

Training teams in pediatric advance care planning: transfer of knowledge and communication skills

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Background 1/2

- Advance Care Planning (ACP) enables patients and relatives to define and share values, goals and preferences for future medical treatment and care.
- For each individual child, the care/treatment that best suits the child and family
- The IMplementing Pediatric Advance Care Planning Toolkit (IMPACT) is a method for supporting ACP in pediatric palliative care.
- IMPACT was developed in the Netherlands in 2019:
 - Materials for children, families and clinicians to prepare for and structure ACP conversations
 - ACP training for clinicians

1. Rietjens JAC, Sudore RL, Connolly M, et al. (2017)

2. Fahner J, Rietjens J, van der Heide A, et al. (2021)

3. Fahner JF, Kars MC. Talk about care & treatment together (about IMPACT with animation Advance Care Planning) Utrecht: University Medical Center Utrecht; 2023 [Available from: <https://kinderpalliatief.nl/impact/en/>.]

4. Verberne LM, Kars MC, Schouten-van Meeteren AY, et al. (2017)



Background – Aim 2/2

- Trained professionals: indicated their need for ongoing support to practice ACP communication skills optimally over time.
- We developed a **team-based learning program** aimed at teaching participants
 - transfer of knowledge and communication skills to their team.
 - methodical reflection on ACP conversations
- **Research questions:**
 - To what degree of knowledge transfer regarding ACP does the team-based learning program lead?
 - What are experiences of healthcare providers with the team-based learning program?

Method 1/2

Intervention

A team-based learning program was developed consisting of two components:

- A one-day IMPACT 'train-the-trainer' course for 'facilitators'
 - Teaching ACP communication skills
 - Role plays
 - Structured method for sharing knowledge and skills with their team in a COJ session.
- A coaching-on-the-job (COJ) program for 'learners'
 - Facilitator starts with theory
 - Role plays, as desired with real or constructed (given) case
 - Facilitator guides the role plays and reflection according to a structured method.

Study population

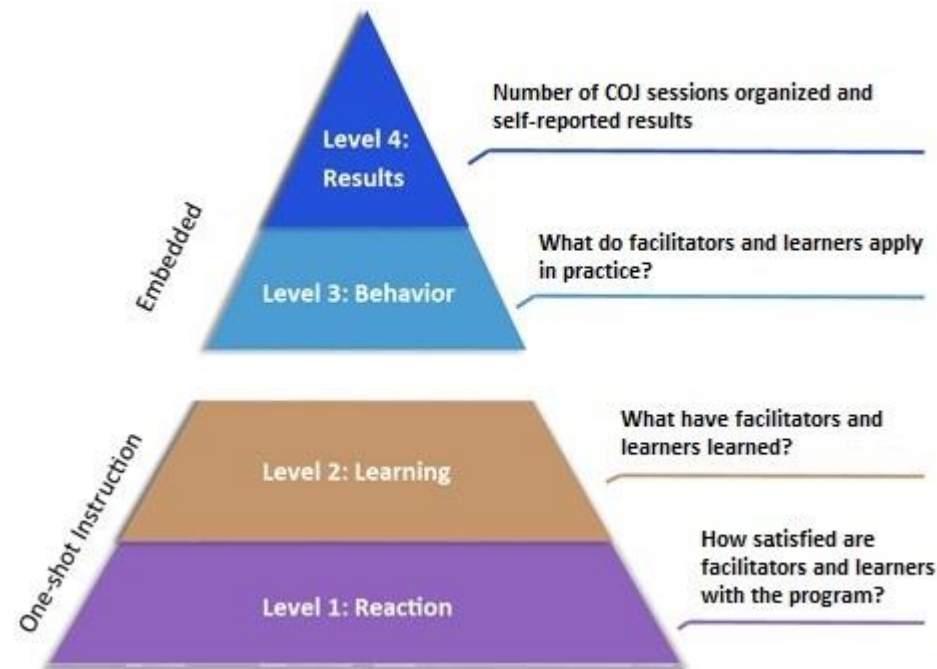
- Facilitators: 18 healthcare professionals from all eight pediatric palliative care teams (PPCT) in the Netherlands.
- Learners: colleague professionals involved in ACP participated in the COJ sessions

Method 2/2

Evaluation of the program

We evaluated experiences with the program and the level of knowledge transfer and team reflection achieved.

