Flagship project funded by the Ministry of Education and Culture: Multidisciplinary and working life-oriented development of palliative nursing and medical education - EduPal 2018-2021

Competence in palliative care and end-of-life care in nursing degree



The expert group:

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The partners that implemented the project:

Kajaani University of Applied Sciences, Centria University of Applied Sciences, Diaconia University of Applied Sciences, JAMK University of Applied Sciences, Karelia University of Applied Sciences, LAB University of Applied Sciences, Lapland University of Applied Sciences, Laurea University of Applied Sciences, Metropolia University of Applied Sciences, Novia University of Applied Sciences, Oulu University of Applied Sciences, Savonia University of Applied Sciences, Tampere University of Applied Sciences, Turku University of Applied Sciences, Vaasa University of Applied Sciences, Tampere University, Faculty of Medicine and Health Technology, Licentiate Degree Programme in Medicine, University of Helsinki, Faculty of Medicine, Licentiate Degree Programme in Medicine, University of Oulu, Faculty of Medicine, Licentiate Degree Programme in Medicine and Master Degree Programme in Nursing, University of Turku, Faculty of Medicine, Degree Programme in Medicine, University of Eastern Finland, Faculty of Health Sciences, School of Medicine, Degree Programme in Medicine



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1. Multidisciplinary and working life-oriented development of palliative nursing and medical education – EduPal project

Multidisciplinary and working life-oriented development of palliative nursing and medical education – EduPal project is a flagship project for the development of higher education funded by the Ministry of Education and Culture (MEC). The project includes 15 universities of applied sciences that provides nursing education and the faculties of medicine of five universities, as well as one research unit in nursing science and health management. The aim of the project is to determine the current state of palliative care education in Finland and to draw up a nationwide recommendation for the implementation of the main contents of palliative care in the teaching of nursing degrees in universities of applied sciences. In addition to developing nursing education, the project will also develop medical education. ¹

The current state of palliative nursing education was studied by analysing the curricula for nursing education. In addition, the views of graduating nursing students of palliative care education and its development needs have been mapped. Views on nurses' palliative care and hospice competence have also been surveyed from organisations, unions, associations and patients and relatives. In collaboration with working life experts, a competence description of palliative care has been prepared, which describes what every nurse should know about palliative care and end-of-life care.

This national curriculum recommendation for palliative nursing has been developed by the multidisciplinary expert group of the EduPal project. The curriculum recommendation is based on surveys made in the project as well as on a recommendation from the European Palliative Care Association (EAPC)². In addition to the expert group, nursing students have been involved in drafting the recommendation. The members of the project consortium and representatives of the project stakeholders have been asked for their views on the curriculum recommendation. Annex 1 contains the parties that provided feedback during the feedback round.

2. Background to the development of the nurse curriculum recommendation

Palliative care is an active holistic approach to care for a patient with an incurable or life-threatening illness and the patient's loved ones. The main goals are to alleviate and prevent physical, psychological, social and existential suffering. In addition, the aim is to improve the quality of life of the patient and their relatives by identifying and treating symptoms and providing comprehensive support in a multi-professional manner³. Palliative care is not limited in time and can last for years. Nor is it limited to any particular stage of the disease; rather the importance and need for palliative care increases as chronic diseases progress and death approaches. End-of-life care is part of palliative care and is timed to the last weeks or days of a person's life^{4,5}.

According to the European Parliament's motion for a resolution, palliative care is a human right and must be available to all those who need it⁶. The WHO estimates that the need for palliative care is highest in Europe in relation to the population and will increase sharply as the population ages and chronic diseases increase⁷. In Finland, it is estimated that about 30,000 people require palliative care in the later stages of life, and an even larger number need it earlier in the disease⁴.

Patients from several different disease groups need palliative care. Cancer patients account for about 34% and others for 66% (for example, advanced heart, lung, kidney and liver disease, as well as neurological and memory diseases)³. A significant part of healthcare costs is spent on treating the last months of patients' lives⁴. Timely delivered and high-quality palliative care enables better care for patients and support for their loved ones, while reducing healthcare costs^{8,9}.

