

# PEPA Program of Experience in the Palliative Approach

*Funded by the Australian Government Department of Health and Ageing*

## PEPA 2011-2014 Information Guide for Placement Participants



**Western Australia Edition**



Australian Government  
Department of Health and Ageing



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Institute of Health and Biomedical Innovation



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# Acknowledgements

## Resource Development

This *Information Guide for Placement Participants* was adapted from resources developed in previous phases of PEPA by the National Coordination Team at QUT, in consultation with PEPA Managers and representatives from the Australian Government Department of Health and Ageing. This current version was updated in October 2011 for use in the PEPA 2011-2014 phase.

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PEPA 2011-2014 INFORMATION GUIDE FOR PLACEMENT PARTICIPANTS

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This *Information Guide for Placement Participants* may be downloaded from the PEPA web site at: [www.pepaeducation.com](http://www.pepaeducation.com).

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## Application Process

This *Information Guide for Placement Participants* provides important information about the management of the Program of Experience in the Palliative Approach (PEPA). All applicants should read this guide in its entirety and agree to the conditions before applying for entry into the program.

Application forms are available online at: [www.pepaeducation.com](http://www.pepaeducation.com). Completed forms should be submitted to the PEPA Manager in your state of territory.

### Contact Details for the PEPA Manager in Western Australia:

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Cancer Council WA

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Cancer Council WA  
15 Bedbrook Place  
Shenton Park WA 6008

# The Program of Experience in the Palliative Approach (PEPA)

## 1.0 PROGRAM OBJECTIVES

PEPA aims to:

- Provide opportunities to ensure palliative care providers across the continuum are aware of, and provide, culturally appropriate palliative care and end of life support including care preferences, spiritual requirements and bereavement expression; and
- Further improve the skill and confidence of the generalist workforce to work with people with palliative care needs.

The means by which the aim is to be achieved include:

- Building workforce capacity by facilitating clinical experience and other experiential opportunities for health practitioners across rural, remote and metropolitan settings in the palliative approach to care;
- Enhancing linkages between specialist and generalist palliative care providers;
- Enabling Aboriginal and Torres Strait Islander health care providers to gain culturally appropriate experience in the palliative approach to care; and
- Providing professional skills development opportunities for clinicians.

## 2.0 PARTICIPANT OUTCOMES

Participation in this program aims to enhance a participant's knowledge and skills in the palliative approach to care. On completion of the program, participants should be able to demonstrate:

- An increased appreciation of dying and death as a normal part of the life continuum;
- An increased awareness of the scope of, and benefits of timely and appropriate access to, palliative care services;
- An increased awareness and understanding of culturally appropriate palliative care provision;
- A clear understanding of the principles of palliative care;
- An ability to identify the needs of individuals with a life-limiting illness and their family including care preferences, spiritual requirements and bereavement expression;
- An ability to identify the role of their discipline in managing issues faced by individuals with a life-limiting illness;
- An ability to identify services and resources to support individuals with a life-limiting illness and their families;
- An ability to recognise their own knowledge base and scope of practice with regard to optimal palliative care provision; and
- An ability to identify personal coping strategies to effectively manage the personal issues related to working in this field.

***Please note:***

*Participation in this program aims to enhance your knowledge and skills in the palliative approach to care. It does not constitute a formal qualification nor does it aim to develop advanced skills in the field.*

## 3.0 SERVICE AND SYSTEM LEVEL OUTCOMES

At the service and system level, participation should result in:

- Improved skill and confidence of the generalist workforce to work with people with palliative care needs;
- Strengthened linkages between generalists and specialist palliative care providers.

## 4.0 PROGRAM ELIGIBILITY

### 4.1 Discipline background

Placements are available for primary care providers employed in health, aged or community care services, who are involved in providing end of life services across all settings. Our focus is on the generalist workforce. Applications are welcome from professionals in regional and remote locations across Australia. This includes:

- **Aboriginal health and community professionals:**
  - Aboriginal and Torres Strait Islander health professionals and health workers
  - Aboriginal and Torres Strait Islander liaison officers
  - Aboriginal and Torres Strait Islander community workers
- **Medical practitioners, including but not limited to:**
  - GPs
  - GP registrars
  - Senior medical officers in rural and remote settings
  - Medical specialists (other than specialist palliative care staff)
- **Nurses:**
  - Registered nurses
  - Enrolled nurses
- **Allied health professionals:**
  - Physiotherapists
  - Occupational therapists
  - Speech pathologists
  - Social workers
  - Psychologists
  - Dieticians
  - Pharmacists
  - Bereavement counsellors/coordinators
  - Chaplains
  - Pastoral care workers
  - Ambulance officers/paramedics
- **Aged care workers:**
  - Residential aged care workers including Extended Aged Care in the Home (EACH) and Community Aged Care Package (CACP) workers
  - Assistants in nursing
  - Enrolled nurses
  - Registered nurses
- **Community care workers:**
  - Personal care attendants
  - Disability workers
- **Health professionals servicing culturally and linguistically diverse (CALD) populations:**
  - Migrant and CALD liaison officers.

