



Rapport Sommaire

Analyse de l'environnement d'enseignement et d'apprentissage des soins palliatifs et de fin de vie

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Avant-propos

L'identification de ressources d'apprentissage et d'enseignement dépend de deux approches pédagogiques, soit l'enseignement axé sur le professeur ou l'enseignement axé sur l'étudiant/apprenant. Chaque approche est fondée sur divers présupposés. Pour l'enseignement axé sur le professeur, l'enseignant fixe les objectifs à titre d'expert, fournit les ressources puis évalue l'apprentissage des étudiants, selon les objectifs du cours et le matériel d'apprentissage. Pour l'enseignement axé sur l'étudiant (dont les principes se rapprochent de l'enseignement aux adultes), l'enseignant sert de facilitateur et de guide. À ce titre, il organise l'environnement d'apprentissage dans lequel l'étudiant participe à l'identification de ses besoins d'apprentissage selon la matière du cours, son expérience d'apprentissage et ses connaissances acquises. Conjointement avec l'enseignant, l'étudiant approfondit ses compétences d'étude par le biais de recherche, lecture et synthèse de la matière correspondant à ses besoins d'apprentissage, pour ensuite réfléchir sujets abordés. Dans ce contexte, le travail se fait en général conjointement avec l'ensemble du groupe. Nous estimons que les éducateurs ayant recours à cette analyse suivront l'une ou l'autre des approches, mais que la plupart d'entre eux puissent dans chacune d'elles selon leur méthode d'enseignement.

En dehors de la salle de cours, l'enseignement des soins palliatifs et de fin de vie intègre des ressources communautaires en développant des partenariats entre les centres de soins et l'établissement scolaire. L'enseignant peut inviter des professionnels de la santé et consommateurs de soins palliatifs à faire des présentations sur leur expérience ou sur des études de cas. On encourage les étudiants à entreprendre un dialogue sur les sujets présentés avec les présentateurs et leurs collègues d'étude. Ces échanges sont parfois importants pour les prestataires de soins et thérapeutiques pour les consommateurs qui relatent leur histoire.

Objectif

Cette analyse de l'environnement a été complétée afin de compiler les ressources d'enseignement et d'apprentissage des soins palliatifs et des soins en fin de vie. Plusieurs stratégies de recherche ont été entreprises pour réunir un vaste ensemble d'articles portant sur les compétences fondamentales telles que définies par le Comité consultatif de l'Association canadienne des écoles de sciences infirmières (ACÉSI) sur les soins palliatifs et de fin de vie (SPFV, 2009). Ces compétences ont été révisées par le comité consultatif en 2011 (tableau 1). Par ailleurs, les programmes et ressources d'enseignement mis en place par les écoles de sciences infirmières du Canada ont permis aux auteurs de déterminer comment les soins palliatifs sont enseignés dans les programmes de premier cycle.

Stratégies de recherche

Plusieurs stratégies de recherche ont été entreprises au cours de l'analyse de l'environnement pour rassembler les ressources d'enseignement et d'apprentissage. En plus de recherches exhaustives sur Internet, les responsables ont contacté des intervenants clés et les écoles de sciences infirmières du Canada. Les ressources compilées incluent, sans toutefois s'y limiter, des articles, ouvrages et documents audiovisuels.

Le processus de recueil d'informations a d'abord été entrepris auprès d'intervenants clés, notamment les membres du Groupe de travail sur l'élaboration de programmes d'enseignement et d'apprentissage de l'ACÉSI, ainsi que le Regroupement infirmier de l'Association canadienne des soins palliatifs (ACSP). Au cours d'une téléconférence en octobre 2010, les membres du groupe de travail ont été invités à soumettre toute ressource pertinente au consultant du projet avant le 15 décembre 2010. Les membres du groupe ont été avisés de toute lacune qui se présentait dans les ressources recueillies. Un courriel a été envoyé au Regroupement infirmier de

l'ACSP pour demander à ses membres à soumettre toute éventuelle ressource (annexe A) avant le 21 décembre 2010.

