

Defining the Quality Indicators for Palliative Care Education:

Updates from the EU COST Funded CODE-YAA@PC-EDU Project-
COLlaboratively DEveloped culturallyY Appropriate and inclusive
Assessment tool for Palliative Care Education

Stephen Mason¹, Tania Pastrana², Anna Pedrosa³, Mary Nevin⁴, Minna Hökkä⁵, Piret Paal⁶, on behalf of WG1
1 - University of Liverpool, UK. 2 - Uniklinik RWTH Aachen, Germany. 3 - University Hospital of Marburg, Germany.
4 – Dublin City University, Ireland. 5 – Diaconia University of Applied Sciences, Finland, 6 – University of Tartu, Estonia.



BACKGROUND

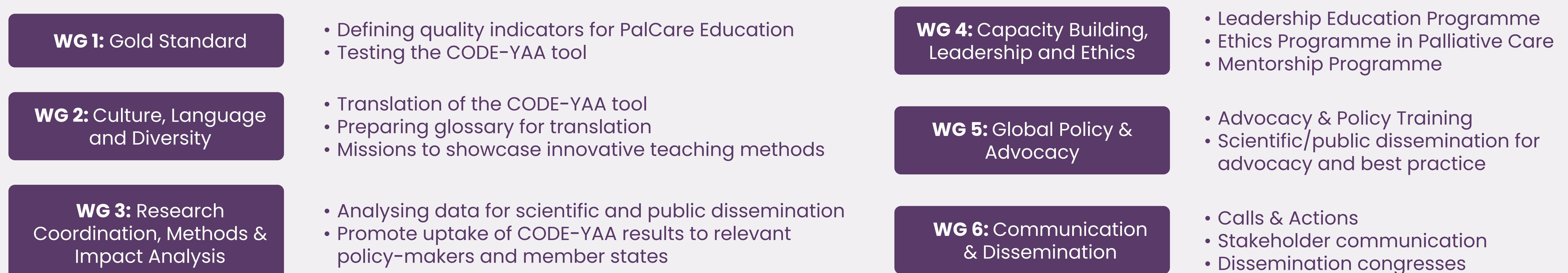
All health systems should prepare to respond to the age-related increase in deaths from chronic disease by developing and improving palliative care education for all clinicians.

1 Currently, the WHO identifies only two actionable indicators for education: the proportion of formal education in palliative care within undergraduate medical/nursing studies, and specialisation in palliative medicine for physicians.

2 To address the needs of people with serious illnesses and their caregivers, more detailed guidance as to what should be taught, and more interprofessional and interdisciplinary educational resources than those already identified for clinical medicine and specialist palliative care, are required.

Funded as an EU COST Action, the CODE-YAA@EDU-PC (COLlaboratively DEveloped culturallyY Appropriate and inclusive Assessment tool for Palliative Care EDUCation) will identify quality indicators for establishing a gold standard for high-quality palliative care education and training. In addition, it will provide opportunities for professional development, training in new methodologies, and exposure to emerging research trends in palliative care education and educational research.

Figure 1 – CODE-YAA@EDU-PC Work Groups



WORK GROUP 1 – GOLD STANDARD WORKING GROUP

Phase 1: Development of Candidate Quality Indicators (QI): WG1 are currently progressing a series of tasks to establish the Quality Indicators that will populate the CODE-YAA assessment tool.

- A scoping review examining 5013 papers has been conducted, yielding 449 papers. From these papers, 27 candidate QI were identified
- Consensus Methodology was employed with two expert groups to generate a list of candidate QI, yielding 88 potential indicators
- A review of 30 curricula documents identified 0 candidate QI.

Phase 2: Delphi study: Following the findings from Phase 1, two meetings to harmonise the developed QI – yielding a final list of 37 items. A two-round Delphi study is being conducted to establish consensus on the candidate QI. Preliminary results from Round 1 have established a high degree (> 80%) amongst the respondents for the majority of the QI – Round 2 will be completed by May 2025. Generation of the final list will support **Phase 3:** Development of the CODE-YAA Assessment Tool.