The 2017 recommendation of the Ministry of Social Affairs and Health (MSAH) states that the competence of palliative care should be part of the basic competence for all social and health care professionals⁴. The expert working group that drafted the MSAH recommendation proposes that guidelines should be drawn up for the teaching of palliative care and end-of-life care in basic, advanced and special levels of education in nursing schools. The need for training and strengthening competence is also highlighted in MSAH's 2019 report, according to which the competence deficit is a significant challenge for the organisation of palliative care in Finland¹⁰. MSAH's 2012 report states that the nurse's competence is affected by changes in the population's service needs and legislation, new research data, the development of the service structure

and social and health policy programmes¹¹. The MSAH recommendation (2019b) emphasises that educational organisations should ensure basic competences in palliative care and end-of-life care for healthcare professionals in their curriculum.

Palliative care education has been found to have development needs internationally ¹³⁻¹⁵. Finland's position in international comparisons of palliative care implementation is reduced by, among other things, the lack of systematic education⁷. According to the 2019 EAPC Atlas, only two universities of applied sciences in Finland have their own course in palliative care ¹⁶.

Palliative care is a core competency in nursing, with nurses meeting patients in palliative care and end-of-life care in a variety of different care settings at different stages of care. According to the recommendations for palliative care, education in palliative care should be included in the education of all health care professionals^{6,17}. This curriculum recommendation for palliative care can be used to promote systematic implementation of palliative care and end-of-life care education in Finland.

3. The process of developing the Curriculum Recommendation

A recommendation has been made by the EAPC for the teaching of palliative care for nurses in 2004². That recommendation defines the content, training methods and assessment of training. The EAPC Recommendation does not provide indicative amounts for the implementation of teaching. The recommendation has been taken into account in the development of this Curriculum Recommendation in terms of content, education methods and evaluation.

The EduPal project's working life surveys (222 participants in multi-professional working groups and a survey including 122 specialist nurses) have created a description of nurses' palliative care competences in order to ensure that the curriculum recommendation is up to date and takes national needs into account. In addition, a survey was used to determine the views of graduating student nurses (1331 students) on palliative care education. Based on these surveys and earlier recommendations the Curriculum Recommendation has been developed.

The first draft of the Curriculum was prepared in a multi-professional manner and three student members participated in the working group as commentators. In addition, key stakeholders, student nurses, universities of applied sciences and universities were consulted on the draft. The draft of the Curriculum Recommendation received 30 comments, which were taken into account in finalising the Curriculum Recommendation.

4. Objective of the Curriculum Recommendation

The aim of the national palliative care curriculum recommendation is to harmonise the competence of palliative care for Finnish nurses who have completed a degree in nursing. This requires learning key knowledge and skills, as well as attitudes and ethics in palliative care. The detailed objectives of the Curriculum Recommendation are presented in Tables 2-8.

5. Teaching methods in palliative care education

The teaching of palliative nursing emphasises active methods, the relevance of learning and the use of practical examples². This Curriculum Recommendation presents, by way of example, proposals for teaching methods in different subject areas.

In the teaching of palliative nursing, the Curriculum Recommendation includes contact teaching to meet the wishes expressed by the students in the preliminary studies of the project. Students felt the need for face-to-face teaching and discussion with the teacher, due to the sensitivity of palliative care and end-of-life care, and to address the emotions evoked by the topic. In addition to contact teaching, the Curriculum Recommendation takes into account the content that is suitable for studying online.

According to the EAPC recommendations^{2,18}, the teaching of palliative care should be partly multi-professional, as multi-professional activities and teamwork are central to the implementation of care. In addition to nursing education, teaching should also be provided in collaboration with palliative care physicians, social workers, hospital caregivers and other appropriate professional groups. It is recommended that the education could be carried out in part together with students from another professional group. The EduPal project pilots multi-professional teaching and training in palliative care.

6. Content of the Curriculum Recommendation

The content of the curriculum recommendation is based on the EAPC Recommendation², the EduPal project studies, stakeholder opinions and the views of a multi-professional expert working group. The content of the Curriculum is divided into three levels according to its importance, as follows (Tables 2-8):

- 1 = Core content (should be well mastered): Knowledge and skills that the student masters, knows well and applies in practice (mastering and application).
- 2 = Important content (must be understood): Knowledge and skills that the student knows and understands (understanding).
- 3 = Content to be mentioned (good to know): knowledge and skills that are beneficial for the student to know (knowing).

