Learning outcomes of an Inter-professional Training Palliative care Program in Greece

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Background: An inter professional educational program in palliative care, has been organized for many years in collaboration of GALILEE palliative care unit and department of Nursing, National and Kapodistrian University of Athens.

Aims: Learning outcomes evaluation of an inter-professional palliative care training program (IPTP).

Methods: A pre- and post-test study design was used. Interactive training on fundamentals aspects of palliative care was offered in 40hours/5-days (April 2018) to 34 professionals. Only 22 (response rate 64.7%) (11 nurses, 4 doctors, 2 social workers, 1 psychologist, 1 physiotherapist, 1 pharmacist, 1 priest, and 1 administrator) consented to participate. The evaluation of the IPTP included a 48 true/false items self-administered knowledge tool (Cronbach's a =.067), at baseline (T_0), IPTP completion (T_1), and one month later (T_2). The knowledge assessment tool was based on the Palliative Care Quiz of Nursing. The statistical significance level: 0.05.

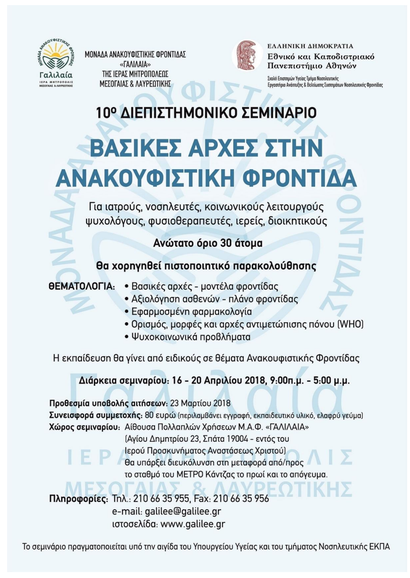
Participants' Demographic Characteristics

	N (22) (%)
Sex	
Female	19 (86.4)
Male	3 (13.6)
Age (mean ± SD) (range) years old	42.1±8.4 (25-53)
Professional experience duration (mean ± SD) (range) years	17±9.1 (0-31)

SD Standard Deviation

Prevalence of Most Frequent Correct Answers at Each Measurement

	Baseline (T_0)	After IPTP (T_1)	One Month After (T_2)
Item	**N=22 (%)**	**N=22 (%)**	**N=22 (%)**
Nursing skills about caring for dying	21 (95.5)	21 (95.5)	21 (95.5)
Recognition of death as normal	20 (90.9)	21 (95.5)	22 (100.0)
Palliative means pharmacological treatment	20 (90.9)	20 (90.9)	22 (100.0)
Choice of dying in the hospital	20 (90.9)	21 (95.5)	20 (90.9)
Palliative care philosophy	19 (86.4)	22 (100.0)	21 (95.5)
Most common symptoms in advance disease	19 (86.4)	20 (90.9)	19 (86.4)
Communication skills	19 (86.4)	19 (86.4)	20 (90.9)
Caring of the dead body	19 (86.4)	19 (86.4)	17 (77.3)
Palliative means aggressive treatment	18 (81.8)	20 (90.9)	21 (95.5)
Differences between chronic and acute pain	18 (81.8)	21 (95.5)	21 (95.9)
Spinal cord compression treatment	18 (81.8)	18 (81.8)	20 (90.9)
Telling the truth about diagnosis	18 (81.8)	22 (100.0)	21 (95.5)
Implementation of clinical pathways about choice of death	17 (77.3)	19 (86.4)	18 (81.8)
Drowsiness during dying	17 (77.3)	20 (20.9)	20 (90.9)
Emotional detachment is a good practice	16 (72.7)	21 (95.5)	20 (90.9)
Good practice after death	14 (63.6)	18 (81.8)	20 (90.9)
Supportive pain management treatment	14 (63.6)	19 (86.4)	21 (95.5)
Suffering and Pain	12 (54.5)	17 (77.3)	20 (90.9)
Artificial hydration near death	11 (50.0)	20 (90.9)	19 (86.4)



Prevalence of Most Frequent Wrong Answers at Each Measurement

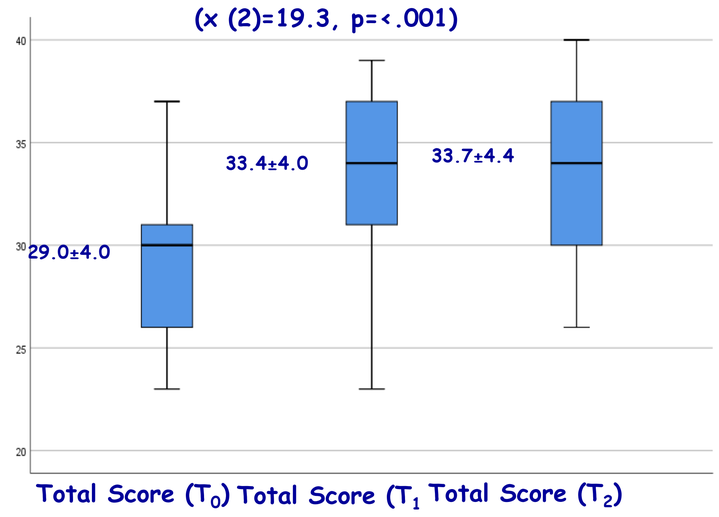
	Baseline (T_0)	After IPTP (T_1)	One Month After (T_2)
Item	**N=22 (%)**	**N=22 (%)**	**N=22 (%)**
Communication skills	20 (90.9)	15 (68.2)	15 (68.2)
Spiritual counselors	20 (90.9)	17 (77.3)	20 (90.9)
Bereavement	20 (90.9)	14 (63.6)	18 (81.8)
Spiritual care education	18 (81.8)	19 (86.4)	16 (72.7)
Assessment tools for professional competences	17 (77.3)	20 (90.9)	17 (77.3)
Use of placebo	16 (72.7)	5 (22.7)	7 (31.8)
Family behaviors during dying	16 (72.7)	21 (95.5)	22 (100.0)
Pain management due to disease stage	15 (68.2)	11 (50)	14 (63.6)
Respect of cultural	15 (68.2)	19 (86.4)	17 (77.3)
Opioids addiction	14 (63.6)	5 (22.7)	6 (27.3)
Impact of fatigue and anxiety on pain	14 (63.6)	13 (59.1)	13 (59.1)

The total number of correct answers at baseline (T_0) were statistically significant improved after the IPTP (T_1) (z=-3.4, p=.001) and one month later (T_2) (z=-3.5, p< .0001). No statistically significant differences was found between (T_1) and (T_2).

Knowledge was statistically significant improved after IPTP, at 5 items related with opioids addiction, dying interventions and bereavement (p< .0001 to .016), and a month later, at 2 items regarding meaning of suffering, and use of placebo as analgesic (p< .0001 to p=.005).

Mean Total Score of Correct Answers at each Measurement

(x (2)=19.3, p=<.001)



Conclusions

Attendance at IPTP had a measurable effect on the learning outcomes. Future planning should focus on testing the inter-disciplinary utility of this program and ensuring the maintenance its gains

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