

Republic of Rwanda



Ministry of Health

National palliative care training curriculum

Trainer's manual

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Acronyms and abbreviations

ACPOPC : Association of Chartered Physiotherapists in Oncology and Palliative Care.

AIDS : Acquired Immune Deficiency Syndrome

ART : Anti retroviral treatment

CBOs : Community Based Organizations

CHWs : Community Health Workers

HIV : Human immunodeficiency virus

M&E : Monitoring and evaluation

MDT : Multidisciplinary Team

MMSQ : Mini-Mental State Questionnaire

NSAID : No steroidal anti-inflammatory drugs

PC : Palliative Care

TENS : Transcutaneous electrical nerve stimulation

WHO : World Health Organization

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Background of Palliative Care in Rwanda

In 2004, the Ministry of Health sent a multidisciplinary team to Uganda to gain experience from the development of the Ugandan palliative care delivery system. In October 2005, the first training in palliative care was organized by the Society of Women against AIDS and by Help the Hospices UK. This training took place at King Faysal Hospital, and 26 health professionals were trained. Further training was later conducted in 2005/2006 by the African Palliative Care Association (APCA), where 25 health professionals were trained. Later, in 2008, a team from IntraHealth began palliative care training in four district hospitals: Kibagabaga, Nyagatare, Rutongo and Byumba hospital, as well as their respective health centers.

Despite this training, palliative care in Rwanda is still in its infancy with some autonomous community-based organizations or nongovernmental organizations (NGOs) providing home care to vulnerable people, especially people living with HIV/AIDS. Most of these efforts in palliative care through home care were supported by Partners in Health¹ which has trained community health workers known as “coaches.” These coaches distribute ARVs (ARVs) and support patients to increase their adherence to medication. However, Rwanda lacks both the capacity to deliver palliative care at all levels to underpin palliative care service development.

¹ Rwinkwavu and Kirehe hospitals train the staff from the community who are known as coaches. The coaches’ role is to distribute ARVs in the morning and at night to people living with HIV/AIDS. Each coach receives from Partners in Health Rwf 8,000 per month per household, without exceeding six households, and monthly incentive of Rwf 23,000.

Introduction

Course description: This 5-day course is designed to train facility-based health care providers in the holistic care and management of adults and children living with life-threatening illnesses, including addressing the needs of their families and communities.

Course goal: The goal of the training course in palliative care is to equip health care providers with the knowledge, skills, and attitudes to provide holistic care and management of adults and children living with life-threatening illnesses, including counseling and education for their families and communities.

Learning objectives: By the end of the course, participants will be able to:

- Discuss basic concepts related to palliative care, including definition, background, components, and principles of palliative care
- Identify five models of palliative care
- Assess the needs of adults and children with life-threatening illnesses including HIV/AIDS and cancer
- Identify and plan the care that will be required to meet the needs of adults and children with life-threatening illnesses
- Effectively communicate with and counsel adults and children with life-threatening illnesses and their families, communities, and other health professionals involved in the patients' care
- Make appropriate clinical decisions to provide holistic care that is structured around the patient's and the family's needs, their understanding and priorities with the aim of maximizing quality of life
- Develop effective clinical skills for caring for adults and children with life-threatening illnesses, which take into account the associated gender, legal, social, and cultural issues.
- Develop appropriate skills to effectively monitor, evaluate, and manage palliative care programs that are integrated into the health services
- Document and disseminate best practices in palliative care programs for replication
- Train other multidisciplinary team members in palliative care

Training/learning methods:

- Illustrated lectures and discussions
- Group discussions
- Case studies
- Role plays
- Demonstrations/return demonstrations

Training materials:

- Palliative Care Reference Manual
- Palliative Care Trainer's Manual
- Palliative Care Participant's Handbook?? (includes Introduction, agenda/schedule, handouts, module objectives, what else?)

Evaluation methods:

1. Class based learning

- **Pre and post-tests:** A pre-test will be conducted at the beginning of the training to assess the baseline knowledge of participants. A post-test will be done at the end of the training to assess the extent to which learning has taken place. The same questionnaire will be used to assess participants' pre and post training knowledge.
- **Performance during the training:** Observation of practical skills as applied in class and where possible conduct peer evaluation through role plays, practicum or any other direct observational activities.
- **Post training mentoring:** With support of the mentor the participant will be followed up to assess achievement of the set objectives for the clinical practice. At the end of the clinical practice the participants will write report based on best practices, challenges, observations and areas of improvement.

2. Work place learning/Practicum

The participants will conduct a work-based assignment, e.g., identify a client, assess their needs and help the client come up with ways of meeting the identified needs.

Follow up of participants by the facilitators to observe the skills they are applying in their work place will also form part of the mentoring during the participants practice.

3. Validation and Certification

This course is validated by the Rwanda Biomedical Centre (RBC). Certificate shall be provided to participants upon successful completion of the course.

4. **Participant selection:** Intended participants for this course are health care providers working in hospital wards, outpatient clinics, health centers, and dispensaries, including nurses, laboratory technicians and pharmacists. The entry criteria will be as follows:

- A minimum of a basic training in health care or its equivalent from a recognized health training institution
- A recognized and appropriate professional qualification for example, registration as a nurse with the National Nursing Council or a medical practitioner registered with the National Medical Council, or a social worker or counselor registered with the appropriate professional body.
- Evidence of currency in practice assessed through professional/personal curriculum vitae.
- Currently employed in a clinical setting with a minimum of 6 months experience in working with patients with life-threatening illnesses.
- Written letter of support of employer.

5. **Trainer/facilitator selection:** Facilitators for this course should be health or health related professionals who have been educated to at least advanced diploma or first degree level, have experience in palliative care setting and community health, and have been trained as a trainer in palliative care. The Rwanda Biomedical Centre will create a pool of national trainers for palliative care from which the training organizers will draw trainers from time to time.

6. **Course composition:** In order to guarantee quality in the training, each course will comprise 25-30 participants and will be facilitated by a minimum of 2 co-facilitators of diverse backgrounds, e.g., Nurse, Pharmacist, Doctor, Counselor, Occupational Therapist, Physiotherapist, as it is appropriate for the group of participants.

Trainer guidelines and preparation

This present training manual gives a step by step guidance and necessary information to facilitators on how to organize and conduct a palliative care training course. For each module, the manual presents:

- The training objectives
- The module overview
- The approximate duration of the module
- The suggested training methodology
- The list of suggested training materials
- The suggestions for the training procedures

For efficient and effective use of the present curriculum, it is recommended that the facilitator read and understand the entire document before starting the training course. A careful and repeated reading will enable the facilitator to own the content and feel comfortable using it. A good understanding of the curriculum will also enable the facilitator to better organize the training modules in a logical manner.

In addition to the above, it is advised that the facilitator use the present curriculum following the suggested sequences. Sometimes it will be necessary to spend more time for some modules than others with regard to participant's profile. The pre-test conducted at the beginning of the training course, as well as participants expectations, will help the facilitator team decide on which topics to spend more time versus other topics.

This training manual is part of a 10days palliative care training curriculum. Although exercises are timed, in actuality times may vary somewhat. The agenda assumes that the day starts at 9:00 a.m., lunch takes 60 minutes, and the day will end at 5:00 or 5:15 p.m.

The trainer is encouraged to utilize the suggested group activities and role plays in the curriculum. However, s/he should feel free to use other group activities and/or role plays according to the context and the needs of the group of participants.

Note to facilitators: for refresher training, feel free to reorganize the present curriculum to meet trainees need.

Selection of Practicum Sites

Given that this is intended to be performance-based training, trainers need to make arrangements for practicum sites for the workshop participants to practice their newly acquired knowledge and skills. Practicum sites should be arranged well in advance of the training week.