Other participants may be considered where the purpose or likely outcomes are deemed to be consistent with the program and approval is given in writing by the National PEPA team.

### 4.2 Conditions

Applicants must agree to comply with the conditions of the program and meet the following eligibility criteria in order to participate:

- Be currently employed (including self-employed) in a health, aged or community service that provides services for people with life limiting illness;

- Hold a relevant professional qualification and current registration to practice with the relevant regulatory/professional body where this is required by legislation (evidence of formal qualifications and registration to practice is required);
- Agree to comply with host site policies, including confidentiality, immunisation requirements and workplace health and safety policies;
- Have the approval of their employer to participate;
- If applicable, obtain mutual recognition of registration to practice from the relevant state/territory regulatory authority prior to undertaking the placement, (currently applies if applicant is approved to undertake a placement outside of their usual jurisdiction but does not work in a discipline governed by the Australian Health Practitioner Regulation Agency);
- Provide evidence of relevant insurances/work cover, as outlined in Section 9.2 of this Information Guide, to cover the period of the supervised clinical placement;
- Have obtained *Working with Children* or other appropriate authority as required by state/territory legislation and local institutional policies if undertaking placements which may involve interactions with children;
- Agree to having a 'criminal history check prior to participating in the program as required by state/territory legislation and/or local institutional policies; and
- Meet any other program requirements that may be specified by the PEPA Manager at a jurisdictional level.

Participation in the program is normally restricted to once only for all participants.

***Please note:***

*Priority is given to eligible applicants in their 'home' jurisdiction. Interstate placements may be considered in special circumstances in accordance with the National Coordination Team's policies and guidelines.*

*Current literature suggests that a person should not undertake a placement in palliative care if they have had a bereavement of a significant family member/friend in the last twelve months. This is because for some people working with people with a life-threatening illness may complicate or delay personal grieving responses and healing. If you are in this situation please consider how you will manage spending time in a palliative care setting.*

## **5.0 PROGRAM ACTIVITIES**

The program is underpinned by evidence-based educational strategies and culturally appropriate, collaborative and sustainable principles. The focus is on experiential and peer-based learning and strategies which encourage transfer of learning into practice.

### ***5.1 Standard PEPA Placements***

The supervised clinical placement is organised in each State and Territory by the local PEPA Manager, and is structured to provide experience in a variety of settings where palliative care is provided.

Normally a supervised clinical placement is between 2-5 days duration. The placement may be attended as a block of time or on separate days over a period of weeks. This will be negotiated by your PEPA Manager and host site, taking into consideration the information you provide on your application form.

Placements may be undertaken individually or with a small group. You can discuss these options with the local PEPA Manager.



*Placements are of an observational nature and as a participant you are supernumerary to the staffing establishment of the host site. You will be allocated a mentor and/or a supervisor in the organisation, with whom you will work closely throughout your placement. Additional resources to guide your learning experience may also be provided by the PEPA Manager.*

Participants are required to submit a short reflection report (max. 1 page) of learning to your local PEPA Manager on completion of the placement.

### **5.2 Reverse PEPA**

Reverse PEPA placements entail a specialist palliative care staff member travelling to the applicant's place of employment to facilitate learning. Reverse PEPA placements are negotiated with the PEPA Manager, and may be appropriate where the goal is to improve practice through tailored support or where learning opportunities can be arranged for multiple staff members. This placement type may be relevant:

- In rural or remote settings;
- In Aboriginal community settings; or
- Within residential aged care settings.

A Reverse PEPA placement is generally between 2-5 days duration.

### **5.3 Pre- and Post- Placement Activities**

Pre-placement preparation will assist you to identify appropriate learning objectives. It is essential for you to complete any preparatory learning activities as directed by your PEPA Manager. As a guide, pre-placement preparation will involve a commitment of approximately 2-3 hours. This includes:

- Completing your application form;
- Familiarising yourself with placement information sent to you by your PEPA Manager or host site;
- Returning a pre-placement evaluation survey;
- Setting preliminary learning objectives and completing any other suggested activities;
- Perusing your relevant learning guide and any additional readings; and
- Thinking about how you might disseminate information to colleagues on return to your workplace.