Kirkpatrick's four-level model



Data collection

- Questionnaires on T1 – T2 – T3 en T4 in a 6 month period
- Questions were asked about these four levels
- Field notes

5. Kirkpatrick D (1996)

6. Kirkpatrick JD, Kirkpatrick WK. (2016)

Results 1/3

- Participants

- Facilitators: 8 pediatricians, 10 pediatric nurses from 8 PPCTs
- Learners: 46 total, most pediatricians and nurses, also spiritual counselors, psychologists, child life specialists

- Questionnaires

- Response rates to the questionnaires among facilitators and learners were high: for facilitators 93.3%, for learners 73.8%.

- Field notes

- Show overall enthusiasm of most participants.
- Facilitators sometimes struggled to identify colleagues eligible for a COJ session
- Embedding the learning program in daily practice was challenging due to high work load and lack of dedicated time.

Results 2/3

Level 1 – Reaction -> Assessment of training activities

- Both facilitators and learners evaluated the training activities in the team-based learning program (very) positively.

Level 2 – Learning -> What participants learned

- 13 of 14 **facilitators** who completed the T4 questionnaire: sufficiently able to transfer ACP knowledge and skills to colleagues.
- 20 of 21 **learners** who completed the T4 questionnaire: ACP skills are clear.
- A slight decrease in the number of **learners** who reported feeling comfortable with ACP conversations -> Dunning-Kruger effect?

Results 3/3

Level 3 – Behavior - > To what extent did participants change their behavior

- The number of professionals who more often took the initiative to reflect on ACP with colleagues increased
 - among **facilitators**: over time from 8 out of 18 (44.4%) at T1 to 10 out of 14 (71.4%) at T4.
 - among **learners**: over time from 15 out of 31 (48.4%) at T1 to 13 out of 21 (61.9%) at T4.

Level 4 – Results -> the number of COJ sessions organized and self-reported results.

- 7 out of 8 PPCTs organized a first COJ session, 4 out of that 7 also a second COJ.
- Average of 4.2 learners per session, average duration 85 minutes.
- 11 out of 14 facilitators at T4: next COJ session planned or I plan to do so.
- Half of 21 learners at T4: positive change in attitude and self-confidence.

Discussion

- Knowledge transfer: complicated process, is influenced by 3 factors:
 - **Trainee characteristics** -> in this study strong motivation
 - **Characteristics of the training activities** -> in addition to knowledge about ACP, much attention to team-based learning and reflection
 - **Work environmental factors**
 - > Factor that could be least influenced by the program
 - > Most mentioned barriers related to work environment: workload and difficulty with scheduling COJ, not knowing which professionals are conducting ACP conversations.
- Next step:
 - Integration in existing educational programs and implementation in existing networks in PPC
 - > **Co-IMPACT study: a 4-year implementation project**

Conclusion

- The newly developed team-based learning program resulted in intended transfer of knowledge and methodical reflection on ACP in COJ sessions in 7 out of 8 participating PPCTs.

Recommendations for practice and/or implementation

- PPCTs need more dedicated time for COJ activities related to ACP.
- Facilitators need more guidance on how to deal with individual variation among team members in conducting ACP.

Website: [IMPACT: Putting Advance Care Planning into practice \(kinderpalliatief.nl\)](https://kinderpalliatief.nl)

Recent publication on this study (open access):

Engel M, Fahner JC, Hennis MP; Consortium VIMP IMPACT; Kars MC. **Experiences with a national team-based learning program for advance care planning in pediatric palliative care.** BMC Palliat Care. 2024 Aug 3;23(1):196. doi: 10.1186/s12904-024-01515-2.

Thank you
Any questions?

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