These sites should be located close to the workshop venue to minimize travel time, so trainers should keep this in mind when selecting the workshop venue as well as practicum sites. For instance, it may be advisable to obtain practicum sites before making a final selection of venue. Practicum settings should be the same as or similar to, the participants' work settings and represent a diversity of services. For example, practicum sites may include a clinic care setting, an HIV/anti-retroviral (ARV) treatment facility or a cancer treatment center.

Trainers should meet with the managers of potential practicum sites to discuss the training workshop as well as the benefits of participating as a practicum site.

Once practicum sites are identified and site managers agree to participate, meet with them to explain and discuss what participants will be doing at the practicum sites, what type of preparation is needed, when the practicum will occur, and what they expect from the training as a practicum site.

It is advisable to create a written document of your agreements and arrangements with each practicum site manager.

Planning Follow-Up

The day-long practicum is the core of this training workshop. After the training, participants will need periodic supervision and support for applying their new skills in their own worksites, and opportunities for further training. Trainers and their organizations need to decide what kind of follow-up they can provide and make the necessary arrangements. We recommend that organizations sponsoring this training program arrange for participants to connect with other groups of trainees (in electronic forums or in other ways) in the months following the training to share experiences, discuss common questions and concerns, and brainstorm solutions to problems.

Guidelines for Conducting Effective Training

A skilled trainer inspires participants to learn. By demonstrating expertise in the content area, using strong training skills and describing clearly how the course goals and learning objectives relate to improving the participants' work performance; the trainer establishes credibility and thus inspires participants. The following tips and guidelines for delivering training, adapted from the 2003 IntraHealth/Prime II/Jhpiego document *Training Works!*, help ensure that the training program will achieve its goals and objectives.

❖ Establish and maintain credibility

- Arrive early for the workshop every day (but especially on the first day)
- Greet the participants individually and as a group (especially on the first day)
- Learn participants' names quickly
- Describe the workshop design clearly and thoroughly
- Encourage participants to ask questions
- Refer to your own experience and credentials modestly and appropriately
- Model positive behavior and attitudes that support the workshop goal and learning objectives
- Explain roles, responsibilities, learning objectives, expectations, and group norms clearly
- Provide opportunities for participants to share their expectations
- Respect and build on participants knowledge and skills

❖ Conduct a training module in a responsive and collaborative way

- Collaborate and build relationships with participants, their supervisors, and other trainers
- Adjust your training and communication style to meet participants needs
- Exhibit energy by interacting with participants, asking effective questions, presenting with intensity, and using humor appropriately
- Handle problems and challenges effectively and courteously
- Dress consistently with local norms, and always be on time

Create a learning environment where participants feel comfortable and safe

- Respond politely to all question even those you find naive
- Use a variety of learning methods (e.g., role plays, case studies, simulations) as outlined in the training plan, with content based on participants' performance needs
- Respect answers and viewpoints different from yours, do not belittle participants or other trainers, and offer feedback in ways that are socially appropriate for the ethnic or cultural groups represented in the training
- Encourage participants to try out new behaviors and skills, and provide encouragement and positive feedback when participants do try
- Manage any negative individual or group behaviors
- Help participants feel comfortable to fully participate in the training and learn from one another as well as from the trainer
- Provide opportunities for participants to answer questions raised by their peers
- Encourage participants to explain training messages to their peers
- Celebrate "small wins" and positive progress with the whole group
- Create a climate of fun by doing things participants enjoy and find humorous or engaging
- Help and encourage participants to look at situations from different perspectives

❖ Provide supportive feedback

- Provide positive and timely feedback to participants when they have performed well
- Follow participants progress during activities, and provide direct, specific feedback to reinforce accurate responses and to correct inaccurate responses
- Validate participants' questions, feedback, and concerns while preserving participants' individual dignity and self-esteem
- Listen carefully for participants' feedback about their learning needs and respond accordingly
- Add your own suggestions to feedback from participants about what should be changed to improve the quality of the training experience and meet training requirements, and how those changes should be made

❖ **Use effective communication and presentation skills**

- Tailor verbal and nonverbal communication to the participants' culture and needs
- Give clear and concise directions
- Use a variety of instructional media (e.g., flip charts, transparencies, printed materials, and technology-based methods) appropriately to enhance instruction and involvement
- Ask participants to share their viewpoints so that the training can build on their knowledge and backgrounds
- Explain concepts and procedures clearly, and reinforce essential or critical messages
- Use memorable or vivid examples to illustrate key points
- Use voice, gestures, silence, movement, posture, space, and appropriate equipment, supplies, and other objects to support and enhance learning
- Ask questions and encourage interaction
- Use culturally appropriate anecdotes, illustrations, analogies, and humor to enhance participants' understanding and involvement
- Check participants' understanding by asking questions, assessing responses, conducting informal conversations, and observing practice modules
- Change the presentation approach in response to clues from participants
- Use techniques such as learning diaries, action plans, and peer support to identify ways to apply newly acquired knowledge and skills on the job

❖ **Use effective facilitation skills**

- Use a variety of facilitation techniques
- Help participants to distinguish between fact and opinion during discussions
- Summarize or conclude learning experiences by asking questions about the experience, comparing and contrasting participants' responses, and helping them to draw conclusions about the objectives of these experiences

❖ **Provide opportunities for practical application of knowledge and skills**

- Ensure application of knowledge and skills by providing appropriate learning opportunities drawn from real-life experiences such as simulations, role plays, games, and case studies
- Demonstrate skills using anatomic models, role plays, and commonly available equipment
- Have participants practice these techniques before you give them feedback
- Link conceptual approaches to real-world applications by providing guided practice at clinical sites
- Show in a variety of ways the on-the-job benefits of meeting the learning objectives
- Assist participants with planning how they will apply their new knowledge and skills on the job

❖ **Monitor the training process and make adjustments as needed**

- Manage the physical environment to be sure it supports participants in mastering objectives
- Prepare for the use of audiovisual equipment and have a back-up plan in case of problems
- Modify the media used to accommodate participants needs and the realities of the situation
- Manage time well to ensure that all learning objectives are met
- Listen to participants for evidence of learning and engagement
- Observe individual and group behaviors
- Ask for feedback on content and delivery and encourage participants to share new ideas to improve the learning experience
- Make appropriate adjustments during the current training day as well as adjustments to the next day's schedule
- Make changes in the original design based on participants' feedback gathered directly through questions or through observation of their progress
- Interact with participants during meals and other free time

Planning and logistics

Great trainings don't just happen; they require a great deal of advanced preparation. If you are in charge of organizing training, you will need to start preparation at least four weeks prior to the training. Below are planning and logistical factors that a trainer should consider:

➤ **Preparing for the training**

At least four weeks prior to that training:

- Send out invitations
- Get quotations on venue and accommodation, reserve venue etc
- Contact caterers and get quotations

2 weeks prior:

- Confirm participation of the facilitators and assign modules
- Print out reference guide and trainer's guide and send to each facilitator
- Prepare the course agenda and send to the facilitators
- If official opening is needed, identify and contact the guest of honor

A week prior:

- Confirm participants' attendance and prepare name tags if applicable
- Prepare participants' certificates
- Confirm venue, catering and accommodation
- Purchase stationary: notebooks, markers, flipcharts, pens, etc.
- Print out reference guide, participants handbook and all handouts
- Reserve equipment needed if applicable
- Confirm the guest of honor and send speaking notes
- Once again, confirm facilitator attendance
- Request finances for participants for per diem and transport

The day before the training:

- Pack all material and take them to the training venue
- Check all equipment to ensure they are working properly
- Check with the catering service and share the refreshment timeslots

- Hold facilitators' meeting (led by the course coordinator)to:
 - Confirm/finalize the course agenda
 - Go over any questions on content and methods
 - Discuss expectations and the importance of teamwork
 - At the end of the meeting, go as a team to the venue and prepare the room for the following day

➤ **During the training**

Room set up

- Set up the room in a U shape preferably
- Set up a facilitators' table and a table for handouts and supplies
- Place the following in front of each participants chair:
 - Participant's handbook and reference manual
 - Participant registration form if applicable
 - Course agenda/schedule
 - Folder
 - Pen
 - Pencil
 - Notebook
 - Name tag

Participants' registration

- As participants arrive, have them fill in the sign in sheet and give them a name tag
- Ask participants to fill out the registration form if applicable
- Collect the registration forms. Count the forms to match the number of participants. Track down all missing forms. Make sure that all information is complete on the registration forms. If not, get clarity from the participants before the course is over.

