

CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING  
UNITED KINGDOM AND IRELAND

**EDUCATION STANDARD FRAMEWORK**



CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING  
UK AND IRELAND ACTION GROUP

Edition
1st edition 2020, for review 2025

## CPCET UK AND IRELAND ACTION GROUP MEMBERS

Julie Bayliss	Nicola Fielding	Katrina McNamara
Tara Kerr-Elliott	Nicki Fitzmaurice	Lis Meates
Antonia Beringer	Suzie Gannon	Tendayi Moyo
Gilda Davis	Jo Griffiths	Sue Neilson
Hilary Cass	Anne Harris	Jayne Price
Lizzie Chambers	Sara Kirby	Claire Quinn
Abi Warren	Cari Malcolm	Duncan Randall
Doris Corkin	Linda Maynard	Rachel Setter
Liz Crighton	Renee McCulloch	Katie Stevens
Julia Downing	Maria McGill	Janet Sutherland
Helena Dunbar	Jayne Grant	Katie Warburton
Sue Dunlop	Debbie McGirr	

## INTRODUCTION

The UK All-Party Parliament Group on children who need palliative care<sup>1</sup> recommended that the guidance and competencies, proposed by numerous bodies and organisation, concerning children's palliative care needed to be aligned. In response to this recommendation the need for a revised competency framework in the UK<sup>2</sup> was recognised as despite recommendations<sup>1-4</sup> no educational framework has been established across UK and Ireland.

The Children's Palliative Care Education and Training United Kingdom and Ireland Action Group was formed in 2019 with the aim of agreeing core principles of practice and standardising children's palliative care learning.

Members comprised champions from Institutes of Higher Education, clinical practice and 3rd sector allied organisations. We would like to extend our thanks to Professor Myra Bluebond-Langner, True Colours Chair in Palliative Care for Children and Young People, for chairing the inaugural meeting discussion group and her ongoing involvement.

A graphic illustration of the inaugural meeting presents the key themes discussed (Figure 1). During a series of four meetings the education standard framework and self-audit tool was developed for use across all professional groups.



Figure 1 Graphic illustration of inaugural meeting discussion<sup>5</sup>

The framework is not intended to regulate or limit education programmes, but to provide a framework which we hope educationalists will want to use to coordinate and quality assure their programmes.

The framework extends across four levels:

- Public Health
- Universal
- Core
- Specialist.

The Public Health level addresses children’s palliative care as a

community public health issue. The Universal level highlights what everyone working in institutions or facilities providing care and support to children who have palliative care needs and their carers should know. Core was designed to provide education standard to be used by various professional groups who work directly with children with palliative and end of life care needs. This group may also work with children with various other health/ social and educational needs, but who regularly deliver direct care to children with palliative care needs. Finally, the Specialist level was designed to help those whose main work is the design, delivery and evaluation of children’s palliative and end of life care and who advise others on delivering care to these children and their carers (families).

These four levels can be seen as stand-alone or as incremental stages. People might require one or two levels for their role and work, or they may require all four if a specialist children's palliative care practitioner. The levels are designed to be accessed by people from different professional backgrounds, or none.

Educators are encouraged to design their courses using Gabbay et al. 2014<sup>6</sup> pyramid approach. This approach proposes that to improve practice, technical and soft skills have to be combined with learning as a team, each as a side of a pyramid, where each side has to be developed at the same time to build the pyramid. That over emphasis on one aspect will hinder the development of the pyramid, and the learning. Gabbay and his colleagues also point out

that the pyramid has to be built on a secure foundation, in this case a sound institutional commitment to children's palliative care with well-developed understanding and policies that are evident throughout the organisation.

We welcome feedback on the standards and are planning an evaluation of the framework and self-audit tool. Please email feedback to [s.j.neilson@bham.ac.uk](mailto:s.j.neilson@bham.ac.uk)

Sue Neilson, Katrina McNamara, Duncan Randall

July 2020

## References

1. Cooper, J. (2018). End of life care: strengthening choice. An inquiry report by the All-Party Parliamentary Group (APPG) for Children Who Need Palliative Care. Available at [https://www.togetherforshortlives.org.uk/wp-content/uploads/2018/10/Pol\\_Res\\_181019\\_APPG\\_Children\\_Who\\_Need\\_Palliative\\_Care\\_inquiry\\_report.pdf](https://www.togetherforshortlives.org.uk/wp-content/uploads/2018/10/Pol_Res_181019_APPG_Children_Who_Need_Palliative_Care_inquiry_report.pdf)
2. Downing, J., Ling, J., Benini, F., Payne, S., & Papadatou, D. (2013). Core competencies for education in Paediatric Palliative Care. Milano, Italia: European Association for Palliative Care.
3. Department of Health 2016 Providing high quality palliative care for our children. A strategy for children's palliative and end of life care 2016-26. Available from: <https://www.health-ni.gov.uk/publications/strategy-childrens-palliative-and-end-life-care.PDF>
4. European Association for Palliative Care (2007). IMPaCCT: standards for paediatric palliative care in Europe. *Eur Jour Pall Car*, 14(3), 109-14
5. Brodrick, L. (2019). Children's Palliative Care Education and Training Inaugural Steering Group Meeting: 10.1.19. <http://www.thinkbigpicture.co.uk>
6. Gabbay, J., Le May, A., Connell, C., & Klein, J. H. (2014). Skilled for improvement? Learning communities and the skills needed to improve care: An evaluative service development. London: Health Foundation.