Les recteurs et directeurs d'écoles de sciences infirmières du Canada ont été contactés par courriel (annexe B) pour les inviter à soumettre avant le 17 décembre 2010 les programmes de cours sur les soins palliatifs et de fin de vie pour les étudiants de premier cycle.

Enfin, plusieurs recherches sur Internet ont permis de compléter les documents soumis par les divers groupes. Le consultant du projet a soulevé certaines lacunes découlant du triage des ressources par type et par compétence. D'autres ressources ont été tirées de Google, YouTube, Cumulative Index to Nursing and Allied Health Literature et MEDLINE.

Aperçu des ressources recueillies

Au total, 456 ont été recueillies. Certaines ressources qui avaient été soumises par les intervenants clés étaient difficiles à tirer et elles ont donc été intégrées dans la catégorie de « ressources additionnelles », qui comporte 97 ressources. Parmi ces ressources figurent des articles de revue, articles publiés sur Internet, ouvrages, rapports, présentations, sites Internet, questionnaires et vidéos. Veuillez consulter l'annexe C pour un inventaire des ressources. Veuillez consulter le tableau 1 à la page suivante pour un dénombrement des ressources par type selon les compétences de base.

Tableau 1

Ressources triées par type selon les compétences de base

Compétences de base	Type de ressource		
	Ouvrages	Audiovisuel	Articles
1. Using requisite relational skills to support decision making and negotiating modes of end-of-life care on an ongoing basis.	5	20	36
2. Demonstrating knowledge of grief and bereavement and the ability to support others from a cross-cultural perspective.	6	9	19
3. Demonstrating knowledge and skill in holistic, family-centered nursing care of persons at end-of-life who are experiencing pain and other symptoms.	30	12	76
4. Recognizing and responding to the unique end-of-life needs of various populations, i.e. elders, children, those with cognitive impairment, those in rural and remote areas, those with chronic diseases, mental illness and addictions, and marginalized populations	11	10	36
5. Applying ethical knowledge skilfully when caring for persons at end-of-life and their families while attend to one's own responses such as moral distress and dilemmas and successes with end-of life decision making.	24	11	50
6. Demonstrating the ability to attend to psychosocial and practical issues such as planning for death at home and after death care relevant to the person and their family members.	1	1	25
7. Identifying the full range and continuum of palliative and end-of-life care services, resources, and the settings in which they are available (e.g. home care).	5	3	28
8. Educating and mentoring patients and family members on care needs, identify the need for respite for family members, and safely and appropriately delegate care to other caregivers (e.g. personal care workers).	0	1	19
9. Demonstrating the ability to collaborate effectively to address patient/family priorities within an integrated inter-professional team, including non-professional health care providers (i.e. patient, family).	6	5	12

Dans l'ensemble, 12 recteurs et directeurs et trois membres du Regroupement infirmier de l'ACSP ont répondu. Par ailleurs, 15 écoles ont soumis de l'information sur les cours en soins palliatifs et de fin de vie qui sont offerts, les membres du regroupement infirmier de l'ACSP ont envoyé leurs programmes de cours. Certains cours portent entièrement sur les soins palliatifs et de fin de vie, tandis que d'autres comportent uniquement des modules sur la matière (annexe D). Sept écoles offrent aux étudiants de premier cycle des cours spécialisés en soins palliatifs et de fin de vie, dont deux sont obligatoires, et huit écoles offrent des modules de cours dans ce domaine. Parmi ces cours, 10 sont obligatoires. Les cours spécialisés présentent un aperçu général des soins palliatifs, la gestion des symptômes, les notions de perte, de deuil et de mort, ainsi que les besoins d'une personne mourante dans une perspective holistique. L'un des cours est interdisciplinaire et il porte plutôt sur la mort et le décès que sur les soins palliatifs en tant que tels. Les modules de cours touchent à des sujets semblables. Veuillez consulter l'annexe D pour un dénombrement et une description des cours offerts.