Some of the teaching content in this Recommendation can be integrated into courses in other subjects in collaboration with the teacher responsible for teaching palliative care. It is recommended that, in addition to integrated content, universities of applied sciences should provide students with a study module that consolidates palliative care during their studies. The consolidating module should be placed in the middle or final stage of studies. The aim of the consolidating study module is to provide the student with an overall picture of palliative care and end-of-life care.

The Curriculum Recommendation is divided into contents suitable for integration into the teaching of other studies (I), content taught in the study unit summarising palliative care (P) and content that can be implemented either in an integrated or summarising palliative care unit (P/I) (Tables 2-8).

The content of the Curriculum must be vertically integrated into a nursing degree to ensure competence. In accordance with the principle of vertical integration, the key content is repeated during the studies, which enables cumulative learning. Most of the teaching and the summarising teaching should be placed in the middle and final stage of studies, when students have experience in relation to the topic. The basics of palliative care and the treatment of key symptoms should be taught at an early stage of study so that the student has the ability to meet patients in a palliative care or end-of-life care setting in clinical practice.

- Tables 2-8 describe the vertical integration as follows:
 - \circ E = Early stage studies
 - \circ M = Middle stage studies
 - \circ F = Final stage studies

Tables 1-8 show the minimum time required to review the content, which should be made possible for learning the issues. In the Recommendation, the minimum teaching time is 54 hours, i.e., 2 credits. This should enable all students to study palliative nursing, though it would be advisable to have more teaching. The specified minimum time is the time during which the main content of the Recommendation can be studied, and the student can achieve a basic knowledge of the topic.

The scope of teaching is presented in total number of hours by subject area. The teaching is divided into contact lessons and other studies, such as self-study or group work (Table 1). The total numbers of hours by subject area are shown in Table 1. The detailed study contents of the different subject areas with the number of hours are presented in Tables 2-8. With the principle of vertical integration, key issues, such as the definition of palliative care and several pieces of content related to symptomatic care, are reinforced and elaborated on in the context of several study modules. More detailed content of the topics and examples of different teaching methods that can be utilised are presented in Tables 2-8.

Table 1. Amount of teaching of palliative nursing by subject area in the degree of nurse.

Subject	Contact teaching (h)	Other studies (h)	Total (h)
Basics of palliative care	4 h	3 h	7 h
Pain and symptom care in palliative care	7 h	8 h	15 h
Comprehensive support for the patient and their loved ones	6 h	4 h	10 h
Interaction and encounter	5 h	4 h	9 h
End-of-life care	4 h	3 h	7 h
Ethics and law	1 h	1 h	2 h
Multi-professional teamwork and self- reflection	2 h	2 h	4 h
Total (hours)	29	25	54 h

Table 2. Basics of palliative care

Topic	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
Definition of palliative care and end- of-life care	1	E/M/F	The student is able to define the concepts of palliative care and apply them in their work	P/I	Seminar/ teaching discussion Application of concepts	1 h	Pre-assignment Electronic material Virtual patient examples	1 h
			The student is able to define the holistic nature of care and quality of life.	P	using patient examples			
			The student understands the concept of suffering.	P				
Care policy and	2	M/F	The student is able to define goals of care, advanced directives and advanced care planning for the end of life as a concept and to understand the significance of these in the implementation of care		Lecture	1 h	Pre-assignment/advance material	1 h
advanced directives and care plan for the end of life					Teaching discussion Questioning or conver- sational teaching		Electronic material	
					Patient examples			0.51
Identifying the need for palliative care	2	M/F	The student understands the need for palliative care and identifies key patient groups. The student identifies the need for individual palliative care and support for the patient and their loved one.	Р	Collaborative learning Teaching discussion Questioning teaching Patient examples/simulation	1 h	Electronic material Virtual patient examples	0.5 h
Organization of palliative care in Finland - Service and care chains, ages of care	3	M/F	The student is familiar with the levels and service system of palliative care and consultation pathways.	P/I	Teaching discussion Lecture Questioning teaching	1 h	Concept map Electronic material/lecture recordings	0.5 h