## CONTENTS

CPCET UK and Ireland Action Group members .....	3
Introduction .....	4
References .....	6
How to use the Educational Standard Framework .....	8
PUBLIC HEALTH .....	10
UNIVERSAL .....	12
CORE .....	14
SPECIALIST .....	17
Appendix 1: CPCET Standard and Level Summary .....	20
Appendix 2: .CPCET Learning Outcome Summary .....	22
Resources .....	25

# CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING UNITED KINGDOM AND IRELAND EDUCATION STANDARD FRAMEWORK

## How to use the Education Standard Framework

There are four sections to the Framework depicting the expected levels of developing knowledge and skills: Public Health, Universal, Core and Specialist. We expect people to either access a single level, or to use a range of levels each building understanding skills and exploring values. The standards can be seen as stand-alone levels or as incremental so that a specialist might be expected to have met all the learning outcomes across all of the levels. We expect programme leaders to assess and verify participants have met the learning outcomes of prior levels (For example programme leaders for Core programs will verify students can demonstrate how they meet learning outcomes for Public Health and Universal levels) Programmes of learning should reflect Gabbay et al. 2014 'pyramid approach and include technical skills (perhaps in Identifying and managing symptoms), soft skills of values and attitudes (as seen in Sustaining self and well-being of others) and learning together (as in Communicating effectively and Providing multi-disciplinary holistic care in any care setting) in the belief that this approach will provide effective learning to improve quality of care.

1 Gabbay, J., Le May, A., Connell, C., & Klein, J. H. (2014). *Skilled for improvement? Learning communities and the skills needed to improve care: An evaluative service development*. London: Health Foundation.



Level	Level outcomes	Suggested local indicative content exemplars	Suggested assessment exemplars
<p><b>Evidence</b></p> <p>The Quality Assurance Agency for Higher Education (QAA)  <a href="https://www.qaa.ac.uk/quality-code/qualifications-and-credit-frameworks">https://www.qaa.ac.uk/quality-code/qualifications-and-credit-frameworks</a></p> <p>Scottish Credit and Qualifications Framework (SCQF)  <a href="https://scqf.org.uk/">https://scqf.org.uk/</a></p> <p>Quality and Qualifications Ireland (QQI)  <a href="https://www.qqi.ie/Articles/Pages/National-Framework-of-Qualifications-(NFQ).aspx">https://www.qqi.ie/Articles/Pages/National-Framework-of-Qualifications-(NFQ).aspx</a></p>	<p><b>Evidence</b></p> <p>The 4 learning outcomes have been developed from the identified Sources of information as detailed on each level.</p> <p><b>Blooms Taxonomy</b>  Building knowledge and skills:  <i>Knowledge</i>  <i>Comprehension</i>  <i>Application</i>  <i>Analysis</i>  <i>Synthesis</i>  <i>Evaluation</i></p> <p><b>References</b>  Anderson, L.W. &amp; Krathwohl, D.R. (2001). A taxonomy for teaching, learning, and assessing: A revision of Bloom's taxonomy of educational objectives. New York, NY: Longman.</p> <p>Bloom, B.S. (1956). Taxonomy of educational objectives: The classification of educational goals. New York, NY: Longmans, Green.</p>		<p><b>Evidence</b></p> <p>QAA UK Quality Code for Higher Education: Assessment  <a href="https://www.qaa.ac.uk/quality-code/advice-and-guidance/assessment">https://www.qaa.ac.uk/quality-code/advice-and-guidance/assessment</a></p>
<p>NB Throughout this document <i>Child</i> or <i>Children</i> refers to children and young people aged 0 - 18 years (including prenatal). Carers refers to the child's main carer, often parents or legal guardian.</p>			

# CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING UNITED KINGDOM AND IRELAND EDUCATION STANDARD FRAMEWORK

## PUBLIC HEALTH

In this level children's palliative care as a public health issue will be addressed. Aspects such as social attitude to death and dying in childhood and bereavement following a child death are explored. This would be expected to be across education, health and social care and involve other stakeholder groups concerned with children, their experience of childhood, learning and support of children, siblings, parents and other family members as well as communities affected by child death (e.g. school communities).

