Aquifer—supported by the Arthur Vining Davis Foundations—is advancing the development of a national, standardized curriculum and online course that addresses critical gaps in palliative care learning across undergraduate medical and health professions education. The Aquifer Palliative Care Leadership Team, a group of expert interprofessional clinician educators, is now developing a new course—“Principles and Practice of Excellence in Primary Palliative Care”—guided by the vision and principles determined in the earlier phases of the project.

Although palliative care is an established specialty, all clinicians should have the skills to provide patient-centered care. Primary palliative care knowledge and skills are critical, but most healthcare professionals never receive standardized primary palliative care education. By focusing on primary palliative care, the course broadens the reach beyond the specialty—moving toward overcoming clinician shortages, lack of access, and lack of training—to improve outcomes and quality of life for seriously ill patients and their families.

**VISION:**

Improve the capacity of the US health professions student to deliver humanistic, compassionate interprofessional care centered around patient goals of care and quality of life by applying evidence-based methods to alleviate the suffering of seriously ill patients and their families through the delivery of primary palliative care.
FACULTY & STUDENT FEEDBACK

Identifying Gaps

Research findings from stakeholder surveys & focus groups identified many common challenges that national standardized curricula and learning tools could address.

STUDENTS & FACULTY AGREE

50% of students are not prepared for serious illness conversations

GAPS: FACULTY VIEW

COVERAGE, CONSISTENCY & COMMUNICATION

What gaps, if any, do you see in your curriculum related to palliative care?

GAPS: STUDENT VIEW

BASIC KNOWLEDGE, ROLES & MANAGING CONFLICT

Students felt unprepared related to:

1. Differences between palliative care & hospice; managing care transitions
2. Approaching serious illness conversations/understanding student role
3. Navigating patient/family/team conflicts
4. Managing pain and opioids
5. Addressing spiritual and cultural issues and their impact on decisions

Key Themes

Common themes emerged from faculty and student feedback:

- Family meetings & conflict management
- Recognizing syndromes & signs of dying
- Interprofessional teams
- Processing personal emotions
- Communication Skills
- Pain management & opioids
- Social determinants of health & cultural understanding
- Palliative care vs. hospice

SOURCES

Faculty Survey (Feb 2021); 237 respondents from MD, DO, PA & NP programs.
Faculty Focus Groups (March 2021); 30 participants from MD, DO, PA, & NP programs.
Student Focus Group (Feb 2021): 14 participants (2 PA students, 5 2nd-year medical students, 5 3rd-year medical students)
FACULTY & STUDENT FEEDBACK

Curricular Integration

WHERE & WHEN PALLIATIVE CARE TEACHING HAPPENS NOW

Faculty responses to the survey question: Where/when do students learn about palliative care in your program?

- Pre-clinical lectures/discussion: 60%
- Elective PC or hospice rotation: 40%
- IM Clerkship: 31%
- FM Clerkship: 26%
- Req. Geriatrics Rotation: 23%
- Req. PC or hospice rotation: 12%
- Standardized patient or sim: 28%

Only 12% have a required palliative care/hospice rotation.

Pre-clinical lectures & discussion are most widely used.

STUDENTS WANT LONGITUDINAL LEARNING IN PALLIATIVE CARE EDUCATION

Students reported a strong desire for longitudinal education tailored to their readiness to help their skills and understanding evolve.

PRE-CLINICAL COURSES
Introduce concepts to prepare for seeing patients

RELEVANT CLERKSHIPS
Reinforce concepts, experience clinical application

- Internal Medicine
- Pediatrics
- Family Medicine
- Geriatrics
- Dedicated Palliative Care Rotations

STUDENT FEEDBACK
“I was uncertain about who (resident, attending, consults, me) was supposed to communicate with patients and families in difficult cases. It would be helpful to understand everyone’s role before being in the hospital.”

FACULTY FEEDBACK
“The student experience is quite variable since there is no standard guideline or requirement to incorporate palliative care teaching.”

STUDENT FEEDBACK
“Broad strokes should be taught in the pre-clerkship to get students familiar with the topic. Then using that information to have informed discussions during rotations would be the best strategy.”
PRINCIPLES OF PRIMARY PALLIATIVE CARE EXCELLENCE

Based on a comprehensive needs assessment, the Aquifer Palliative Care Leadership Team determined the Principles of Primary Palliative Care Excellence to elevate the primary palliative care education and training of all US health professions students, regardless of discipline. Each principle supports the advancement of primary palliative care as a competency for all healthcare professionals.

1. Alignment of care with the goals, values, and preferences of seriously ill patients based on assessed need.

2. Interprofessional collaboration and care coordination between patients, families, healthcare teams, and systems.

3. Evidence-based and holistic approach that addresses the physical, psychological, social, and spiritual domains across the illness trajectory from diagnosis to end-of-life.

4. Equitable access to high-quality, culturally sensitive palliative care services for all patient populations.

5. Education and advocacy to promote palliative care as a gold standard for serious illness care.

Aquifer Case Development & Topics

Primary palliative care cases are in development. The initial set of cases will be available to Aquifer Curricular Partners (programs that subscribe to all five Aquifer Signature courses) on July 1, 2022. Cases will feature: videos modeling communication, authentic clinical experiences, opportunities to reflect on personal emotions, and expert advice on common dilemmas and avoiding pitfalls. Topics include:

- Principles of palliative care
- Palliative care assessment
- Family meetings & establishing goals of care
- Advanced directives
- Pediatric palliative care
- Interprofessional roles & responsibilities as it relates to palliative care
- Supporting patients and families in the grieving process
- Anxiety, depression, and delirium in the context of palliative care
- Pain management overview, pharmacologic approaches for common problems
- Understanding of current disparities in care/outcomes for patients with serious illness
- Non-pain symptom management

AQUIFER PALLIATIVE CARE LEADERSHIP TEAM

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