Importance: I = Core content; 2 = Important content; 3 = Content to be mentioned. Stage of studies: E = Early stage, M = Middle stage, F = Final stage P = Summarising teaching of palliative care; I = Teaching that can be integrated; P/I = P art of the teaching can be integrated

Table 3. Pain and symptomatic treatment in palliative care

Торіс	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
Total pain - the concept of total pain	1	M	The student is able to define the concept of Total pain.	Р	Seminar Teaching discussion Problem Based Learning Simulation	1 h	Pre-assignment Reflective writing task Electronic material	0.5 h
Pain assessment and measurement	1	E/M/F	The student is able to systematically identify, evaluate, and document the need for and effectiveness of pain management. The student is able to use pain management indicators.	P/I I	Seminar Lecture Problem Based Learning Simulation	1 h	Pre-assignment Concept map Electronic material	0.5 h
Medication for pain - Opioids - NSAID, paracetamol - Medicines for neuropathic pain	1 2 3	M	The student is familiar with the principles and forms of administration of pain medication in palliative care. The student understands the importance of opioid medication in palliative care.	P P	Seminar Lecture Problem Based Learning Simulation	1 h	Pre-assignment Video lectures Electronic material	1 h
Drug-free treatment of pain	1	E/M/F	The student is able to utilize drug-free pain management methods	P/I	Seminar Lecture Questioning teaching Problem Based Learning Simulation	0.5 h	Pre-assignment Lecture recordings Concept map Electronic material	0.5 h
Pain in patient groups and types of pain: - Gerontological patients	1	E/M/F	The student understands the effects of aging changes and cognitive functioning on the manifestation of pain.	P/I	Seminar Teaching discussion Lecture	1 h	Pre-assignment Concept map Lecture recordings Electronic material	1h

pa - Ot	ancer atients ther patients ain types	2 3 3		The student is able to implement the treatment of cancer pain in a patient in palliative care. The student knows the definitions of non-malignant pain and different types	I	Problem Based Learning Simulation			
bre - Re	ymptoms nortness of eath espiratory ccretions	1 2	M/F	of pain. The student is able to identify the need for treatment related to dyspnea and to implement treatment with the help of opioids and drug-free methods. The student is able to support the patient and their loved ones in the changes in breathing at the end of life.	P/I P	Seminar Lecture Problem Based Learning Teaching discussion	0.5 h	Pre-assignment Concept map Lecture recordings	1.5 h
- Co - Na	ral symptoms onstipation ausea and omiting norexia	1 1 2 2	M/F	The student is able to implement enhanced oral care. The student recognizes and is able to care gastrointestinal symptoms.	P/I P/I	Seminar Lecture Questioning teaching Problem Based Learning	0.5 h	Electronic materials Concept map	1.5 h
General sympto - Fa - Cl th		1 3	M/F	The student understands the etiology of fatigue and is able to guide the patient and their loved ones. The student understands the etiology of fever and peripheral cooling and is able to treat symptoms and guide the patient and their loved ones.	P/I P/I	Seminar Lecture Questioning/discussing teaching	0.5 h	Concept map Electronic material	0.5 h

Mental and central nervous system symptoms			M	The student understands the causes of confusion and delirium, identifies the	P/I	Seminar Teaching discussion	0.5 h	Concept map Electronic material	0.5 h
-	Anxiety Confusion	1 2		related treatment needs and is able to implement treatment. The student is able to face and care patient anxiety by medical and non-pharmacological means.	P	Patient examples Problem Based Learning Lecture			
Other syr			E/M	The student is able to prevent and treat	I	Seminar	0.5 h	Concept map	0.5 h
-	Skin	2		skin symptoms.		Patient examples		Electronic material	
-	Urinary symptoms	3		The student is able to identify and treat the most common urinary symptoms.	I	Problem Based Learning Lecture			

Importance: I = Core content; 2 = Important content; 3 = Content to be mentioned. Stage of studies: E = Early stage, M = Middle stage, F = Final stage P = Summarising teaching of palliative care; I = Teaching that can be integrated; P/I = Part of the teaching can be integrated