En plus des cours, les répondants ont fourni une description des méthodes d'enseignement, dont les cours magistraux, conférenciers, expérience clinique et laboratoires de simulation. Deux écoles privilégient une méthode d'enseignement contextuel où différents scénarios de soins de fin de vie sont présentés aux étudiants. Le Collège Selkirk offre par exemple le programme « Learning Essential Approaches to Palliative and End-of-Life Care » (LEAP) aux étudiants et professionnels de la santé. Les recteurs et directeurs ont aussi fait parvenir des ressources non traditionnelles et trois répondants ont souligné l'importance des approches alternatives aux soins palliatifs et de fin de. Veuillez consulter le tableau 2 pour une liste de programmes d'apprentissage et d'approches non traditionnelles.

Tableau 2

Méthodes d'enseignement non traditionnelles

Établissement	Approches non traditionnelles
Centre for Nursing Studies (Collaborative program with Memorial University)	<ul style="list-style-type: none"> • Visiting a funeral home • Participating in a group session to learn about individual feelings, beliefs and attitudes towards loss
Thompson Rivers University	<ul style="list-style-type: none"> • Taking field trips to an eye bank, or to view alternative healing techniques such as reiki, healing touch or aromatherapy
Université du Québec	<ul style="list-style-type: none"> • Interviewing a parent to learn about their perceptions of life and death

Analyse

L'analyse environnementale a permis de recueillir un grand nombre de ressources. En revanche, certains domaines manquent de matière pour offrir un inventaire exhaustif, notamment en ce qui concerne les compétences 6, 7 et 8, pour lesquelles il manque d'ouvrages et documents audiovisuels. Pour la compétence 8, il faudrait développer des ressources sur la délégation des soins palliatifs à d'autres soignants. Par ailleurs, la compétence 9 présente certaines lacunes étant donné le peu de ressources à ce sujet par rapport aux autres compétences. Pour un dénombrement des ressources manquantes selon les compétences, veuillez consulter le tableau Table 3.

L'information sur les soins palliatifs et de fin de vie qui est accessible aux étudiants indique que le contenu peut être enseigné à titre de module de cours. La majorité des cours spécialisés ne sont pas obligatoires. Il est difficile en revanche de tirer des conclusions à ce sujet étant donné le peu d'écoles qui ont fait parvenir leurs programmes de cours.

En conclusion, il faudrait obtenir d'autres informations pour créer une liste exhaustive de ressources et pour mieux cerner comment les soins palliatifs et de fin de vie sont enseignés dans les écoles de sciences infirmières au Canada.

Tableau 3

Ressources additionnelles requises par compétence

Compétence de base	Type de ressource requise		
	Ouvrages	Audiovisuel	Articles
6. Demonstrating the ability to attend to psychosocial and practical issues such as planning for death at home and after death care relevant to the person and their family members.	X	X	
7. Identifying the full range and continuum of palliative and end-of-life care services, resources, and the settings in which they are available (e.g. home care).		X	
8. Educating and mentoring patients and family members on care needs, identify the need for respite for family members, and safely and appropriately delegate care to other caregivers (e.g. personal care workers).	X	X	X
9. Demonstrating the ability to collaborate effectively to address patient/family priorities within an integrated inter-professional team, including non-professional health care providers (i.e. patient, family).			X

Note: “X” indicates where additional resources are required.

Annexe A**Lettre au Regroupement infirmier de l'ACSP**

December 13, 2010

Dear Colleagues,

CASN is currently working on a project to facilitate the integration of palliative and end-of-life care competencies into undergraduate nursing programs in Canada. One of the objectives of the project is to collect and compile an inventory of existing knowledge tools and learning resources for palliative and end-of-life care content. We are planning to develop a national repository of teaching and learning resources, which will be available online.

As a first step towards achieving this objective, we are in the process of identifying resources that would be suitable for the undergraduate/entry to practice level. If you have any resources that you think may be relevant to this project, I would appreciate if you could forward them to me. Also, feel free to forward this email to any of your colleagues who might be able to assist in finding this information.

