# What competency frameworks are available to promote a consistent education framework for palliative and end of life care workforce in Wales? A Rapid Evidence Review

August 2022

## Evidence Implications:

**Clinical:**

The frameworks identified may provide adequate coverage of subjects and competencies to inform a Wales-wide multidisciplinary competency framework for adult specialist palliative care workforce.

**Policy:**

Will contribute to providing a standardised training framework for organisations to implement, regulate and continuously evaluate.

**Glossary:**

**EAPC**—European Association for Palliative Care

**EOLB**—End of life Board

**HEE**—Health Education England

**PEOLC**—Palliative and End of Life Care

## Context

Provision of palliative and end of life care (PEOLC) education is a crucial core component of providing an effective, multidisciplinary workforce. Education frameworks identify specific learning needs, promote consistent, inclusive, and flexible approaches to education, address discipline-specific standards and support learning and development at individual, service, and organisational levels. For education programmes to be effective, training needs to be consistent and available. Currently, England, Scotland and Ireland have a country-specific standardised competency framework for the education of the palliative care workforce. However, Wales does not have a PEOLC education framework. Also, a recent service evaluation in the Cardiff and Vale University Health Board (C&V UHB) has identified areas of inequity regarding standardised PEOLC education.

The End-of-Life Board (EOLB) in Wales has prioritised the need for an all-Wales strategy to PEOLC education and to identify whether an already established competency frame-work may work, or whether a Wales-specific framework may be required. The EOLB changed its name in July 2022 to the National Programme Board for Palliative and End of Life Care (NPBPEOLC). However, the priorities still stand. This rapid review will aim to identify any established PEOLC education frameworks from the published literature and map the core domains and competencies included within them. The findings will then be used by the C&V UHB and the NPBPEOLC to inform a Wales specific PEOLC education core competency framework.

## Key findings

Database and supplementary searches generated 152 records in total. After removing duplicates and irrelevant records, 84 articles were screened for eligibility. Figure 1 shows the flow of information through the review. We assessed 18 full text articles for the inclusion of a competency framework for end-of-life care education, but 10 of these were excluded due to not containing enough detail about competencies within their framework. A mapping exercise was carried out, whereby competencies from frame-works in the included articles were mapped to the European Association for Palliative Care (EAPC) Ten Core Competencies (Table 1). These competencies were derived from a consensus process and are detailed in 'Core competencies in palliative care: an EAPC White Paper on palliative care education – part 1' and 'Core competencies in palliative care: an EAPC White Paper on palliative care education – part 2'. These were chosen as the mapping base due to the topics covered, and they aim to complement skills and attitudes that healthcare professionals have already attained through clinical practice. Any gaps identified within the other frameworks and not covered by the EAPC are re-ported. Two reviewers cross checked and discussed competencies extracted and mapped these across the framework. The full mapping is available as a supplementary document upon request.

Eight frameworks were included. Two were based in the UK (Scotland and England), 3 in the USA, 2 in Canada and 1 in Ireland. Six frameworks were aimed at multidisciplinary palliative care teams, 1 at multidisciplinary care teams in nursing homes and 1 at com-munity volunteer navigators. Five frameworks covered all aspects of care, whereas 2 frameworks focused specifically on communication skills and topics at different stages of care.

Two multidisciplinary, comprehensive frameworks covered all ten EAPC domains across their competencies—Health Education England (2017) and Connolly—Palliative Care Competence Framework (2014). Two multidisciplinary, comprehensive frameworks covered all ten EAPC domains across their competencies—Health Education England (2017) and Connolly—Palliative Care Competence Framework (2014).

Table 1—The EAPC Ten Core Competencies in Palliative Care

| No. | Competency |
|---|---|
| 1. | Apply the core constituents of palliative care in the setting where patients and families are based |
| 2. | Enhance physical comfort throughout patients' disease trajectories |
| 3. | Meet patients' psychological needs |
| 4. | Meet patients' social needs |
| 5. | Meet patients' spiritual needs |
| 6. | Respond to the needs of family carers in relation to short-, medium- and long-term patient care goals |
| 7. | Respond to the challenges of clinical and ethical decision-making in palliative care |
| 8. | Practise comprehensive care co-ordination and interdisciplinary teamwork across all settings where palliative care is offered |
| 9. | Develop interpersonal and communication skills appropriate to palliative care |
| 10. | Practise self-awareness and undergo continuing professional development |

**Definition of competency:** We defined a competency as 'a cluster of related knowledge, skills and attitudes that affects a major part of one's job (a role or responsibility), that correlates with performance on the job, that can be measured against well-accepted standards, and that can be improved via training and development' (Parry, S. B. (1996).