Course introduction

- During the course introduction, write participants' expectations on a flipchart and post it on a wall

- Solicit ground rules/norms from participants and write on a flip chart to be posted on the wall as well

Other tasks of the course coordinator and the training team

- Discuss housekeeping issues such as meal time, per diem, washroom/toilets, etc.
- Work out any issues regarding room assignment at the venue
- Distribute daily evaluation and course evaluation forms
- Facilitate debriefing meetings at the end of each day and prepare the review for the next day
- Introduce speakers, facilitate transitions, etc.
- Load slides for each speaker
- Problem solve if you need supplies, more handouts etc
- Work with venue management on special needs of participants (for example, special diet) and the facilitators (need for microphone, etc.)
- Keep things running on TIME. Alert people when to come back from breaks and round them up if necessary. Keep presentations on time by using limited time cards for example or designating a time keeper for each day.
- Make note of any questions that cannot be answered during the module, and prepare the answer with facilitators for the following day.
- Make note of any changes that will need to be made for subsequent trainings
- Training team to start writing the training report

Daily facilitator meeting

- Organize daily facilitator meetings to review the day: successes and challenges
- Review the daily evaluation and plan for the next day's review module
- Address problems in content and/or logistics
- Make any final preparation for the next day

➤ **After the training**

Evaluation

- Review the course evaluation and compile the quantitative and qualitative data to enter into the training report
- Incorporate the suggestions into the curriculum and into future trainings

Training data

- Prepare a table of training participants for the training report, using both the registration form and the sign-in sheet
- Enter the participant data into the training database if applicable using the registration form

Certificates

- If certificates are not handed out during the course, prepare and mail them to participants

Training report

- Compile the training report and share it with relevant stakeholders

Other

- Send thank you letter to facilitators and guest of honor
- Develop and implement a simple plan to follow up with participants after the training

Module 0: Welcome and course overview

Learning objectives: at the end of this module, participants will be able to recognize each other, form relationships within the group, explain the ground rules, and describe their expectations.

Module overview:

- Present training objectives
- Introduce participants and trainers
- Explore participants expectations
- Define ground rules
- Explain administrative procedures
- Designate daily reporters (optional)
- Present and discuss the agenda with participants
- Perform pre-test

Time: 2 hours

Proposed methodology: Interactive, questions/answers, presentations, wrap-up at the end by Facilitator

Suggested materials: Flipchart, markers, overhead projector, LCD projector

Procedures:

- **Presentation of the objectives**
 - Right after the opening module, the lead facilitator will present the training objectives to the trainees.
 - Ensure everyone understands what the training module is about from the objectives
 - Get their feedback before proceeding
- **Introduction of participants and facilitators**

In order to make this the most interactive possible, facilitators can ask everyone to come up front and stand in a circle. Then everyone can introduce themselves. But there is a specific way that everyone should introduce themselves. Everyone should introduce themselves with an adjective and your name (whatever you want to be called). But the adjective should begin with the same letter as your first name. For instance, if your name is Sally you could introduce yourself as Silly Sally. Or if your name is

Michael, you could be Mighty Michael. Do you understand? Before we start, each of you should concentrate and try to remember everyone's name. Let's start. "I'm"

- ✓ Then go around in the circle until everyone introduces themselves. This can be silly and fun.
- ✓ Ask for a volunteer to try and repeat everyone's name with the adjective.
- ✓ You can get several volunteers to try until someone can do it, if you have time.
- ✓ Then, the facilitator can continue by saying, now that we know everyone's name and an adjective to describe them, everyone should share a little bit more about ourselves.
- ✓ We will go around the room and everyone should say: (it might be helpful to put the items below on flipchart paper so that participants can refer to it)
 - Where you work
 - Your organization and position
 - Your experience in Palliative Care
 - You can add other topics or things to share with introductions if you wish. Such as, why you are here at this training or what your motivation is.
- **Expectations**
 - Ask participants to write down their 2 main expectations on a piece of paper that you distributed earlier.
 - Collect the piece of papers
 - Discuss the expectations with the trainees and identify those the training module will not be able to address. Then explain to the participants why the training module will not address them.
 - Hang the expectations on the wall.
- **Ground rules**

The lead facilitator can start by saying for example: "During this week and in the weeks to come we will be working together as a group. In order for us to make the best of this time it is useful for everyone to agree to some group rules". The purpose of these rules is to create an environment that is supportive, respectful, and safe in order for use to accomplish our goals or objectives for this course. Therefore, we are going to decide on our group rules in the following way:

- Anyone can suggest a group rule

- If others agree that this is a good rule then he/she should come up to the front and draw a symbol on the flipchart to represent that rule.
- Others should encourage that person and help them come up with an appropriate symbol that everyone can understand.
- The purpose is not to have beautiful drawings but to have clear symbols that everyone can remember.
- Post the agreed upon symbols on a flipchart and hang them somewhere in the room, where everyone can see it.
- Wrap-up before proceeding to the following topic.
- **Administrative procedures**
 - Explain all the administrative procedures to the participants with regard to: lodging, breakfast, lunch, dinner, per diems and other issues related to the training.
 - Tell participants to feel free to ask any questions if they need further clarifications.
- **Daily reports**
 - Tell participants that there will be volunteers every day for the daily report to be presented to the group the following day.
 - Emphasize it should be voluntarily and everyone should feel free to volunteer.
- **Present and discuss the training agenda**

After the ground rules are defined and daily reporters are identified:

 - Present and discuss the training agenda with participants to get their feedback
 - If any major suggestions are made in which the group agrees upon, then it is important for the facilitators to incorporate those changes to the agenda before proceeding
- **Conduct the pre-test**

If you want to conduct a pre-test before starting the training, then it is important to do the following:

 - Tell the trainees that the training module is going to start with a knowledge assessment and explain why.
 - Distribute the questionnaire, go over it with the group, and then answer the questions.

- Using the results of pre-test along with other information you gathered earlier from participants, will help you have a better sense of how to orient the module.
- It is also important that the facilitator explains to trainees that the pre-test is only an exercise to guide them on the course of the training module, not to eliminate nor discriminate against anyone.