Please refer to the following list of examples of resources that would be very helpful for this project:

- Relevant and effective teaching or learning tools (including case studies, video, texts, and/or web-based resources)
- Examples of innovative approaches to teaching palliative and end-of-life care content in clinical settings

Please inform us if you do not want your resource(s) posted online in our repository, but are willing to share with the advisory committee for information purposes, and only the title of the resource will be included in the repository.

Thank you for taking time to consider this request. I would very much appreciate your response by December 21, 2010. Please do not hesitate to contact me with any questions or concerns.

Thank you,



Cynthia Baker
Executive Director
Canadian Association of Schools of Nursing
cbaker@casn.ca

Annexe B**Lettre aux recteurs et directeurs**

Dear CASN Member School,

CASN is currently working on a project to facilitate the integration of palliative and end-of-life care competencies into undergraduate nursing programs in Canada. One of the objectives of the project is to collect and compile an inventory of existing knowledge tools and learning resources for palliative and end-of-life care content. We are planning to develop a national repository of teaching and learning resources, which will be available online. Please let us know if you do not want your resources to be redistributed online, and only the title of the resource will be included in the repository.

As a first step towards achieving this objective, we are in the process of identifying schools of nursing that offer Palliative or End-of-Life Courses within their undergraduate nursing program. I would appreciate if you could forward this email to any faculty members who might be able to assist in finding this information.

If you have any resources that you think may be relevant to this project, I would appreciate if you could forward them to me. Please refer to the following list of examples of resources that would be very helpful for this project.

Most importantly:

- Course syllabi from any designated undergraduate Palliative or End-of-Life Care courses or from courses with relevant content

Additionally:

- Relevant and effective teaching or learning tools (including case studies, video, texts, and/or web-based resources)
- Examples of innovative approaches to incorporating palliative and end-of-life care content into coursework

Thank you for taking time to consider this request. I would very much appreciate your response by December 17, 2010. Please do not hesitate to contact me with any questions or concerns.

Thank you,



Cynthia Baker
Executive Director
Canadian Association of Schools of Nursing
cbaker@casn.ca

Annexe C
Inventaire des ressources

Compétence de base	Ressource
<p>1. Using requisite relational skills to share information to support patient/family decision-making and negotiate modes of palliative and end-of-life care on an ongoing basis.</p>	<p>Books (14):</p> <p>Dahlin, C. M. (2010). Communication in palliative care: An essential competency for nurses. In B. R. Ferrell & N. Coyle (Eds.), <i>Oxford textbook of palliative nursing</i> (pp 107-133). New York: Oxford University Press.</p> <p>De Hennezel, M. (2004). <i>Le souci de l'autre</i>. Paris: Éditions Robert Laffont.</p> <p>Dorion, H. (2009). <i>L'étreinte des vents</i>. Montréal: Les Presses de l'Université de Montréal.</p> <p>Duhamel, F. (1995). <i>La santé et la famille. Une approche systémique en soins infirmiers</i>. Montréal: Éditions Gaëtan Morin.</p> <p>Egan, G. (1987). <i>Communication dans la relation d'aide</i>. Montréal: Éditions HRW.</p> <p>Fraser Health Authority. (2007). <i>Information booklet for advance care planning</i>. Retrieved from http://www.peolc-sp.ca/acp/resources/Information%20Booklet%20for%20Advance%20Care%20Planning%20Fraser%20Health(1).pdf</p> <p>Kebers, C. (1999). <i>Mort, deuil, séparation: Itinéraire d'une formation</i>. Paris et Bruxelles: De Boeck.</p> <p>Kelley, P., & Callanan, M. (1992). <i>Final Gifts- Understanding the Special Awareness, Needs and Communications of the Dying</i>. New York: Simon & Schuster, Inc.</p> <p>Nelson, S., & Gordon, S. (Eds.). (2006). <i>The complexities of Care: Nursing Reconsidered</i>. Ithaca: Cornell University Press.</p> <p>Néron, S. (1995). <i>L'art et les voix de l'accompagnement: À l'écoute de la souffrance et de la maladie</i>. Montréal: Éditions Médiaspaul.</p> <p>Papadatou, D. (2009). <i>Face of Death: Professionals who care for the dying and bereaved</i>. New York: Springer.</p> <p>Richard, C., & Lussier, M.-T. (2005). <i>La communication professionnelle en santé</i>. Montréal: Éditions du Renouveau Pédagogique.</p> <p>Roack, M. S. (2002). <i>Caring, the Human Mode of Being: A Blueprint for the Health Professions</i>. Ottawa: CHA Press.</p> <p>Zerwekh, J.V. (2006). Connecting and caring presence. In <i>Nursing care at the end of life</i> (pp. 113-130). <i>Palliative care for patients and families</i>. Philadelphia: F.A. Davis.</p>