In order to reinforce learning and enhance the quality of palliative care provision, all participants are expected to:

- Review the program and personal objectives and reflect on the extent to which they were achieved and areas for further learning;
- Submit a short reflection report of learning to your local PEPA Manager (approx 1 page);
- Complete and submit the relevant PEPA post-placement evaluation;
- Implement a project or quality activity within three months of completion of the placement that promotes transfer of learning into your workplace or practice.

Certificates of participation in PEPA will be issued following evidence of completion of the post-placement activities.

PEPA aims to improve the networks between the health providers, and provide ongoing support for participants. You are encouraged to become involved in post-placement networks to promote ongoing professional development, support and communication across settings and disciplines. A range of post placement activities will also be available from time to time. It is recommended that each participant is involved in at least one post placement support activity.

## 6.0 PROGRAM EVALUATION

PEPA participants, their employers (if applicable) and either a mentor or host site manager are required to participate in PEPA evaluation activities.

The core question underpinning the PEPA evaluation is:

*How has PEPA increased your capacity and the capacity of your employing organisation to provide a palliative approach to the care of clients with life-limiting illness?*

### 6.1 Participant evaluation

Surveys will be sent to you for completion, either in hardcopy or electronically, prior to commencement and three months following placement.

### 6.2 Host site evaluation

Host sites will receive a survey form on a six monthly basis, for providing feedback about the placements that have occurred during that time.

### 6.3 Employer evaluation

Your employer will receive an evaluation form three months following your supervised clinical placement.

**All completed hardcopy evaluation surveys are to be returned to the PEPA Manager in your jurisdiction.**

## 7.0 CONTINUING PROFESSIONAL DEVELOPMENT POINTS

Participation in PEPA does not lead to a formal qualification or recognition as a 'specialist' in palliative care. However, the program is acknowledged and supported by a number of professional organisations who recognise participation in the program as an important professional development activity. Participating organisations and the respective continuing professional development points are as follows:

- **The Royal Australian College of General Practitioners (RACGP)** – Eligible RACGP members who undertake a PEPA placement of at least 10 hours may be eligible for 40 x Category 1 points\*. Furthermore, if you can demonstrate that you have implemented a system improvement/transfer of learning as part of your PEPA post placement workplace activities then you may be eligible for an additional 40 x Category 1 points\*.
- **The Australian College of Rural and Remote Medicine (ACRRM)** – ACRRM will allocate 30 ACRRM pdp points\* to GPs who have ACRRM membership and undertake a PEPA supervised clinical placement at a specialist palliative care service for a minimum of 15 hours. GPs with ACRRM membership are now also welcome to apply for additional pdp points for any pre- and post- placement activities that are undertaken in conjunction with their PEPA placement.
- **Royal College of Nursing Australia (RCNA)** – Attendance attracts 30 RCNA Continuing Nurse Education (CNE) points as part of RCNA's Life Long Learning Program (3LP)\*.

- **Royal Australian College of Physicians Fellows** – Participants in the RACP MyCPD Program may be eligible to claim credits for attending PEPA placements under ‘Category 4: Structured Learning Projects’ at 3 credits per hour\*.

To find out more about the process for claiming professional development points, please visit our website: [www.pepaeducation.com](http://www.pepaeducation.com) and click on the icon for your discipline. Participants from other professional associations will need to contact their organisation directly to determine whether participation in the program is recognised.

*\*Please note that the professional development points allocated are subject to change without notice and may increase or decrease as considered appropriate by the professional associations involved.*

## **8.0 RESPONSIBILITIES OF STAKEHOLDERS**

### ***8.1 Responsibilities of the participant***

Following acceptance into PEPA it is expected that you will:

- Be familiar with and comply with the requirements outlined in this *Information Guide* and the application form;
- Prepare for the supervised clinical placement by referring to the educational resources provided and identifying your individual learning needs for the program;
- Attend the placement as an observer and work closely with the allocated supervisor at all times;
- Consider how learning can be transferred into your current practice and work environment;
- Be sensitive to the work demands of the mentor;
- Abide by the policies and procedures of the host site;
- Reflect on your experience and critically appraise care provision of patients in your community;
- Undertake a quality improvement activity within your own workplace/practice within three months of completing your placement, to promote the transfer of learning from your placement into your own workplace;
- Complete and return all evaluation documents;
- Where appropriate, complete, copy and forward Quality Assurance and Continuing Professional Development/Professional Development Points documents to your local PEPA Manager or submit online;
- Notify the PEPA Manager in your State or Territory and comply with host site policy in the event of an injury or illness occurring while on placement; and
- Notify the PEPA Manager in your State or Territory if you are unable to attend your placement for any reason.