THE PALLIATIVE CARE FRAMEWORK

Module 1: Concepts of palliative care

1.1 Learning objectives: at the end of this module, each participant will be able to:

- Define palliative care
- Explain the historical background of palliative care: Global, Regional, Rwanda
- Explain the rationale of palliative care
- Discuss the components and scope of Palliative care
- Describe the models of Palliative care
- Discuss the general principles of palliative care
- Explore the ethical and legal issues in palliative care
- Discuss gender and human sexuality in relation to Palliative care
- Demonstrate understanding of Interdisciplinary/multidisciplinary approach in palliative care

Module overview:

- Definition of PC
- Historical background of palliative care: global, regional, Rwanda
- Rational of palliative care
- Component and scope of PC
- Models of PC
- Interdisciplinary team in PC
- Ethical and legal issues in PC

Time: 1 hour 30 minutes

1.2 Proposed methodology:

Small group work; question /answer; power point presentation, flip chart, markers

Suggested materials:

Overhead projector, flipchart, markers, power points

1.3 Procedures:

The facilitator can introduce this module by saying “this module is an introduction to PC and will allow us to agree on the basic facts of PC before we proceed”. Then the facilitator can:

- Ask participants to form 3 small groups depending on the number for participants. However, there should be less than 10 people per small group. If you have more than 10 people per group, you can extend the number of small groups.
- Ask each group to select a lead and a reporter. For 30 minutes, each group will try answering the following questions and write their answers on a flip chart:
 - Discuss and propose a definition of PC
 - According to you, what is the historical background (global, regional and in Rwanda) and rationale of PC?
 - According to you, what should be the components and scope of PC as well as possible models of PC?
 - What should be the role of an interdisciplinary team in PC?
 - According to you, does the provision of PC imply ethical and legal issues? If your answer is yes, please identify some of those issues and explain why?
- At the end of the group work, the reporters will present their group answer at the plenary module. Then the group will answer clarification questions.
- Wrap up with a power point presentation.
- Answer additional questions before moving to the following module.

PROVISION OF PALLIATIVE CARE

Module 2: Principles of holistic assessment in palliative care

2.1 Learning objectives

At the end of this module, each participant will be able to:

- Explain principles of clinical assessment of patients with HIV, cancer and other life-threatening illnesses
- Explain principles of nutritional, psychosocial and spiritual assessment of a patient in palliative care

Module overview:

- Physical assessment
- Nutritional assessment
- Psychological care

Time: 45 minutes

2.2 Proposed methodology:

Question /answer; flip chart, markers, power point presentation

Suggested materials:

Overhead projector, flipchart, markers, power points

2.3 Procedures:

- The facilitator can start the module by asking if a participant would like to share an experience when they conducted a physical, nutritional or psychological assessment of an AIDS or cancer patient.
- Take note on the flip chart while participants speak
- Encourage correct responses and correct wrong ones
- Wrap up the module using the presentation you prepared in advance
- Answer last questions before moving to the next module.

Module 3: Pain and pain assessment

3.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe pain
- Describe the pathophysiology of pain
- Describe the types of pain and pain syndromes in HIV, cancer and other life threatening illness
- Describe pain assessment in HIV, cancer and life threatening illnesses

Module overview:

- Definition and physiology of pain
- Pathophysiology of pain and types of pain
- Impact of pain on the patient
- Assessment of pain

Time: 1 hour 30 minutes

3.2 Proposed methodology

Small group work, plenary presentations, Question /answer; flip chart, power point presentation

Suggested materials:

Overhead projector, flipchart, markers, power points

3.3 Procedures:

- Divide participants into 3 or 4 groups depending on the number of participants.
- Ask them to select a chair and a reporter, and work in small groups for 30 minutes.
- Ask 2 groups to discuss and write down the definition of pain, the pathophysiology of pain, and the different types of pain, and ask the other 2 groups to write down the steps of pain assessment and the impact of pain on patients.
- At the end of the 30 minutes, ask the reporters of each group to present findings of their respective groups during the plenary module.
- Get the large group to react on the presentations
- At the end of the discussions, wrap-up the module using the flipchart sheet previously prepared for this module.

- Summarize the discussion, answer participants' questions if any before moving to the next module.

Module 4: Management of pain

4.1 Learning objectives

At the end of this module, each participant will be able to:

- Define pain management principles
- Describe the WHO pain management ladder
- Describe treatment of pain with opioid and non-opioid analgesics
- Describe use of non pharmacological methods of pain management
- Describe the use of adjuvant or co-analgesics

Module overview:

- Pain management principles
- Non-pharmacological pain management
- WHO analgesic ladder
- Management of pain with analgesics
- management of pain with Opioids
- management of pain with adjuvant analgesics
- special consideration in HIV and AIDS

Time: 2 hours 30 minutes

4.2 Proposed methodology

Small group work, plenary presentations, Question /answer; flip chart, power point presentation, lecturette

Suggested materials: Overhead projector, flipchart, markers, power points, participants' handbook

4.3 Procedures:

- The facilitator conducting this module can introduce the module by asking participants “what is pain?” This will also help jog participants’ memory and see how much they remember from the module on the definition of pain.
- Then ask them what causes pain? And then how can pain be taken care of. The expected answer is “manage”. Ask them what the principles and approaches to pain management are.

- Write down the answers on the flipchart. Get participants to discuss the different answers on the flipchart for about 30 minutes.
- Based on what is written on the flipchart, ask them to form 3 to 4 small groups depending on the number of participants.
- Using a flip chart you have prepared in advance on your module overview, ask each group to identify a chair and a reporter. Then they'll discuss the 7 points on the flip chart, take notes. The group work will last 45 minutes at the end of which each group will present their findings at the plenary module.
- At the plenary, ask each group to present their findings in 8 minutes followed by a 7 minutes question/answer module.
- Asking volunteer participants to answer their peers' question is a great opportunity for experience sharing.
- At the end, summarize with the presentation you have already prepared.
- Answer any additional questions before wrapping up the module.

Module 5: Management of common symptoms in palliative care

5.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe the common symptoms in patients with HIV, cancer and any life threatening illnesses
- Assess common symptoms in patients with HIV, cancer and life threatening illnesses
- Manage the common symptoms in patients with life threatening illnesses

Module overview:

- Palliative care principles
- The impact of symptoms
- Assessment and management of symptoms
- Common symptoms and clinical problems

Time: all day

5.2 Proposed methodology

Given the length of this module, we are suggesting that facilitators use a combination of participatory techniques and methods to keep participants focus like case studies followed by practicums or role plays etc.

Suggested materials: flip chart, case study, film projection, markers, practicum guidance, and site visit logistic.

5.3 Procedures:

The facilitator leading this module can divide the module into 2 sub modules focusing on the principles of palliative care and symptoms and symptoms management.

➤ Palliative care principles

- ➔ The facilitator can introduce the module by asking participants, “What are the basic principles of palliative care?”
- ➔ Write the answers down on the flip chart and lead participants to discuss them.
- ➔ Wrap up discussion by highlighting the good answers and correcting the wrong ones.
- ➔ Answer any additional questions before transferring to the following sub module.

➤ **Symptoms and symptoms management**

- Using case study #.. in annex ..., ask participants to break into 3 to 4 small groups.
- Ask each group to identify a chair person and a reporter.
- Distribute the case study and give them 5 minutes to read the case study individually.
- Then review the case study with the whole group, and answer any clarification question.
- Each small group will:
 - Identify the symptoms
 - Assess and manage the symptoms
 - Write down their answers on the flip chart
 - Then share their work with the rest of the group

➤ **Reporting out at the plenary module**

- Each group's reporter will share their findings with the larger group
- The facilitator will lead this module and the questions/answer following each presentation.
- At the end of the module the facilitator will wrap up highlighting the good answers and correcting the wrong ones.
- Then answer last questions before introducing the afternoon module which will be held outside the training venue at the practicum² sites.

➤ **Post field visit discussions**

It is advised that facilitators organize a post field visit module during which participants will be encouraged to share their learning experience. This module can take place the same day in the evening if everyone is staying on the training site. In the case that participants are not staying on the same venue, this module can be organized the following day in the morning.

² The practicum should last the other half of the day. It is advised that facilitators introduce the afternoon session and all the details before lunch break as the group will be taking the field trip to the practicum site right after lunch.