Table 4. Comprehensive support for the patient and their loved ones

Topic	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
Orientation to family	1	M/F	The student understands the importance of family and loved ones in palliative care. The student understands the active role of the patient and loved ones in care and supports the patient and loved ones to participate according their resources.	P/I P	Seminar/lecture Teaching discussion Collaborative teaching Simulation Patient examples	2 h	Preliminary material/assignment Stimulating writing assignments Electronic material	1 h
Psychological support	1	M/F	The student identifies the need for psychological support for the patient and loved ones. The student is able to support the mental well-being of the patient and their loved one.	P/I P	Seminar/lecture Teaching discussion Collaborative teaching Simulation	1 h	Preliminary material/assignment Reflexive writing assignment Electronic material	1 h
Grief, crisis and hope in palliative care and in end- of-life care	1	M/F	The student understands grief and crisis as phenomena. The student is able to support the patient and loved ones in grief. The student understands the significance of hope and methods for reorienting it in palliative care and in end-of-life care	I P/I P	Teaching discussion Collaborative teaching Seminar/lecture Simulation	1 h	Preliminary material/assignment Stimulating writing assignments Electronic material Literature	1 h
Existential support - Mental support - Spiritual support - Relevance	2 2	M/F	The student is able to identify and support the patient and loved ones in the need for existential support.	P	Seminar/lecture Collaborative teaching Simulation	1 h	Reflexive writing assignment	

Social support	3	M/F	The student is able to identify the social support needs of the patient and their loved ones and guide them together with a multi-professional team to the necessary assistance. The student knows the role of the third sector as a provider of social support.	P P/I	Seminar/lecture Collaborative teaching Simulation	0.5 h	Preliminary material/assignment Electronic material	0.5 h
Physical support	3	E/F	The student knows the importance of supporting the functioning of a patient in palliative care. The student is able to support and guide the patient in daily activities.	P	Seminar/lecture Collaborative teaching Simulation	0.5 h	Preliminary material/assignments Electronic material Supplementary literature	0.5 h

Importance: $I = Core\ content$; $2 = Important\ content$; $3 = Content\ to\ be\ mentioned$. Stage of studies: $E = Early\ stage\ M = Middle\ stage\ F = Final\ stage\ P = Summarising\ teaching\ of\ palliative\ care$; $I = Teaching\ that\ can\ be\ integrated$; $P/I = Part\ of\ the\ teaching\ can\ be\ integrated$

Table 5. Interaction and encounter

Торіс	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
An authentic and appreciative encounter with the patient and their loved ones	1	E/M/F	The student is able to face the patient and loved ones sensitively and empathetically. The student understands the importance of presence as part of palliative care.	P P	Drama, RPG Simulation Patient example Teaching discussion	2 h	Electronic material Reflexive writing assignment	1 h
Active interaction and communication	1	E/M/F	The student is able to talk about difficult things. The student is able to use linguistic and non-linguistic means of interaction. The student identifies the patient's communication needs and changes in communication ability, and masters assisted and non-assisted communication methods.	P P/I I	Drama, RPG Simulation Patient example Teaching discussion	2 h	Electronic material Reflexive writing assignment	2 h
Taking culture into account in palliative care	2	M	The student is able to act culturally sensitive. The student understands the relationship between death and culture.	I P/I P	Drama, RPG Simulation Teaching discussion	1 h	Electronic material Pre-assignments Stimulating writing assignments	1 h

 $Importance: 1 = Core\ content;\ 2 = Important\ content;\ 3 = Content\ to\ be\ mentioned.\ Stage\ of\ studies:\ E = Early\ stage,\ M = Middle\ stage,\ F = Final\ stage$ $P = Summarising\ teaching\ of\ palliative\ care;\ I = Teaching\ that\ can\ be\ integrated;\ P/I = Part\ of\ the\ teaching\ can\ be\ integrated$

Table 6. End-of-life care

Торіс	Im- por- tance	Stag es	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
Taking care of the patient and relatives as death approaches	1	M	The student is able to guide and support the patient and their loved ones as death approaches.	P/I	Teaching discussion Problem Based Learning Simulation	1 h	Preliminary material/assignments Electronic material	0.5 h
Post-mortem care	1	E/M	The student is able to respectfully implement post-mortem care. The student is able to guide the patient's loved ones in the management of practical matters after death.	P/I P/I	Teaching discussion Lecture Problem Based Learning Simulation	1 h	Preliminary material/assignments Electronic material	1 h
Identifying the approach of death	2	E/M	The student recognizes the signs of death approaching and is able to observe changes in the patient's condition.	P	Teaching discussion Questioning teaching Problem Based Learning	1 h	Preliminary material/assignments Electronic material	0.5 h
Nursing and symptomatic treatment of a dying patient	2	M	The student identifies measures that are unnecessary in terms of treatment goals and life expectancy. The student knows the guidelines of fluid therapy and nutrition in the later stages of life. The student understands the concept of palliative sedation.	P P P	Teaching discussion Lecture Problem Based Learning Simulation	1 h	Preliminary material/assignments Electronic material	1 h