- Audio/Visual (20):**
- American Medical Association. (Producer). *Education for physicians on end of life care project: Anxiety, delirium, depression.*
- American Medical Association. (Producer). *Education for physicians on end of life care project: Communicating bad news.*
- American Medical Association. (Producer). *Education for physicians on end of life care project: Last hours of living.*
- American Medical Association. (Producer). *Education for physicians on end of life care project: Medical futility.*
- American Medical Association. (Producer). *Education for physicians on end of life care project: Physician assisted suicide.*
- American Medical Association. (Producer). *Education for physicians on end of life care project: Sudden illness.*
- Help the Hospices. *Current learning in palliative care: 15 minute online tutorials.* Retrieved from <http://www.helpthehospices.org.uk/clip/index.htm>
- The Pallium Project. (2009). *Learning essential approaches to palliative and end-of-life care Module 5: Communication* [PDF document]. Retrieved from http://www.pallium.ca/infoware/LEAPV1-1ParticiBook_2PerPgBLM.pdf
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- The Pallium Project. (Producer). (2008). *Maintaining hope in advanced illness.* Available from <http://video.google.ca/videoplay?docid=-5577137255647207889#>
- The Pallium Project. (Producer). (2009). *Planning care: Involving a patient in end of life decisions.* Available from <http://video.google.ca/videoplay?docid=7399745415511856772#>

- The Pallium Project. (Producer). (2008). *Talking about end of life care*. Available from <http://video.google.ca/videoplay?docid=-290642578077730680>
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- The Pallium Project. (Producer). (2009). *Institutional dynamics in communication*. Available from <http://video.google.ca/videoplay?docid=3216141338251529973#>
- The Pallium Project. (Producer). (2009). *Communication and relationship building*. Available from <http://video.google.ca/videoplay?docid=-2026434700080937617#>
- Articles (43):**
- American Bar Association. *Consumer's tool kit for health care advance planning*. Retrieved from <http://www.abanet.org/aging/toolkit/home.html>
- American Bar Association. *Conversation scripts: Getting past the resistance*. Retrieved from <http://www.peolc-sp.ca/efpppec/english/viewresource.php?resid=511>
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- Canadian Virtual Hospice (n.d.). *Tools for practice: Communication*. Retrieved from http://www.carrefourpalliatif.ca/en_US/Main+Site+Navigation/Home/For+Professionals/For+Professionals/Tools+for+Practice/Communication.aspx?id_f5220f3445fd41e655bf7c8860bb95ac

