dougall et al., 2001) and the development of the modules was influenced by the curricular cycle (Peyton, 1998).

Critical to the development of the programme content was its academic level, applicability and relevance to children's palliative care practice and service needs in all settings across the country. The project team developed three Master's level interprofessional modules, (1) philosophy, principles and practice in children's palliative care, (2) pain and symptom management in children's palliative care and (3) psychosocial and spiritual issues in children's palliative care. Each module was awarded 10 credits by the University. The modules could be taken as standalone or in totality and were delivered face to face in a classroom setting. Additional educational resources were posted on line for students. Given the embryonic state of specialist children's palliative care services in Ireland direct teaching methods were chosen deliberately and specifically at the outset as there was an identified need for health professionals to come together to network (Tracey and Nicholl, 2006).

Following a year in which the curriculum was developed three separate interprofessional modules in children's palliative care were delivered in 2011/2012 by key stakeholders, interdisciplinary experts and practitioners with expertise in this field of practice. This included interprofessional specialists from nursing, medicine, social work, physiotherapy, psychology, play, art therapy, chaplaincy, speech and language therapy, family and childcare as well as experts in ethics and law. Content related to contemporary national and international issues and challenges in the delivery of care to children and their families. Content was also designed to enable participants to develop the knowledge, skills, competencies and attitudes to enable them to deliver best practice palliative care to support to children who are living with life-limiting conditions and their families in all care settings from an interprofessional perspective. The learning outcomes for the modules were written to be deliberately broad but were sufficiently detailed to act as a guide to the student's learning. The achievement of modular outcomes by the student required advanced study in the theoretical, philosophical and practical aspects of children's palliative care. On completion of each module, students completed a formal theoretical assessment to facilitate them to apply and relate the theoretical elements of the programme to their specific area of clinical practice and role. This required the student to demonstrate critical thinking and reflective

practice skills to the delivery of children's palliative care. There was no clinical practice element to the modules as the participants were already qualified professionals working in this field. In addition to a formal specific written assignment summative informal assessments and oral class presentations were included to facilitate group learning, networking and to integrate a theoretical perspective to their professional practice. Each module was also designed to be delivered over 5 full days one day a week for 5 weeks. This was planned because as all students would be working it was essential from stakeholders and managers perspectives that there would need to be minimal disruption to service delivery. It was also implemented as students would be travelling from all parts of the country so it was important to maximise their time in class.

From the outset the planning team recognised the need for constant and complete evaluation of all aspects of the programme (Mac Dougall et al., 2001; Mellor et al., 2013). This was also a funding requirement and necessary as part of the University evaluation protocols. In addition as this was the initial programme, evaluation was needed for the development and future delivery of the programme. In keeping with the belief that curriculum development is an ongoing and evolving process, it was agreed at the outset that the programme would be fully evaluated. Consequently all aspects of the curriculum design and delivery were subjected to critique by key stakeholders including participants, service providers, employers and all those involved in the programme. The complete evaluation project examined the development and delivery of the three interprofessional modules from student and stakeholders perspectives to identify key issues involved in the further development and follow up (Ford, 2013) and to the add to an improved understanding of the development of an interprofessional programme in children's palliative education. To this end a separate research study was developed to ensure that a summative evaluation of the project by stakeholders and all students was undertaken. This evaluation was conducted in two parts student evaluation and stakeholder evaluation.

The aim this paper is to present the evaluation of the students who completed the programme with a view to identifying what worked, what should be changed and to identify their suggestions for the future development of the programme based on their experiences of this first programme.

## Objectives

The substantive research evaluation objectives were carried out in two parts, part one sought the students' evaluation and part two sought stakeholders, curriculum developers and lectures evaluation. This paper specifically reports on the students' evaluation of their experiences of the delivery of the 3 standalone interprofessional modular programme in children's palliative care.

## Ethical approval

Ethical approval to undertake this substantive evaluation research study was granted by the Faculty of Health Sciences research ethics committee (Trinity College) Dublin. Throughout the study the principles of good ethical practice were adhered to including confidentiality, informed consent and the protection of students' rights.

## Participants

All fifteen ( $n = 15$ ) students who participated across the three modules were invited to participate in the student evaluation. Students represented a range of professional practitioners [nurses, social workers, physiotherapists and chaplains] involved in the

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