Importance: $I = Core\ content;\ 2 = Important\ content;\ 3 = Content\ to\ be\ mentioned.$ Stage of studies: $E = Early\ stage,\ M = Middle\ stage,\ F = Final\ stage$ $P = Summarising\ teaching\ of\ palliative\ care;\ I = Teaching\ that\ can\ be\ integrated;\ P/I = Part\ of\ the\ teaching\ can\ be\ integrated$

Table 7. Ethics and law

Topic	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
End-of-life care decisions: Ethics and law	2	M/F	The student identifies ethical and legal aspects related to the end of life.	P/I	Questioning teaching Teaching discussion Lecture	0.5 h	Electronic material	1 h
Assisted death (Euthanasia, Physician-Assisted suicide PAS)	3	M	The student is able to explain the concepts of euthanasia and assisted suicide.	P	Teaching discussion Questioning teaching Lecture	0.5 h		

Importance: I = Core content; 2 = Important content; 3 = Content to be mentioned. Stage of studies: E = Early stage, M = Middle stage, F = Final stage P = Summarising teaching of palliative care; I = Teaching that can be integrated; P/I = Part of the teaching can be integrated

Table 8. Multi-professional teamwork and self-reflection

Topic	Im- por- tance	Stages	Abilities that constitute the objectives of the course:	P/I	Teaching methods	Contact teaching (h)	Other teaching methods	Other studies (h)
The student's own attitude to incurable illness and death	1	M/F	The student recognizes their own values, resources and attitudes and develops their own strengths.	Р	Teaching discussion Creative methods	1 h	Self-reflection in writing Learning diary	1 h
Multi-professional teamwork and the role of the nurse in the team	2	E/M/F	The student understands the multidisciplinary nature of palliative care and end-of-life care. Is aware of the importance of work supervision in well-being at work/professional growth. The student recognizes the need for their own professional development in palliative care and end-of-life care.	P/I	Teaching discussion Simulation Patient examples	1 h	Pre-assignment Self-reflection in writing Learning diary	1 h

Importance: I = Core content; 2 = Important content; 3 = Content to be mentioned. Stage of studies: E = Early stage, M = Middle stage, F = Final stage P = Summarising teaching of palliative care; I = Teaching that can be integrated; P/I = Part of the teaching can be integrated

7. Integration of the content of the palliative nursing curriculum recommendation into nursing degree courses (horizontal integration)

Some of the taught content can be integrated into the teaching of different study courses in cooperation with the teachers responsible for palliative care, i.e., the studies can be integrated horizontally. In this way, the student understands that palliative care concerns several patient and disease groups and learns to apply knowledge and skills in the framework of palliative care. The recommendation suggests that the content of palliative care be integrated into different matter content. (Table 9).

Table 9. Horizontal integration

Subject	Examples of content to integrate
Basics of nursing	Signs of death, post-mortem care
Treatment of an internal medicine patient	Palliative care of non-malignant diseases (especially COPD, heart failure, ALS) and support
Nursing care for the elderly	Palliative care of a memory disorder patient, encountering and supporting a memory disorder patient and their loved ones, will to care, valuable
	end of life in old age, gerastenia
Nursing of a patient	Palliative service system for a patient with cancer, early
with cancer	palliative care, end-of-life care
Nursing for women and children patients	Family-centred care, cancer of children and adolescents, palliative care, gynaecological cancers, encountering and supporting a family with children
Mental health nursing	Grief, mental symptoms, crisis, encountering and supporting a person in crisis
Pharmacology and pharmacotherapy	Implementation of medicinal therapy, mechanisms of action of drugs, monitoring, forms and routes of administration in palliative care
Anatomy and physiology	Physiology of pain
	Pain sensitivity of different tissues, pain experience
Surgical care	Palliative surgery, pain assessment and care
Acute care nursing	Goals of care and advanced directives, identification of the need for care