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<p>4. Recognizing and responding to the unique end-of-life needs of various populations, i.e. elders, children, multicultural populations, those with cognitive impairment, those in rural and remote areas, those with chronic diseases, mental illness and addictions, and other marginalized populations by applying a palliative nursing approach.</p>	<p>Books (16):</p> <p>Adams, D.W., & Deveau, E.J. (1989). La connaissance de la mort chez les enfants. Dans D.W. Adams & E.J. Deveau. <i>Le cancer chez l'enfant: guide à l'usage des parents et amis d'enfant cancéreux</i> (pp. 135-147). St-Hyacinthe, Edisem.</p> <p>Field, M. J., & Behrman, R. E. (Eds.). (2002). <i>When children die: Improving palliative and end-of-life care for children and their families</i>. Washington: National Academy Press.</p> <p>Fisher, R., Ross, M. M., & MacLean, M.J. (2000). <i>Un guide des soins en fin de vie aux aînés</i>. Ottawa : University of Toronto et Université d'Ottawa.</p> <p>Hanus, M. (2000). <i>Les enfants en deuil : Parlons de la mort et du deuil</i>. Paris : Frison-Roche.</p> <p>Hanus, M., & Sourkes, B.M. (1997). <i>Les enfants en deuil : Portraits du chagrin</i>. Paris : Frison-Roche.</p> <p>Hughes, A. (2010). Poor, homeless, and underserved populations. In B. R. Ferrell & N. Coyle (Eds.), <i>Oxford textbook of palliative nursing</i> (pp 745-755). New York: Oxford University Press.</p> <p>Humbert, N. (2004). <i>Les soins palliatifs pédiatriques</i>. Montréal : Éditions de l'Hôpital Sainte-Justine.</p> <p>Jacques, J. (1998). Les enfants et la mort. Dans J.Jacques, <i>Psychologie de la mort et du deuil</i>. Mont-Royal: Modulo. p. 121-141.</p> <p>LaPorte Matzo, M., & Sherman, D. W. (2004). <i>Gerontologic palliative nursing</i>. St-Louis, Missouri: Mosby.</p> <p>Lief, J. L. (2001). <i>Making friends with death: A Buddhist guide to encountering mortality</i>. USA: Shambhala Publications, Inc.</p> <p>Maxwell, T. L. (2010). Caring for those with chronic illness. In B. R. Ferrell & N. Coyle (Eds.), <i>Oxford textbook of palliative nursing</i> (pp 687-699). New York: Oxford University Press.</p> <p>Mazanec, P., & Panke, J. T. (2010). Cultural considerations in palliative care. In B. R. Ferrell & N. Coyle (Eds.), <i>Oxford textbook of palliative nursing</i> (pp. 701-711). New York: Oxford University Press.</p> <p>Morgan, B. D. (2010). End-of-life care for patients with mental illness and personality disorders. In B. R. Ferrell & N. Coyle (Eds.), <i>Oxford textbook of palliative nursing</i> (pp 757-766). New York: Oxford University Press.</p> <p>Papadatou, D. (2009). <i>Face of Death: Professionals who care for the dying and bereaved</i>. New York: Springer.</p> <p>Voyer, P. (2006). Soins infirmiers aux ainés en perte d'autonomie. Montréal: Éditions du Renouveau Pédagogique.</p> <p>Zucker, J.-M., Pacquement, H., Orbach, D., & Delage, M. (2004). Comment prendre soin d'un adolescent en fin de vie. Dans N. Humbert <i>Les soins palliatifs pédiatriques</i> (pp. 559-598). Montréal, Éditions de l'Hôpital Sainte-Justine.</p>
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	<p>Audio/Visual (10):</p> <p>Canadian Virtual Hospice (n.d.). <i>Tools for practice: Vulnerable populations</i>. Retrieved from http://www.carrefourpalliatif.ca/en_US/Main+Site+Navigation/Home/For+Professionals/For+Professionals/Tools+for+Practice/Vulnerable+populations.aspx?id_e7c522575d1fa811f66256336607a1f8</p> <p>Palliative Care Service at IWK, Halifax. <i>Ed's story: The Dragon Chronicles</i>.</p> <p>Seyda, B., & Rothman, E. (Producers). (2002). <i>When a child is dying: Jody Matthews</i></p> <p>Seyda, B., & Rothman, E. (Producers). (2002). <i>When a child is dying: LeRon Harper</i>.</p> <p>Seyda, B., & Rothman, E. (Producers). (2002). <i>When a child is dying: Robert Adams</i>.</p> <p>The Pallium Project. (Producer). (2009). <i>A journey to our roots</i>. Available from http://video.google.ca/videoplay?docid=4211919165881334483#</p> <p>The Pallium Project. (Producer). (2007, August 3). <i>Building cultural competence</i> [Audio podcast]. Retrieved from http://www.palliativeinsight.net/</p> <p>The Pallium Project. (Producer). (2009). <i>Engaging culture</i>. Available from http://video.google.ca/videoplay?docid=1384158252346949208</p> <p>The Pallium Project. (Producer). (2009). <i>Historical impacts of contact manifested in a care situation</i>. Available from http://video.google.ca/videoplay?docid=3256347813504509515#</p> <p>The Pallium Project. (Producer). (2009). <i>Responding to aboriginal diversity</i>. Available from http://video.google.ca/videoplay?docid=-6988672885102545100#</p> <p>Articles (46):</p> <p>Baker, A. (2005). Point of view. Palliative and end-of-life care in the serious and persistently mentally ill population. <i>Journal of the American Psychiatric Nurses Association</i>, 11(5), 298-303.</p> <p>Berniquez, F. (2006). Clinical Practice Module: Helping Health Care Workers Understand Multicultural Practices and Beliefs at End of Life. <i>Bruyère continuing care</i>.</p> <p>Birch, D., & Stokoe, D. (2010). Continuing professional development. Caring for people with end-stage dementia. <i>Nursing Older People</i>, 22(2), 31-37.</p> <p>Bircumshaw, D. (1993). Palliative care in the acute hospital setting. <i>Journal of Advanced Nursing</i>, 18, 1665-1666.</p> <p>Brajtman, S., Higuchi, K., & McPherson, C. (2006). Caring for patients with terminal delirium: Palliative care unit and home care nurses' experiences. <i>International Journal of Palliative Nursing</i>, 12(4), 150-156.</p> <p>Caraceni, A., & Simonetti, F. (2009). Palliating delirium in patients with cancer. <i>The Lancet Oncology</i>, 10(2), 164-172.</p>
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Annexe D
Inventaire des programmes de cours