Module 6: Rehabilitation in palliative care

6.1 Learning objectives

At the end of this module, each participant will be able to:

- Explain the meaning of rehabilitation
- Discuss the elements of rehabilitation
- Describe the use of physiotherapy in the care of chronic illness
- Describe the use of occupational therapy in the care of chronic illness
- Identify and describe the management of common nutritional problems in chronic illness

Module overview

- Nutrition
- Physiotherapy
- Occupational therapy
- Self care

Time: 2 hours 30 minutes

6.2 Proposed methodology

Question/answer, small group work, lecturette,

Suggested materials: flip chart, markers, overhead projector, participants handbook

6.3 Procedures

- The facilitator can start this module by asking participants, “What does rehabilitation in palliative care mean?”
- Write down the answers on a flip chart and lead participants to discuss them focusing the discussions more on the “why” and “how” as well as the components of rehabilitation in palliative care. The expected answers are: nutrition, physiotherapy, occupational therapy and self care.
- Then use the flip chart you have prepared in advance on the definition, the reason, the management and the component of rehabilitation to wrap up this discussion.
- Answer participants’ questions if any before continuing the module.

- Then ask participants to break up in 4 groups, and identify their chair person and reporter. Each group will be assigned a specific theme to work on. The group discussions will be led by the chairs, and reporters will take note and present the group's result at the plenary module at the end of the assigned time.
- Ask each group to: provide a definition of their theme, describe the key aspects, the role in palliative care, and its effect on a patient at different levels of the sickness. The small group work will last 30 to 45 minutes. Group 1 will work on Nutrition, Group 2 on physiotherapy, Group 3 on occupational therapy, and Group 4 on self care.
- At the end of the assigned time, reconvene the larger group in the plenary module and start the report out. Each group will have 15 minutes for presentation and questions.
- Wrap up the module by highlighting the correct answers and correcting the wrong ones.
- Answer any additional questions before proceeding to the next module.

Module 7: Palliative care emergencies and management

7.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe the general principal of palliative care emergencies
- Identify the types of palliative care emergencies
- Assess palliative care emergencies
- Describe the management of palliative care emergencies

Module overview

- Palliative care emergency principals
- Types of palliative care emergencies and principal of assessment
- Assessment and management of palliative care emergencies
- Special consideration in HIV and AIDS

Time: 3 hours

7.2 Proposed methodology

questions/answer, small group work, discussions, lecturette

Suggested materials: flip chart, markers, overhead projector, PowerPoint presentation

7.3 Procedures:

- The facilitator leading this module can introduce the module by explaining that knowing about common symptoms in palliative care means that there also are emergencies in palliative care.
- Ask participants to enumerate the palliative care emergencies they know. Write the answers on a flip chart and lead participants in a discussion to review them and agree on a list.
- Using a flip chart presentation you've prepared in advance, wrap up this discussion then answer any additional questions before proceeding to the next step.
- Once you've listed the emergencies, ask participants what they feel are the most important principles of palliative care emergencies.

- Write down the answers on the flip chart and lead participants to discuss those responses. Wrap up by encouraging the correct answers and correcting the wrong ones.
- Then ask participants to divide into 3 small groups. Each small group will work at assessing and describing the management of 3 palliative care emergencies. The group work will last 45 minutes. Each group should identify a chair and a reporter.
- At the end of the assigned time, reconvene the group in a plenary module where each group will report out in 15 minutes including questions/answers.
- Answer any additional questions then ask participants if they think the same principles, assessment and management apply to HIV and AIDS patients. Then lead them to discuss the special considerations in HIV and AIDS.
- List the answers on the flip chart. Wrap up the module using the PowerPoint or flip chart presentation you've prepared in advance. Wrap up the module and answer any additional questions before proceeding to the next module.

Module 8: End of life care

3.1 Learning objectives:

At the end of this module, each participant will be able to

- Describe end of life care
- Describe the management of patient at the end of life
- Discuss the recognition of death
- Describe immediate care after death

Module overview:

- Principles of end of life care
- Management of the dying
- Recognizing death
- After death/bereavement
- Special consideration in HIV and AIDS

Time: 2 hours 30 minutes

8.2 Suggested methodologies

Small group work, question/answer, discussions

Suggested materials: flip chart and markers

8.3 Procedures:

- Introduce the module by saying for example according to the definition of palliative care we saw earlier, the end of life and death is a normal process. If you agree with this assumption, what do you think the principles of end of life care should be?
- Write down the answers on the flip chart and lead participants in a discussion to agree on the principles.
- Wrap up these discussions, answer any questions; then divide participants into 4 small groups and ask each group to identify a chair and a reporter. The group work will last 45 minutes.
 - ✓ Group 1 will discuss and present on the steps when preparing to care for the dying-- for the care giver, the family and the patient.

- ✓ Group 2 will discuss and present on the management of the dying
 - ✓ Group 3 will discuss and report on the recognition of death
 - ✓ Group 4 will discuss and report on the after death management and the special considerations in HIV and AIDS
- At the end of the assigned time, reconvene in plenary and give each group 20 minutes of presentation and questions/answer.
- At the end of the presentations, lead a discussion module if need be before wrapping up the module by correcting any wrong answers and answering participants' questions.

Module 9: Psychosocial aspects of palliative care

9.1 Learning objectives

At the end of this module, each participant will be able to:

- Define psychosocial care
- Explain factors that lead to psychosocial problems
- Describe effects of psychosocial problems faced by patients with life-threatening illnesses
- Discuss signs and symptoms of psychosocial problems
- Describe various interventions applied to manage psychosocial problems

Module overview:

- a) Overview of aspects of psychosocial problems
- b) Factors contributing to psychosocial problems
- c) Psychosocial problems in patients with cancer or HIV/AIDS
- d) Management of psychosocial problems

Time: 3 hours

9.2 Suggested methodology

Small group work, discussions, questions/answers, role play

Suggested materials: flip chart, markers, providers manual

9.3 Procedures

- The facilitator will start this module with a group activity. Therefore, he/she will ask participants to break up into 4 groups and identify a chair and a reporter.
- Handout randomly 1 topic of the overview to each group.
- Handout to each group the guidance for their specific group on the piece of papers you have prepared in advance. Refer to annex 3.
- Each group will write down their answers on a flipchart.
- At the end of the group work, the reporter of each group will present the group work in a plenary module.
- Facilitate a discussion on the presentations.
- Wrap-up with your presentation and answer any questions.

- Divide participants in groups of three. In those groups, everyone will play at turn of role, the provider, the patient and the observer for 15 minutes.
- Then bring the group into the plenary module and ask for two volunteers to role play.
- Other participants should observe attentively and take notes.
- Get the group to react on the role play. Answer questions and move to the next module.

Homework assignment: Read Reference Manual, section 2.9: Therapeutic Communication in Relation to Palliative Care. This section includes information about communication concepts, process and skills that should be very familiar to you. Be prepared to discuss the communication principles that are particularly important in palliative care.

Module 10: Communication and counseling in the context of palliative care

10.1 Learning objectives

At the end of this module, each participant will be able to:

- Explain the concept of communication in relation to palliative care
- Describe the process of breaking bad news
- Discuss how to communicate with children

Module overview:

- e) Concepts and principles of communication and counseling
- f) Breaking bad news
- g) Communicating with children

Time: 1 hour 30 minutes

10.2 Suggested methodology

Small group work, discussions, questions/answers, role play

Suggested materials: flip chart, markers, providers manual

10.3 Procedures

1. Concepts and principles of communication and counseling in palliative care

- Introduce the module by saying that communication and counseling concepts and skills should be quite familiar to them from previous training and their own experience as health care providers.
- Refer participants to their homework reading assignment and lead them in a discussion on how the communication and counseling principles and techniques they read about can be applied in palliative care. What are particularly important communication and counseling principles to apply in palliative care?
- Write down the answers on the flip chart.
- Use the flip chart presentation you've already prepared to wrap up the discussions.
- Answer any additional questions before moving to the next subject.