## Relevance of evidence

Some of the studies were carried out in the USA, where the health care system is not necessarily comparable to the UK and therefore, have limited generalisability to Wales. However, the main principles behind palliative and end of life care do remain consistent between countries and therefore, will still be useful to consider, when designing a competency framework.

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## Review Methods

**Search Strategy:** A search was conducted across a wide-ranging set of databases: Ovid Medline, including In-Process & Other Non-Indexed Citations, HMIC, Scopus and Social Policy and Practice. The preliminary search strategy was developed on Ovid Medline using both text words and medical subject headings and restricted to English language humans. The search strategy was modified to capture indexing systems of the oth-er data-bases. (Search strategies available upon re-quest). The databases were searched from January 2012- 6 April 2022.

Reference lists of systematic reviews were checked for relevant studies. Overall, the searches generated 84 citations after remov-ing duplicates and irrelevant records. Figure 1 represents the flow of information through the different phases of the review.

**Inclusion**: Any competency or capability frameworks for adult palliative and/or end of life care. Healthcare systems similar to the UK.

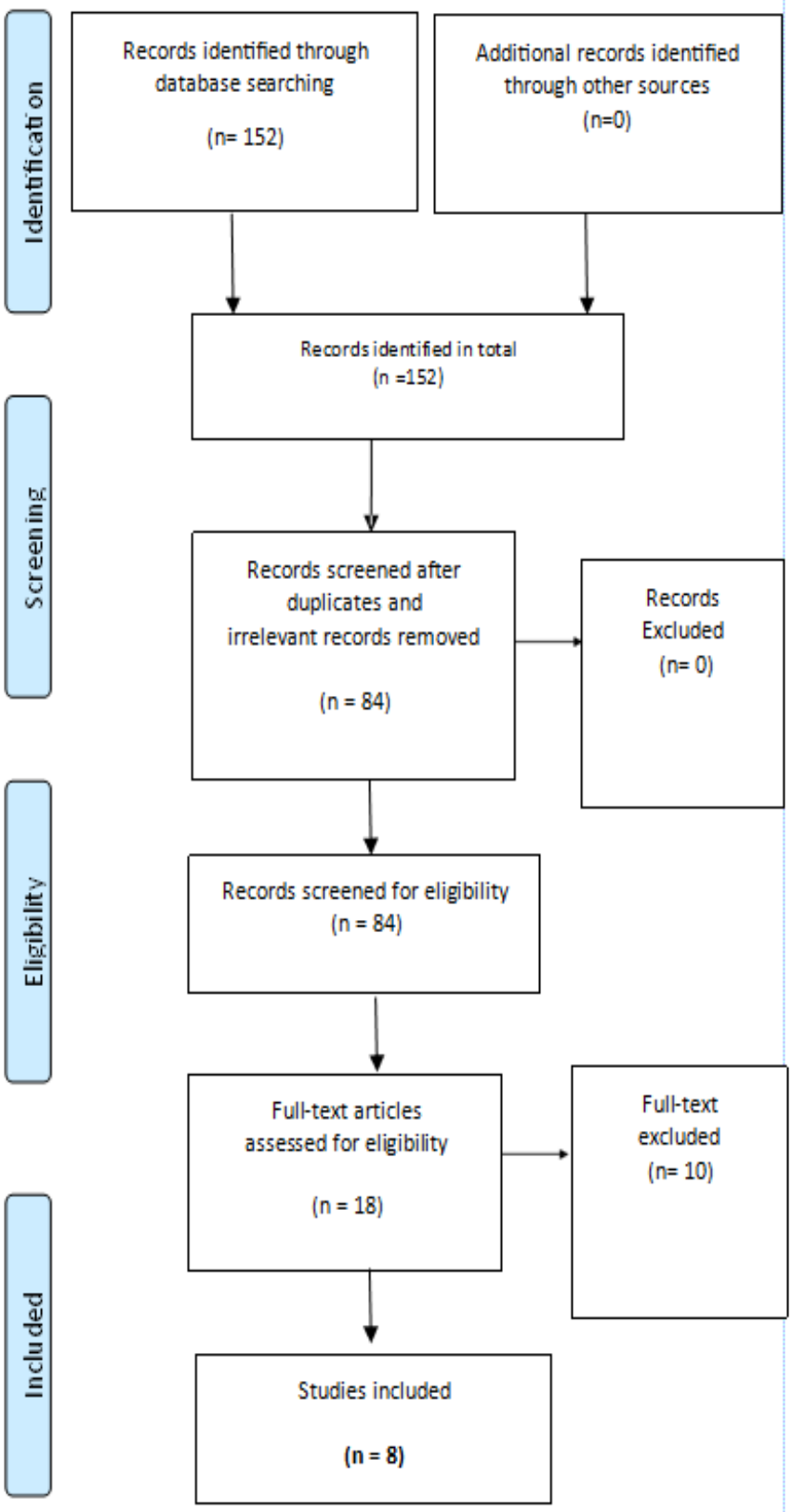
**Exclusion:** Any competency or capability frameworks for paediatric palliative care. Competency frameworks with no defined curriculum.