Stand Alone Courses				
School	Course Title	Required course? (Y/N)	Course Level	Course Description
The University of Manitoba	Palliative Nursing Care	Y	Undergraduate 4 th year	Topics covered include: societal attitudes towards death, an overview of palliative care, caring for the client and family in the final hours, symptom management, loss and grief, spirituality, culture, sexuality, and issues related to public policy, education, and internationally.
Trent/Fleming School of Nursing	Advanced Topic: Issues and Trends in Palliative Care	N	Undergraduate 4 th year	Students learn about caring for individuals and families, and how to deal with death and dying in any setting. Students also examine common issues which prevail throughout various illness trajectories.
Thompson Rivers University	Death and Dying	N	Unknown	Interdisciplinary course with a focus on death and dying, not palliative care. Topics covered include children and death, funerals, legal aspects, suicide, grief, loss, and the dying process.
	Unknown	Unknown	Undergraduate 2 nd year	Students receive training related to end-of-life care before participating in a 13 week clinical rotation in a palliative care setting. Students also take field trips to locations such as an eye bank, and to see reiki, healing touch and aromatherapy sessions.
Selkirk College	Learning Essential Approaches to Palliative and End-of-life Care (LEAP)	N	Undergraduate 3rd or 4th year	This course is provided as a two day workshop for 3 rd or 4 th year students. The program is also open to registered nurses, licensed practical nurses, physicians, pharmacists and social workers. This course is not mandatory.

Université du Québec	Le Processus de Deuil et les Soins Palliatifs	Unknown	Unknown	Students learn about theories of life and death, grief, and suffering. Students explore their personal beliefs about life, death and palliative care. They also learn about the grief, physical, psychological, emotional and spiritual needs of the dying person, symptom management, and oncologic medical emergencies.
Centre for Nursing Studies (Collaborative program with Memorial University)	Dealing with Death and Dying...A Seminar for Nursing Students.	N	Undergraduate 3 rd year	A 20-hour seminar. Topics covered include: the nature of end-of-life care, attitudes/emotional manifestations of loss, death and bereavement, caring for self, meeting physical/emotional/social/spiritual needs of dying patient and family, pain management, children, and loss. Students also visit a funeral home.
Dalhousie University	Palliative Care Nursing	Y	Undergraduate 4 th year	Weekly, 2 hour lecture format with online components. Students explore their personal beliefs about life, death, and palliative care. Course content includes: principles and standards of palliative care, methods of assessment, means of pain and symptom management, collaboration within teams, ethical issues, spiritual and cultural influences, grief, and coping.