2. Breaking bad news

- The facilitator can introduce this topic by asking participants what they think will be the steps for breaking bad news.
- Write down different answers, and lead participants to discuss those answers.
- Wrap up using your flipchart presentation.
- Answer any questions before moving to the next topic.

3. Communicating with children

- The facilitator can introduce this topic by asking participants what is the difference between communicating with children and communicating with adults.
- Write the answers on the flip chart.
- Lead the group into a discussion about those answers.
- Wrap up with your presentation.
- Answer any additional questions before moving to the next module.

Module 11: Spiritual and cultural aspects in palliative care

11.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe spiritual and cultural care
- Describe the common aspects of spiritual care
- Describe the different tasks of spiritual care
- Explain the fear of death
- Explain the impact of culture in palliative care

Module overview:

- h) Spiritual and cultural care
- i) Common aspects of spiritual care from major religions
- j) Tasks of spiritual care
- k) Fear of death
- l) The role of culture in palliative care
- m) Addressing cultural differences in communication

Time: 1 hour 30 minutes

11.2 Suggested methodology

Small group work, discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

11.3 Procedures:

- Given that participants are coming from different religious background and would not necessarily see things through the same lenses, the facilitator can start this module by making a presentation on “***spiritual and cultural care***” and the “***common aspects of spiritual care from major religions***”. The facilitator can use the information available in the reference manual and conduct additional research if need be to prepare the presentations.
- Launch and lead a discussion following the presentations. Allow participants to respond to their peers’ questions for experience sharing.
- The facilitators will then clarify the positions, answer any additional questions and move to the following exercise.

- Ask participants to break up into 3 groups, and identify a chair and a reporter.
- Handout the group work guidance to each group as follows:
 - Group 1: identifies the different tasks of spiritual care and their sequences as necessary
 - Group 2: will reflect on the fear of death in AIDS and cancer patients
 - Group 3: will highlight the role of culture in palliative care and cultural differences in communication.
- At the end of the time, reconvene the group in a plenary module where two volunteers from each group will present their findings in a role play for 7 minutes.
- Then get the other members of the same group to react before getting feedback from the larger group.
- Then facilitate a short discussion module, answer any additional questions before moving to the next module.

Module 12: Loss, grief and bereavement

12.1 Learning objectives

At the end of this module, each participant will be able to:

- Explain the meaning of loss in relation to palliative care
- Explain grief in relation to palliative care
- Explain the different types of grief
- Discuss bereavement in relation to palliative care
- Outline the grief process in general and in children
- Explain the different steps of addressing grief and bereavement

Module overview:

- n) Meaning of loss and grief in relation to palliative care
- o) Different types of grief
- p) Bereavement
- q) Grieving in adult and children
- r) Ways of addressing grief and bereavement

Time: 2 hours 30 minutes

12.2 Suggested methodology

Discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

12.3 Procedures

- The facilitator leading this module can introduce by guiding participants toward the module overview on the flip chart s/he has prepared in advance.
- Lead them in a 10-15 minutes discussion for each topic. The facilitator can either follow the sequence proposed in the reference manual as well as the information and conduct his/her own research when preparing for this module. However, his/her experience and expertise in the domain will be a great asset.
- Write down answers on a flip chart.
- Lead participants to discuss the answers on the flip chart for about 20 to 30 minutes.

- Then ask participants to take the reference manual and guide them through a lecturette module to read the entire module.
- Answer any questions, address comments before moving to the next module.

Module 13: Support for care givers

13.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe the issues that might affect care givers in palliative care
- Explain care givers' needs in palliative care
- Describe interventions to support care givers

Module overview:

- s) Overview of care givers' scope
- t) Issues affecting care givers
- u) Care givers' needs
- v) Interventions to support care givers

Time: 2 hours

13.2 Suggested methodology

Small group work, discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

13.3 Procedures:

- The facilitator leading this module can introduce the module by reading or have a volunteer read the paragraph untitled "overview of care givers' scope" in section 2.12 of the reference manual.
- Then s/he can proceed by asking open questions to participants encouraging them to share their experience as care givers both formal and informal activities.
- Following the experience sharing the facilitator can then prompt them on what they think are the major issues care givers might be facing as well as proposed interventions/solutions to address them.
- Write the answers on the flip chart.
- Then ask them what the signs of burnout are and how one can prevent burning out.
- At the end, have the group process the answers and conclude with a presentation or lecturette.
- Then answer any last questions before calling of the module.

Module 14: Human sexuality in the context of palliative care

14.1 Learning objectives

At the end of this module, each participant will be able to:

- Talk about sex, sexuality and sexual health
- Explore self-awareness on sexuality
- Discuss client's concerns in relation to sexual activities

Module overview:

- w) Overview on sex and sexuality
- x) Essentials of sexual counseling
- y) Preparing health professionals to address patients' sexual needs
- z) Coping mechanism

Time: 1 hour 30 minutes

14.2 Suggested methodology

Small group work, discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

14.3 Procedures

- The facilitator leading this module can introduce the module saying for example "given that sexuality perspectives are greatly influenced by cultures, it is important to address sexuality in the context of palliative care". Therefore, today we are going to explore how to address patients' sexual needs.
- Then guide participants to the flip chart presentation you prepared in advance on the overview on sex and sexuality.
- At the end of the presentation, allow 10 to 15 minutes discussions before asking participants to break up into 3 groups.
- Ask each group to identify a chair and a reporter. Then handout the theme and group work guidance you've prepared in advance to each group. This will be the 3 last points of the module overview.
- The group work will last 30 minutes
- At the end of the time, regroup everyone in a plenary module for the report out.

- Lead the discussions following the presentations.
- Wrap up with your presentation and answer any additional questions before moving to the next module.

Module 15: Complementary therapies in palliative care

15.1 Learning objectives

At the end of this module, each participant will be able to:

- Define complementary therapy
- Discuss different types of complementary therapies

Module overview:

aa) Definition of complementary therapy

bb) Complementary therapies

Time: 1 hour 30 minutes

15.2 Suggested methodology

Small group work, discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

15.3 Procedures

- The facilitator can introduce this module by asking participants “what is complementary therapy?”
- Write down the answers on the flip chart and have the group discuss them for about 15 minutes.
- Then ask them if there is a difference between complementary therapy, western medicine and traditional medicine.
- Write the answers on the flip chart. Then correct the wrong answers using the information in the reference guide and emphasize the correct answers.
- Then guide participants toward the flip chart presentation you’ve already prepared on complementary therapies.
- At the end of the presentation, get participants to react on the presentation.
- Answer their questions and lead them to discuss the role of complementary therapy in palliative care.
- Answer questions and wrap up the module

Module 16: Child health and pediatric palliative care

16.1 – Clinical aspects

16.1.1 Learning objectives

At the end of this module, each participant will be able to:

- Outline the developmental stages in children
- Describe the assessment and management of pain in children
- Describe HIV and AIDS management in children in the context of palliative care
- Describe management of cancer in children in the context of palliative care
- Describe how to apply palliative care in a critically ill child
- Describe prescriptions and dispensations for palliative care in children

Module overview:

- a) Clinical aspects of pediatric palliative care
- b) Developmental stages in children
- c) Assessment and management of pain in children in the context of palliative care
- d) HIV and AIDS management in children in the context of palliative care
- e) Management of cancer in children in the context of palliative care
- f) Common symptoms of critically ill children
- g) Palliative care in the critically ill child
- h) Prescribing and dispensing for palliative care in children
- i) Special considerations in HIV and AIDS

Time: 3 hours 30 minutes

16.1. 2 Suggested methodology

Small group work, discussions, questions/answers, lecturette

Suggested materials: flip chart, markers, reference manual

16.1.3 Procedures:

- The facilitator leading this module can divide the module into 3 sub modules focusing on the principles of palliative care in children in relation to developmental stages, symptoms and their management, and HIV and AIDS management in children in the context of palliative care.