8. Development of palliative nursing skills in clinical practice

The degree in nursing includes 90 credits for clinical practice, which aim is that the student practices under supervision in practical work tasks, as well as applies their knowledge and practices their skills¹⁹. Each student nurse should be able to meet and care for the patient and relatives in palliative and/or end-of-life care during clinical practice. The goals of clinical practice should also reflect the goals of palliative care. In the EduPal project, the general goals of the palliative care practical training have been drawn up and should be realised in the totality of the 90 credits for practical training (Table 10). The location of these goals during studies may vary according to the timing of different internships and different practices at universities of applied sciences.

Table 10: Objectives of clinical practice in palliative care

Objectives of clir	nical practice in palliative care and end-of-life care in regard to nursing
education:	
The student:	1. is able to encounter and support a patient in palliative care and end-of-life care and their loved ones, taking into account physical, mental, social and existential needs
	2. is able to identify the patient's need for palliative care and end-of-life care and knows the service system
	3. is able to plan and implement palliative and end-of-life care
	in accordance with the advanced care plan, taking into account ethical and
	legal principles
	4. is able to implement and evaluate symptom and pain management
	5. is able to guide a patient in palliative and end-of-life care and their
	loved ones using multidisciplinary cooperation

9. Assessment

Competence in palliative care should be assessed². The cognitive competence of palliative care must be assessed, for example, by means of a written assessment or peer review. Simulations, among other methods, can be used to assess skills. In palliative care, attitudes and an ethical framework for care are central. These can be assessed through, among other things, feedback discussions and reflective writing assignments, or otherwise with the help of self-assessments.

The assessment of palliative care competence should be a systematic part of student nurses' learning. In the future, the competence of nurses will be assessed with the help of a national exam prepared in the YleSHarviointi project. Experts in the EduPal project have been involved in the development of the assessment methods related to palliative care. It is important that the assessment of nurses' national competence in the future shall also include palliative care competence.

In the development of palliative care teaching, student feedback must be collected regularly both on the teaching unit that brings together palliative care and on teaching that is integrated into other teaching. Feedback should be used to develop teaching to better meet the needs of students and working life in terms of quantity and quality

10. Objectives and structure of palliative care and end-of-life care advanced studies

The education of nurses is based on the revised Professional Qualifications Directive of the European Parliament and of the Council (2013/55/EU), which stipulates that the education of nurses responsible for general care must last at least three years and include at least 180 credits (European Credit Transfer System, ECTS). In Finland, the education of nurses consists of 210 credits (ECTS), which makes it possible for students to direct and deepen their competence in some chosen field of nursing ¹⁹.

In the EduPal project, advanced studies in palliative care are planned and implemented, which include theory studies of 15 credits (ECTS) (includes a national competence test 1 credit) and practical training of 15 credits (ECTS). The studies are structured in such a way that universities of applied sciences can flexibly include studies as part of their teaching offer. The content of the study courses for palliative care orientation studies and the main goals of the internship are presented in Tables 11-14.

 Table 11: Human-centred palliative care

Course title:

Human-centred palliative care (5 credits, includes a national competence test (1 credit))

Abilities that constitute the objectives of the course:

The student:

- Can explain the key concepts of palliative care and end-of-life care and the relationships between them
- Can apply key laws and regulations governing palliative care and end-of-life care
- Is able to define ethical and legal issues and is able to act in accordance with ethical values and principles in palliative and end-of-life care
- Understands the goals of care and advanced directives in palliative and end-of-life care and understands the importance of an advanced care plan
- Knows the key service chains and levels of care for a palliative and end-of-life patient
- Can assess the individual palliative care needs of different patient groups and apply their skills in their work
- Understands the importance of professional competence development in palliative care
- Can support the patient's ability to function and knows the importance of rehabilitation methods in palliative care

The main content of the course:

- Key concepts of palliative care and end-of-life care
- Legislation and recommendations governing palliative care and end-of-life care
- Ethical and legal aspects
- Euthanasia as a phenomenon
- Levels and service chains of palliative care
- End-of-life care at home
- The role of the public/private/3rd sector and volunteers in palliative care
- Care policies, delimitation of care, advanced care plan, care consultation, care will
- Functional support and rehabilitation methods in palliative care

Table 12: Symptom and pain management of a patient in palliative care

Course title:

Symptom and pain management of a patient in palliative care (5 credits)

Abilities that constitute the objectives of the course:

The student:

- Is able to plan, implement and evaluate the treatment of symptoms and pain of a patient in palliative care and to guide the patient and the patient's loved ones taking into account the individual needs
- Understands the concept of total suffering and is able to apply knowledge in their work
- Can select and use appropriate symptom measurement tools as a part of assessment
- Knows the principles of safe and effective pharmacological and non-pharmacological treatment of a patient in palliative care
- Can work in a multi-professional team to facilitate the patient's symptom treatment
- Understands the process of dying and applies their skills in the care of the patient after death, taking into account the patient's close ones

The main content of the course:

- Mechanisms and treatment of the most common symptoms (pain, dyspnoea, GI tract symptoms, ascites, mental symptoms, fatigue, cachexia, skin symptoms)
- Treatment of pain in different patient groups, medical treatment especially with opioids, non-pharmacological pain treatment
- Medicinal and non-pharmacological treatment of other symptoms
- Symptom surveys and pain meters
- Multi-professional teamwork
- Principles of palliative sedation
- Death and post-mortem care

Table 13: Holistic support and interaction of the patient and their loved ones in palliative care

Course title:

Holistic support and interaction of the patient and their loved ones in palliative care (5 credits)

Abilities that constitute the objectives of the course:

- Can identify, face, guide and support the individual needs of patients and their loved ones holistically and can use presence as a method of help
- Understands the importance of crisis and grief as part of the lives of people of different ages and cultures
- Knows the possibilities of multi-professional cooperation in providing comprehensive support
- Understands the concepts of family orientation, inclusion and relevance and is able to apply them in their work
- Identifies and anticipates changes in patient communication due to illness
- Can use communication methods and aids that support or replace speech
- Recognises the importance of the student's own attitude to death and well-being at work

The main content of the course:

- Holistic encounter of the palliative and end-of-life patient and their relatives, dialogical interaction and taking on difficult issues
- The role and significance of grief
- Cultural sensitivity in the face of grief and death
- Maintaining hope and relevance of hope
- Caring presence and respectful touch as methods of help
- Forms of support (psychosocial, informative, emotional, mental, psychological and spiritual, existential and practical support)
- Interprofessional collaboration in holistic patient support
- Changes in patient communication, communication methods and aids that support and replace speech
- Reflecting on the student's own perception of death and grief as well as life history and coping with their own job

Table 14: Objectives of advanced clinical practice in palliative care

Objectives of advanced	d clinical practice in palliative care
The student:	1. understands the role of the nurse in the coordination and
	decision-making of palliative care and end-of-life care
	2. understands the levels of palliative care organisation and their integration into social and health care
	3. is able to face and support a wide range of patients in palliative care and end-of-life care, taking into account cultural factors as well as physical, mental, social and existential needs
	4. is able to plan, implement and evaluate palliative and end-of-life
	care holistically in accordance with the patient's end-of-life preventive care plan, taking into account ethical and legal principles
	5. is able to implement and evaluate comprehensive symptom
	treatment
	6. is able to implement and evaluate the medical and non- pharmacological pain management of palliative and end-of-life patients with different help methods
	7. is able to work as part of a multi-professional team in palliative care with patients, relatives and various parties involved in the care
	8. is able to take into account the importance of well-being at work in palliative and end-of-life care

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ANNEX 1 Participants in the consultation

The statement round of the EduPal project's curriculum recommendation was carried out from 22 August to 24 September 2019. The request for a statement was sent to all actors of the educational organizations (n=49), working life experts (n=13), student nurses (n=8) and key stakeholder representatives (n=10).

By the deadline, 30 statements were received

Stakeholder associations, unions and organizations (n=4)

Ministry of Education and Culture (n=1)

Working life experts (n=5)

University, medicine (n=2)

University, nursing (n=1)

Universities of applied sciences (n=13)

Student nurses (n=4)