Needs Assessment for Education in Palliative Care

Neal Weisbrod, MD, Neurology Resident PGY-3

Abstract

Background: Symptom management and end-of-life care are issues that nearly all physicians deal with on a regular basis. While the reach of palliative care has been growing, the majority of these challenges still are faced by the treating physician, partially for continuity of care and partially due to a shortage of palliative care trained physicians. Improving education and mastery of palliative care skills in all physicians is an important path to improve patient care and reduce costs.

Methods: A survey was developed to address level of interest and comfort of physicians in a variety of palliative care-related topics and settings where they could be addressed in education. It posed the question of which educational environments were most effective to palliative care specialists and which educational environments were most desired to other physicians. The survey was emailed to residents, fellows, and faculty in the internal medicine, family medicine, geriatrics, palliative care, and neurology departments.

Results: There was a significant disparity between priorities to improve between palliative care physicians and other physicians. Generalists were much more likely due rate cultural differences and requests to hasten death as priorities to improve while palliative care specialists rated final days/hours of life, delivering bad news, advanced directives, and family meetings as priorities more than generalists.

Conclusions: There are significant differences in the educational priorities and preference of settings for education between palliative care specialists and other physicians. This highlights a need to tailor educational efforts to more closely align with physician’s goals and raises questions about what the optimal learning environment is.