Principles of palliative care in children in relation to the developmental stages

- The facilitator can introduce the module by asking participants, “What are the basic principles of palliative care in children?”
- Write the answers down on the flip chart and lead participants to discuss them.
- Ask them what the developmental stages in children are and write the answers on the flip chart.
- Then ask them if there is a relation between palliative care in children and the developmental stages in children.
- Guide the discussions and at the end have participants to identify some of those relations and how they work.
- Wrap up discussion by using the flip chart presentation you’ve already prepared by highlighting the good answers and correcting the wrong ones.
- Answer any additional questions before transferring to the following sub module.

Symptoms and symptoms management in children

- Ask participants to break into 3 to 4 small groups.
- Ask each group to identify a chair person and a reporter.
- Ask the groups to work on
- Then review the case study with the whole group, and answer any clarification question.
- Each small group will:
 - Identify the symptoms
 - Assess and manage the symptoms
 - Write down their answers on the flip chart
 - Then share their work with the rest of the group

HIV and AIDS management in children in the context of palliative care

- Ask participants to form 4 small groups.
- Ask each group to identify a chair person and a reporter.
- Then ask two groups to work on the management of HIV and AIDS in the context of palliative care and the other two groups will work on management of cancer in children in the context of palliative care.
- The small group work will last about 20 minutes.

- At the end of the time, have each group report out at the plenary module.
- Lead a questions/answers module following the last presentations for any last questions and clarifications.
- Then ask participants to take the reference guide and guide them through a lecturette of the module.
- Answer any additional questions before moving to the next activity.

16.2 Nutritional management in the critically sick child in palliative care

16.2.1 Learning objectives

At the end of this module, each participant will be able to:

- Describe the nutritional management of the critically sick child in palliative care
- Describe psychosocial challenges in pediatric palliative care

Module overview:

- cc) The importance of nutrition
- dd) Psychosocial challenges in pediatric palliative care
- ee) Communicating with children
- ff) Grief in children
- gg) Difference between children and adult's palliative care

Time: 2 hours

16.2. 2 Suggested methodology

Small group work, discussions, questions/answers, role play

Suggested materials: flip chart, markers, reference manual

16.2.3 Procedures:

- The facilitator can start the module by asking participants “why is nutrition important in the context of palliative care and especially for the critically ill child?”
- Write answers on the flip chart.
- Lead them to discuss the answers.
- Then guide them toward the flip chart presentation you've already prepared on the nutrition of children with cancer and HIV.
- Get participants to react after the presentation. Answer questions and clarify misconceptions on child nutrition.
- Ask two volunteers to do a role play on nutrition counseling for a child with cancer.

- Ask the rest of the group to observe and take notes.
- At the end of the role play, lead the group through a discussion on the strengths and areas for improvement of the role play.
- Answer any additional questions before moving to the next theme of the module.
- Ask participants to break into 4 small groups. Each group will identify a chair and reporter.
- Handout the activity guidance to the chair of each group. the groups will work as follow:
 - Group 1 will work on the communication process with children and their families in the context of palliative care
 - Group 2 will describe the communication process with children
 - Group 3 will work on the basic guidelines for care in children with grief, and
 - Group 4 will find out about the difference between children and adults' palliative care
- The activity will last for about 30 minutes.
- At the end of the activity regroup in a plenary module and have each small group report out for 10 minutes including question/answer.
- Wrap up this topic with your presentation on the psychosocial challenges in pediatric palliative care.
- Answer any additional questions before transitioning to the next module.

Important note to trainers: Children's understanding of illness, dying, and death changes with their developmental stages, and the health care worker's approach will therefore need to change at each developmental stage.

**SUPPORTIVE SUPERVISION AND MONITORING AND EVALUATION IN
PALLIATIVE CARE**

Module 17-18: Supportive supervision and monitoring and evaluation in palliative care

17.1 Learning objectives

At the end of this module, each participant will be able to:

- Define supportive supervision
- Describe the importance of supportive supervision
- Distinguish between monitoring and evaluation
- Describe the importance of monitoring and evaluation in palliative care programs
- Discuss types of monitoring and evaluation tools
- Describe the monitoring and evaluation process
- Discuss monitoring and evaluation challenges in palliative care programs
- Discuss the role of research in palliative care

Module overview:

hh) Supportive supervision

ii) Monitoring and evaluation

Time: 3 hours

17.2 Suggested methodology

Small group work, discussions, questions/answers

Suggested materials: flip chart, markers, reference manual

17.3 Procedures:

- As the title of the module indicates, this module will be divided into 2 sub modules; one will address supportive supervision in the context of palliative care and the other one monitoring and evaluation in the context of palliative care.
- The facilitator can start the module by asking participants to define supportive supervision.
- Write answers on the flip chart and lead participants to discuss them and come up with a definition that satisfied the group.
- Wrap up the discussions with the definition in the reference guide and correct any misunderstanding. Answer additional questions.

- Then ask participants to form 3 groups, identify a chair and reporter, and have each group work on the following:
 - What supportive supervision involves
 - Different types of supervision and their advantages and disadvantages
 - The role of the supervisor for each type of supervision
- The group work will last 30 minute at the end of which participants will regroup in plenary and present the results of the group activities.
- At the end of all presentations, allow 15 to 20 minutes questions/answers module and group discussions around the presentations.
- Wrap up by correcting any wrong information and emphasizing correct ones. Answer any additional questions before moving to the next topic of the module.
- Then guide the group's attention toward the flip chart you've already prepared for the monitoring and evaluation topic.
- Lead participants in a discussion to define monitoring and evaluation.
- Then discuss the role of monitoring and evaluation in the context of palliative care:
 - What should be monitored and how?
 - What can be evaluated mid-term and at the end of the project and how?
 - Which tool and approach can be used to monitor and evaluate palliative care activities?
- Write the answers on the flip chart.
- Lead the group to discuss them and wrap up using your flip chart presentation prepared in advance using the information in the reference guide.
- Answer any additional questions before moving to the next module.

Module 19: Forward planning

19.1 Learning objectives

At the end of this module, each participant will be able to:

- Develop an individual action plan for how they are going to apply the skills and knowledge learned in the workshop

Module overview:

- Developing an individual workplan

Time: 1 hour

19.2 Suggested methodology: small group work, discussions, questions/answers

Suggested materials: flip chart, markers, handouts of action planning chart

19.3 Procedures:

- The facilitator leading this module can start by reviewing the objectives of the training.
- H/S can say "Most people would agree that learning is valuable only if put to use. You may have learned a lot from this workshop, but there may be some skills that you need to practice more. Or there may be some actions you would like to take to improve your patients care."
- Explain that during this module participants will develop individual action plans for how you are going to apply the skills and knowledge learned in the workshop.
- Suggest that if you are participating in this workshop along with other members of your health facility team, you may wish to:
 - First discuss together the next steps for organizing and delivering palliative care services for your facility and community.
 - Then, develop your individual action plan
- Recommend to participants that they can use their workshop materials to identify their priorities for palliative care service delivery.
- Handout the individual action plan chart³ and explain the information they should write in each column.

