

IS THE TRAINING FOR PALLIATIVE CARE NURSE PRESCRIBERS FIT FOR PRACTICE?

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BACKGROUND

Uganda is currently the only country where nurses can legally prescribe and is seen as the model country; nurses have been prescribing oral morphine in the country since 2004. Uganda prioritised palliative care under Essential Clinical Services in the *National Health Service Strategic Plan (2001–2005)*. It has made oral morphine freely available to those districts that have specialist palliative care nurses or clinical officers and has promoted morphine use down to the village level. Additionally, it has passed laws to allow nurse prescribing of morphine. Over 120 nurses have been trained and preparation for the role of prescribing is key to effective implementation. Training has been ongoing, yet no evaluation has been undertaken to see if practitioners are 'fit-for-purpose' with the related competencies for prescribing.

AIM

To evaluate whether the training enables nurses to assess and manage pain competently for patients with palliative care needs.

METHODOLOGY

An initial proposal was developed collaboratively by APCA, HAU, MPCU, PCAU and MoH with ethical approval being gained from HAUREC and UNCST and WHO approval of the protocol. The research was delivered as part of the Uganda Palliative Care Nurse Leadership Fellowship programme, with a team of Fellows undertaking the study.

A mixed methods approach was utilised which included:

- a consensus building process in order to identify the core competencies required for nurses to prescribe oral morphine;
- a review of the training curriculum and materials utilising a curriculum review framework;
- 17 semi-structured interviews with 12 nurses who had undertaken the training, 4 Palliative Care trainers and 1 Ministry of Health official.

The project team working on the research with support from their mentors.



RESULTS

a) Identification and agreement of core competencies

These were reviewed and agreed upon at an expert meeting attended by APCA, HAU, Kitovu, MoH, MPCU, PCAU with input from Makerere and Mulago Schools of Nursing, along with the UNMC. Core competencies were agreed in the domains of:

- Therapeutic Relationships
- Clinical Care
- Collaborative Practice
- Leadership
- Professional Practice

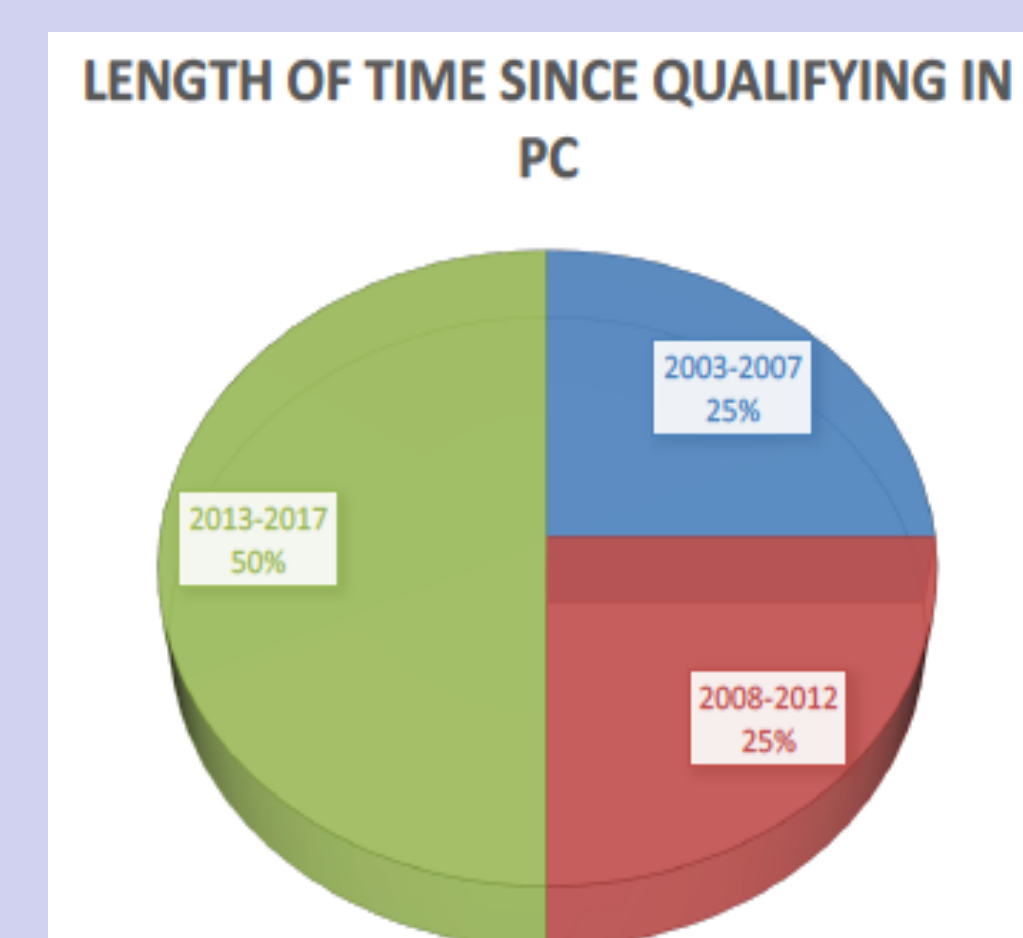
Agreement was also reached with regards to the different prescriber routes for Palliative Care in Uganda.

b) Review of the training curriculum

Review of the curriculum for the Diploma in Clinical Palliative Care (HAU) and Diploma in Palliative Care (Makerere) recognised that competencies were applicable for nurse prescribing with the identification of a small number of areas for development to strengthen the training.

c) Interviews with nurses, trainers and the MoH

75% of nurses interviewed had undertaken the DCPCN, 25% the BSc, 50% were trained prior to 2013, with 25% from both the Central and Eastern regions, 17% Northern and 33% Western. Overall themes identified from the interviews include: training; supervision and mentorship; competency; beliefs; and the systems.



Coding Framework

Overall Aims: How did the training prepare the nurses, what were the challenges faced, are they competent for the role?				
1. Training	2. Supervision & Mentorship	3. Competency	4. Beliefs	5. System
<ol style="list-style-type: none"> Practical (Clinical placement) Theory Helpful Scaling-up Recognition & responsibility Clarity 	<ol style="list-style-type: none"> During course Ongoing 	<ol style="list-style-type: none"> Assessment Disease specific Complexity Prescription (including legal) Children/elderly Management Advocacy Maintaining competence 	<ol style="list-style-type: none"> Patient and family Health professionals Participants 	<ol style="list-style-type: none"> Documentation Perception of role Referral pathways Isolation Collaboration and partnership Capacity Policy and frameworks

CONCLUSION

The findings of this evaluation will feed into the ongoing priorities for palliative care research in the region in particular to the role out of the training to Mulago School of Nursing. Ensuring nurses are competent and 'fit-for-purpose' is an essential component of any task-shifting. The evaluation has shown that the training, and therefore the nurses are 'fit-for-purpose' although the training can be strengthened further to support the overall scaling up of the preparation of nurse prescribers in Uganda.