Course Module				
School	Course Title	Required course? (Y/N)	Course Level	Course Description
Memorial University	Developing Therapeutic Relationships	Y	Undergraduate 1 st year	The portion related to palliative care focuses on loss and grief, as well as end-of-life communication.
Centre for Nursing Studies (Collaborative	Developing Therapeutic	Y	Undergraduate 1 st year	The portion related to palliative care focuses on loss and grief, as well as end-of-life communication.

program with Memorial University)	Relationships			
	Healthy Aging	Y	Undergraduate 1 st year	For one class students discuss supporting the dying client and families, the role in the palliative care unit, and dying with dignity.
	Nursing Concepts for Care of Women and Child-Bearing Family	Y	Undergraduate 2 nd year	A guest speaker talks about perinatal loss.
	Nursing Concepts for Children, Adolescents and Young Adults	Y	Undergraduate 3 rd year	In class discussion related to conditions such as cancer and birth anomalies that are incompatible with life.
Saskatchewan Institute of Applied Science and Technology	Nursing Concepts in Middle and Older Adulthood	Y	Undergraduate 3 rd year	The focus is on death as a result of acute and chronic conditions. Specifically, the physical, psychosocial, and emotional needs at the end-of-life. Also, the nurse's role in facilitating a peaceful and dignified death, and education of clients and families.
	Health Challenges	Y	Undergraduate 2 nd year	Students learn about palliative care in general including definition, philosophy, principles, programs, and services. Students also learn about pain management, oncologic emergencies, physical manifestations at the end-of-life, grief, loss, bereavement, client and family care, nursing roles, hope, ethical, and legal issues.
Grand Prairie Regional College	Throughout program		Undergraduate	<p>2nd year: Context based learning scenario addressing a middle aged woman dying of lung cancer. 3rd and 4th year: End-of-life issues related to chronic illnesses 4th year: Some students have the opportunity to work in a cancer clinic for their practicum</p> <p>Other opportunities include: guest speakers who have been diagnosed with cancer, as well as people from the Canadian Cancer Society. Students are also exposed to concepts surrounding death and dying in</p>

				the laboratory setting.
University of Alberta	Throughout program		Undergraduate	<p>The use of problem/context based learning throughout undergraduate program. Each nursing course has 4-5 scenarios based on real situations. Some scenarios are directly related to palliative care issues. Scenarios include:</p> <ol style="list-style-type: none"> 1. A 50 year old woman dying of lung cancer at home, and 2. A couple who experience both a premature and still born twin birth. <p>Approximately 6 hours are spent discussing each scenario. Additionally, a lecture is provided to students by a member of a palliative care team.</p>
Trent/Fleming School of Nursing	Introduction to Foundational Practice Concepts	Y	Undergraduate 1 st year	One lecture focuses on loss and end-of-life in old age.
	Living with Chronic Disease	Y	Undergraduate 3 rd year	Students learn about the palliative disease processes, and ethical issues related to end-of-life.
	Experiencing Acute Illness	Y	Undergraduate 3 rd year	One seminar focuses on palliative and holistic care.
Selkirk College	Throughout program			Topics incorporated throughout program.
Nipissing University	Trans-cultural Nursing	Unknown	Undergraduate 3 rd year.	One class is dedicated to palliative and end-of-life care. Guest speakers are invited who specialized in palliative care nursing. Students are encouraged to examine different cultures and religions, and how they influence palliative care. Students must develop a care plan related to this.
	Nursing Theory	Unknown	Unknown	The course incorporates palliative care and how it aligns with different theories and theorists. For example, Margaret Newman's health as expanded consciousness.

	Nursing Trends and Issues	Unknown	Unknown	Several classes are dedicated to palliative and end-of-life issues.
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CASN ACESI ➤

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