³ Refer to annex For a copy of the individual action plan chart

- When participants are finished, make copies of the completed action plans and give the originals back to the participants. You can use copies of the completed action plans when you follow up the participants to review and support their progress on the activities.

Module 20: Post-course assessment

20.1 Learning objectives

At the end of this module, each participant will be able to:

- Complete a post-course assessment to determine their level of knowledge about the workshop content.

Module overview:

- Post-test

Time: 30 minutes

20.2 Suggested methodology

Questions/answers, individual work

Suggested materials: post-test handouts

20.3 Procedures:

- a) Distribute the post-course assessment and give participants 30 minutes to complete it.
- b) Collect the post-course assessment and ask an assistant to score them while you conduct the next module, or distribute answer keys for participants to score their own post-course assessments, or another participant's post-course assessment.
- c) Record the scores on the pre and post-assessment score sheet.

WORKSHOP CLOSEOUT

Module 21: Workshop wrap up, evaluation and closing

21.1 Learning objectives

At the end of this module, each participant will be able to:

- Compare participant expectations with workshop objectives
- Provide written evaluation of the workshop

Module overview:

- Workshop wrap up
- Workshop evaluation
- Closing module

Time: 45 minutes

21.2 Suggested methodology

Questions/answers, discussion

Suggested materials: workshop evaluation form

21.3 Procedures:

- Summarize the workshop highlights by reviewing the workshop objectives. Ask participants if they were met.
- Revisit the list of hopes and fears. Ask participants if their hopes for the workshop were fulfilled, and if most of their fears were put to rest.
- If appropriate, ask participants to look at the list of items under “Needs More Discussion” or “Parking Lot” to see if all items were covered or dealt with.
- Then distribute workshop evaluation forms. Collect completed workshop evaluation forms after about 15 minutes.
- Convene final workshop closing circle. Read the following and pass an object around to the left.

Dream little: Imagine that it is a year from now. You're at work, and you've just been informed that a high-level delegation will be visiting your workplace and community. They arrive, and much to your surprise, they visit your work unit. They talk to your co-workers and managers, asking them questions. Imagine what is the best, most positive thing you would want that delegation to say about your unit and your initiative in palliative care? Express it in one sentence

1. Facilitator is the last to speak. End by saying: "That's it, those are your dreams, go get them, make them happen".
2. Post the Pre and Post-assessment Scores sheet on the wall, so that participants can check their scores. If appropriate, return scored post-assessment after recording participants' scores

ANNEX

ANNEX 1: Guidance for the practicum site

Once on the practicum site, participants:

- a) Be divided in small groups of 2 to 3 maximum
- b) Each group will be mentored by a provider
- c) Participants will observe the provider with the 2 first patients followed by a discussion session each
- d) Then they will in turn of role talk with patients under close supervision of their mentor
- e) At the end of each session the mentor will provide constructive feedback

ANNEX 2: Case study module 5: Management of common symptoms in palliative care

ANNEX 3: Module 9 (handout) small group work guidance on psychosocial aspects of palliative care

a) Overview of aspects of psychosocial problems

The group will discuss and list potential psychosocial issues in relation to palliative care

b) Factors contributing to psychosocial problems

The group will identify factors contributing to psychosocial problems in relation to palliative care

c) Psychosocial problems in patients with cancer or HIV/AIDS

The group will identify psychosocial problems in cancer and HIV and AIDS patients

d) Management of psychosocial problems

The group will discuss approaches to managing psychosocial problems in palliative care

ANNEX 4: Training Report Format

(To be completed within 2 weeks of last day of training course.)

REPORT ON.....

Author of Report: _____ **Date:** _____

1. Background (1 paragraph)

Include where the workshop was conducted and the context (rationale for training, who initiated the training); comment on choice of participants – how were participants selected/invited?

“The Care & Treatment training workshop was the second to be held at the Southwestern Highlands ZTC and included participants from the CTCs in the Zone.”

If this is the first time the training is being held, if there is a significant change in the context, or if the training took place in a new training site, please describe. Examples:

“The workshop was the first training on PMTCT in X district. The district has not yet implemented PMTCT programmes...”

“The rapid test training was the first to be conducted in 2006. The course was designed to train health workers in rapid HIV testing. Participants were selected from health centers and clinics within 4 districts...”

2. Objectives (List the objectives for the workshop)

3. Training Methodology (optional, < ½ page)

Please include this section only if this was a pilot workshop or if there were new methods or changes in methods used during this training. Include description of the workshop materials, and the tools and methods used in the workshop; for example, *“Training methods included PowerPoint lectures, case studies, role plays, and small group work. Course materials consisted of a Facilitator’s Guide, Participant Handbook, and Resource Guide...”*

4. Facilitators

Who facilitated the workshop? How were the facilitators chosen, their qualifications, and any preparation.

5. Evaluation

A. Methods used (1 paragraph)

Describe the evaluation methods used during the workshop. *For example, "Daily de-briefing modules were held to discuss what worked well, challenges, and issues to address the following day. Daily evaluations and a final evaluation were completed by participants. A pre-test was administered on the first day of the workshop, and a post-test on the final day. Participants were allowed 30 minutes to complete the test in both instances. "*

B. Summary of Findings

i. Pre/Post Knowledge Assessment Results: Summarize the results of the pre/post knowledge assessment. Did the scores increase? By what percentage?

Participant Qualification	Pre-Test Score (% correct)	Post-test Score (% correct)	Change
Average Score			

ii. Training Content and Methodology

- What worked well and what did not work well in terms of training content and methodology? (summarize data obtained from daily and final evaluation forms, observation, daily trainer debriefings). If something worked well, is it a new practice that should be included in all training? If something did not work, how was it addressed during the workshop?
- If you used the comments from the daily evaluation form to make changes or adjustments during the workshop, please describe.
- Other key issues revealed in the course evaluation results.
- Include notable or informative participant comments (positive and negative)

iii. Other Course Evaluation Results

Include summary tables of relevant course evaluation components if you feel they provide useful or different information (see examples).

Participant self-assessment of preparedness to apply skills, knowledge acquired in the workshop:

Participants' assessment of preparedness	Number of Participants
Well prepared	
Somewhat prepared	
Not at all prepared	

Reasons participants gave for NOT feeling prepared to perform job tasks related to [insert workshop topic]:

Reason	Number of Times Given

Participant comments regarding redesign of course: what would they change?

Suggestion for Change	Number of Times Given

6. Best Practices/Success Stories

Please describe innovations, activities, approaches that reflect best practices and that you would like to see replicated at future workshops. This section could also include examples, stories, anecdotes shared by either participants or trainers that were especially helpful and could be incorporated into future revisions of the curriculum.

7. Lessons Learned/Challenges

Summarize lessons learned and challenges faced during the workshop, how these were addressed during the workshop.

Attachments:

1. Time Table
2. List of Trainers
3. Participant List (see example below)

Code	Name	Title	Health Facility	Region	Contact Number

8. Recommendations and Way Forward

Summarize recommendations for how to prevent these challenges in the future. Describe the steps that will be taken towards a way forward.

ANNEX 5: Post Test Result

ANNEX 6: Action Plan For Applying Skills in the Provision of Palliative Care

Use this form to: develop your action plan on how you will apply the new skills

- plan how you will continue to improve your knowledge and skills in palliative care
- share what you have learned with others at your worksite
- improve the quality of palliative care services for clients in your community

1. My name: _____

2. Name of health centre:

3. District:

4. Date I completed this form:

Activities and steps	Person(s) responsible	Resources and assistance needed	Time period (from _____ to _____)