**Study selection/Quality Assessment/Data Extraction:** Study selection was based upon review of the abstract by two independent reviewers. The full text was then assessed independently using a pre-designed eligibility form according to inclusion criteria. Data extraction was carried out by one reviewer and checked by another using a pre-specified data extraction form.

Quality assessment was not undertaken due to the type of the topic and research ques-tion.

Any discrepancies between the two reviewers were resolved by consensus or by recourse to a third reviewer.

## Figure 1—Flow Diagram:



## Table 2: Characteristics of Included Studies

| Framework: Author/ Organisation (Year) and Country | Generalist/ Specialist | Skill-specific / multi-skilled | Were the competencies defined in detail? | Were the competencies grouped into domains? | Was the framework linked to a curriclum? | EAPC White paper domains covered |
|---|---|---|---|---|---|---|
| **Carpenter (2021) - USA** | Specialist - Nursing home based geriatric nurse practitioners | Multiskilled | Yes | Yes (grouped into NPC domains) | Yes | 1,2,3,5,8,9,10 |
| **Connolly (2014) Republic of Ireland** | Generalist and specialist (broken down into competencies for each specialism in detail) | Multiskilled | Yes | Yes | No - guidance for what a curriculum should cover | 1-10 |
| **Duggleby (2018) Canada** | Generalist | Multiskilled | Yes | Yes (grouped into module domains) | Yes | 1,6,8,10 |
| **Ferrell (2019) USA** | Generalist (interdisciplinary) | Skill-specific - communica- | Yes | Yes (grouped into NCP domains) | Yes | 1,2,5,6,8,9,10 |
| **Health Education England (2017)** ** England** | Generalist (split into 3 tiers of increasing skill level) | Multiskilled | Yes | Yes (into 14 main Subjects) | No - guidance for what a curriculum should | 1-10 |
| **McCallum (2018) Canada** | Generalist (interdisciplinary) | Multiskilled | Yes | Yes | No | 1,3,4,5,7,8,9,10 |
| **NHS Education for Scotland (2017)* Scotland** | Generalist (split into 4 levels of increasing skill level) | Multiskilled | Yes | Yes (into 5 main domains) | No - guidance for what a curriculum should | 1,3,4,5,6,7,8,9,10 |
| **Wittenberg (2014) - USA** | Generalist | Skill-specific - communication. | No | Yes | Yes but very broad | 9 |

*NHS Education for Scotland competencies mapped for the 'informed' level, defined as: "Informed level outlines the knowledge and skills required by all health and social service workers in relation to palliative and end of life care"

**Health Education England competencies mapped for 'Tier 2' defined as: "Health and social care professionals who require some knowledge of how to provide person-centred, high-quality end-of-life care as they often encounter individuals who need such support within their working environment"

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**References included in this review:**


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**Additional References:**


European Association for Palliative Care (EAPC). 2013. Core competencies in palliative care: an EAPC White Paper on palliative care education – part 1. European Journal of Palliative Care 20(2):86-91.

European Association for Palliative Care (EAPC) 2013. Core competencies in palliative care: An EAPC white paper on palliative care education - Part 2. European Journal of Palliative Care 20(3):140-145.

Parry, S. B. (1996). The quest for competences: Competency studies can help you make HR decision, but the results are only as good as the study. Training, 33, 48-56.


**Additional materials available upon request:**

· Mapping of competency frameworks to EAPC white paper domains
· Data extraction forms
· Search strategies


**This report should be cited as follows:** Palliative Care Evidence Review Service. What competency frameworks are available to promote a consistent education framework for palliative and end of life care workforce in Wales? A Rapid Evidence Map. Cardiff: Palliative Care Evidence Review Service (PaCERS); 2022 August

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