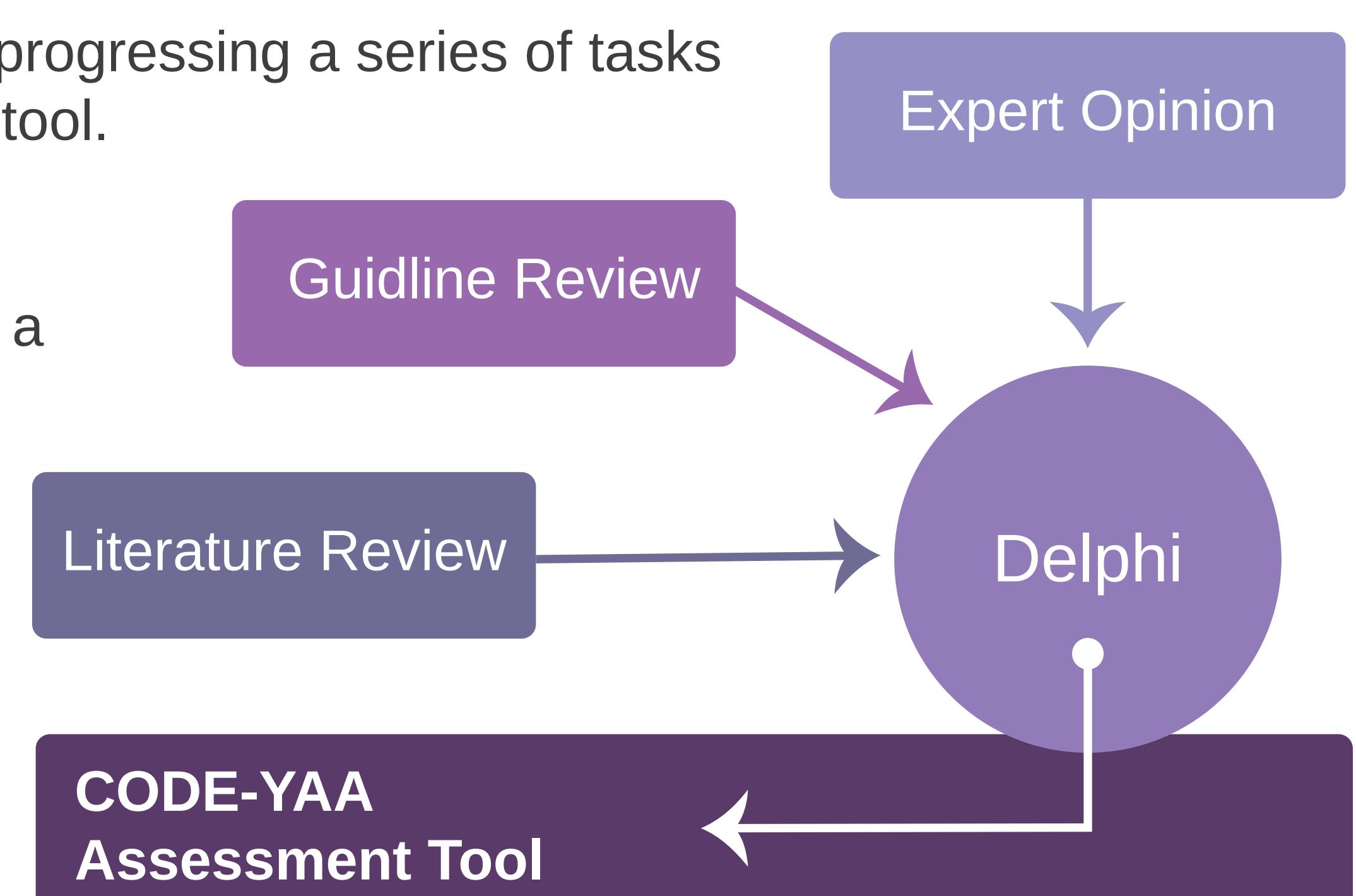


Figure 2 – Methods

The aim is that the CODE-YAA tool will:

- ▶ be piloted and available for use within countries across all disciplines, sectors, and services that provide palliative care;
- ▶ be a free online resource for anyone wishing to develop initial education and training in palliative care or to assess gaps to strengthen their existing education and training in palliative care;
- ▶ be used by a range of stakeholders to encourage open dialogue and discussions;
- ▶ contribute to the development of the vocabulary of palliative care in each Member State.

REFERENCES

1. World Health Organization. Strengthening of palliative care as a component of comprehensive care throughout the life course. WHA67.19. Geneva: World Health Organization; 2014
2. World Health Organization. Assessing the development of palliative care worldwide: a set of actionable indicators. Geneva: World Health Organization; 2021