

# INTEGRATING PALLIATIVE CARE THROUGH EDUCATION PROGRAMMES: CASE STUDY FROM KENYA

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Palliative Care: an essential part of medical and nursing training



# KEHPCA's

## Training and Education

- Health care professionals
- Non health care professionals
- Across the country
- In collaboration with other training institutions
- Develop a national palliative care curriculum



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*Diana*  
Widows of War Memorial Fund  
THE WORK CONTINUES



# Why do we need a national PC curriculum?

- To provide a definition for palliative care services and establish levels of care and service delivery for palliative care providers
- To standardize materials used by various implementing partners in health care facilities
- To provide a framework for the evaluation of palliative care programs
- Way forward for the indicators that currently lack from most of our data collection tools



# process of curriculum development

- Needs assessment survey
- Stake holders forum to select task force
- Review of existing curriculums
- Selection of educational strategy
- Curriculum making process



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# Documents to be produced

1. Palliative care curriculum
2. Trainers manual in a modular form
3. Participants hand book
4. Course syllabus
5. Policy guidelines/ standards.



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# Contents..

## Concepts of PC

- Definition
- Principles
- History and evolution of PC
- Modes of PC
- Public Health approach to PC in Kenya



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# Contents

## Clinical PC

- Clinical assessment
- Pain management
- Other systematic symptoms management
- Skin and wound care
- Pharmacology and drug interactions
- ART in PC
- Nutritional assessment
- End of Life care
- Legal issues



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# Contents

## Psychosocial and spiritual aspects

- Definition and importance of PSS
- Types of PSS
- Counselling
- Spiritual & cultural care
- Complimentary services in PC
- Human sexuality
- Care of the carers



# Contents

## PC for special groups

- Adolescents
- The elderly
- Children
- OVC



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# Contents

## Programmatic Health approach to PC

- Organizational structure
- Services/activities
- System
  - policy
  - Referral mechanism
  - Internal
  - External
  - Review (M &E)



# Success

- Needs assessment done
- Information dissemination to the Stakeholders
- Technical working group identified
- Other curriculums reviewed
  - Sub-Sahara Africa
  - Vietnam document
  - Nairobi Hospice
  - Kisumu Hospice
  - H.B.C manual – NASCOP
- Consultants identification
- Preliminary curriculum layout done.



# Challenges

- Human recourse/ expertise
- Funds (CDC, Diana Fund )
- Time
- Working with MoH




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# Recommendations

- National PC policy
- Integration of PC Training into all levels of health care providers
- Dedication of training institutes
- Standardized training



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*“Nothing would have a greater impact on the care of patients with advanced incurable disease than instituting the knowledge we have now to improve their quality of life.”*

by Jan Stjernsward

Thank you



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