### ***8.2 Responsibilities of the participant’s employer (if applicable)***

Your manager/employer is required to:

- Be familiar with and comply with the requirements outlined in this *Information Guide* and the application form;
- Complete and sign the PEPA application form agreeing to the responsibilities described in this document;
- Agree to provide *Work Cover* insurance for their employees whilst they are participating in this program;
- Agree to provide professional indemnity insurance for their employees whilst they are participating in this program;

- Support you in undertaking the placement and transferring knowledge on return to the workplace; and
- Complete the evaluation survey and return it to the local PEPA Manager on completion of your supervised clinical placement.

### ***8.3 Responsibilities of the host site***

The host facility is responsible for:

- Ensuring there is a single person responsible to administrate arrangements;
- Ensuring that mentors are aware of the dates that they have been assigned as a participant;
- Providing mentors who have appropriate clinical teaching experience;
- Ensuring that the participant is supernumerary to the staffing of the service;
- Ensuring that the participant is aware of local policies and procedures relating to safety and security;
- Completing and returning the evaluation survey every six months; and
- Advising the local PEPA Manager of any issues or concerns during the placement.

### ***8.4 Responsibilities of the mentor***

It is expected that the mentor will:

- Be familiar and comply with the contents of this Information Guide and the application form;
- Be familiar with and comply with the contents of the PEPA Mentoring Guide, the PEPA for Aboriginal and Torres Strait Islander Health Workers Mentor Guidelines and Communications Guidelines and the appropriate PEPA Learning Guide for participants;
- Think about or plan their time and working arrangements for the placement period, including whether they may need to delegate some responsibility to colleagues intermittently or for the duration of the placement;
- Model desirable behaviours and attitudes and incorporate features of a 'best practice' PEPA placement as outlined in the PEPA Mentoring Guide;
- Provide feedback and discuss placement experiences, issues or any concerns that may arise;
- Provide an opportunity for the participant to discuss their planned post-placement workplace activity;
- Sign off on the participant's supervised clinical placement documentation, as appropriate, for allocation of continuing professional development points.

### ***8.5 Responsibilities of the PEPA manager***

It is expected that the PEPA manager will:

- Coordinate and implement the PEPA program;
- Resolve any procedural issues that may arise during the course of the program;
- Ensure the participant is placed in a suitable host facility to meet their learning needs.

## **9.0 MANAGEMENT OF RISKS**

### ***9.1 Risk identification and risk management***

It is the responsibility of all stakeholders to be aware of the potential risks associated with the program and to implement appropriate strategies to effectively manage these risks.

Placements are of an observational nature and as a participant you are supernumerary to the staffing establishment of the host site. You must work closely with your allocated supervisor at all times.

Applicants who do not fulfil the requirements for qualifications, licensing and insurances will not be accepted into the program. Applicants who have a current work cover claim may not be eligible to participate (please contact your local PEPA Manager for more information).

While undertaking a PEPA placement, participants will be exposed to a range of hazards which are normally encountered by health care professionals practicing in palliative care settings. Accordingly, all participants are subject to the standard Workplace Health and Safety Policies, Procedures and Regulations of the Host Site and their employing organisation. All participants are required to comply with these policies and procedures at all times.

Measures that participants can take to minimise these risks include (but are not limited to):

- Participate in orientation to the host site by your mentor;
- Familiarise yourself with the specific risks and hazards associated with the area to which you have been assigned;
- Familiarise yourself with the safety policies and procedures of the host site; and
- Recognise that if you are unwell during your time on placement it is your responsibility to raise this with your supervisor and cease work if either a patient(s) or your own health may be compromised.

### *9.2 Insurance*

All participants must be fully insured for the duration of their placement. For self-employed applicants and employed applicants, medical indemnity/ medical defence insurance and Work Cover must be current and cover you throughout your placement period.

## **10.0 FUNDING ARRANGEMENTS**

The Australian Government Department of Health and Ageing has provided funding through the National Palliative Care Program to support this program. For more information about the funding available to support your participation in the program, contact the PEPA Manager in your state or territory.

### *10.1 Employers*

Employers and General Practices will be reimbursed for some of the costs associated with backfilling staff participating in PEPA.

### *10.2 Participants*

PEPA has allocated funds to assist participants to attend a supervised clinical placement. This includes funding towards travel and accommodation costs for eligible participants.

### *10.3 Host Sites*

The generosity shown by many host sites in accepting clinicians on placement is acknowledged. Host sites will be provided with some funds to support the placements for participants.

#### **Please note:**

Claims for reimbursement are to be submitted to the PEPA Manager following completion of the placement. The PEPA manager will provide details about this process in the letter of offer. It is essential that you submit all required information within the timeframes specified.