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
<p>Certificate QAA England Wales and N Ireland (FHEQ): 2-3</p> <p>Certificate Scotland SCQF: 7</p> <p>Ireland QQI: 6</p>	<p><b>1. Communicating effectively</b> 1.1 Gain an appreciation of both 'helpful' and 'unhelpful' patterns of communication with children and their carers who are living with life-limiting/life-threatening conditions and those who have experienced a bereavement.</p> <p><b>2. Working with others in and across various settings</b> 2.1 Discuss how to build and sustain compassionate communities and how all children can be included to experience a childhood alongside their peers.</p> <p><b>3. Identifying and managing symptoms</b> 3.1 Describe common reactions to health and wellness, stress and grieving and set out potential interventions/ strategies. 3.2 Reflect on own beliefs, attitudes and understanding of personal and community responses to death in childhood.</p> <p><b>4. Sustaining self-care and supporting the well-being of others</b> 4.1 Develop an awareness of and reflect on your own beliefs, attitudes, and values relating to child death in their communities.</p>	<p><b>1. Communicating effectively, for example:</b></p> <ul style="list-style-type: none"> <li>• Verbal and non-verbal communication relating to palliative care.</li> <li>• Cultural patterns of communication in communities around palliative and bereavement practices.</li> <li>• Introduction to communication aids and technologies to facilitate communication for children and their carers.</li> <li>• Effects of emotion, trauma and stress on verbal and non-verbal communication in palliative care.</li> </ul> <p><b>2. Working with others in and across various settings, for example:</b></p> <ul style="list-style-type: none"> <li>• Ethos of public health / what is public health / health in palliative care.</li> <li>• What being healthy means in palliative care / health promotion.</li> <li>• How society considers children who are palliative.</li> <li>• What are compassionate communities?</li> <li>• Diversity in children's palliative care and issues of access.</li> <li>• Health inequalities and effect on palliative care.</li> </ul>	<p>On-line MCQ with feedback.</p> <p>Reflection on a personal experience.</p> <p>Arts-based reflection of learning e.g. poster or poem.</p> <p>Group presentation.</p>

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
		<p><b>3. Identifying and managing symptoms, for examples:</b></p> <ul style="list-style-type: none"> <li>• Introduction to palliative care: what it is and why it matters, why children die.</li> <li>• What is death?</li> <li>• Explore how we explain death to ourselves, where our stories come from, which stories we prefer.</li> <li>• Raising awareness of most common symptoms and reactions in children, carers and communities.</li> </ul> <p><b>4. Sustaining self-care and supporting the well-being of others, for example:</b></p> <ul style="list-style-type: none"> <li>• Self-care: basic mental health / resilience / coping strategies.</li> <li>• How people in communities' support each other.</li> <li>• Cultural self-care practices.</li> <li>• Remembrance and connection to deceased.</li> <li>• Cultural bereavement practices.</li> </ul>	
Sources of evidence <sup>1, 2, 3, 4</sup> and guidance <sup>1,2,3,4,5,6</sup>			

# CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING UNITED KINGDOM AND IRELAND EDUCATION STANDARD FRAMEWORK

## UNIVERSAL

In this level the needs will be addressed of all people working in institutions or facilities which provide care and support to children and their carers. It addresses what any person working in such environments is likely to need to understand about children's palliative care. This includes clinical and non-clinical staff. Where children's palliative care is everyone in the workplaces business.

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
<p>Certificate QAA England Wales and N Ireland (FHEQ): 2-4</p> <p>Certificate Scotland SCQF: 7</p> <p>Ireland QQI: 6</p>	<p><b>1. Communicating effectively</b> 1.2 Identify positive cultures of communication and approaches to use when communicating with people who are distressed or grieving.</p> <p><b>2. Working with others in and across various settings</b> 2.2 Discuss principles of safeguarding children with palliative care needs.</p> <p>2.3 Identify own organisations policies and practices which support, facilitate and sustain palliative and end of life care for children and their carers</p> <p><b>3. Identifying and managing symptoms</b> 3.3 Describe common reactions and mental health issues and strategies to support wellbeing for children and their carers who are living with life-limiting/life-threatening conditions and the bereaved.</p> <p>3.4 Recognise common symptoms that children and their carers who are living with life-limiting/ life-threatening conditions and the bereaved might experience and set out potential interventions.</p>	<p><b>1. Communicating effectively, for example:</b></p> <ul style="list-style-type: none"> <li>• Self-awareness of patterns of verbal and non-verbal communication and effect on children and carers/ professionals in palliative care.</li> <li>• Recognising patterns of distress communication including affective domain.</li> <li>• Use of communication aids and technologies to facilitate communication for children and their carers.</li> </ul> <p><b>2. Working with others in and across various settings, for example:</b></p> <ul style="list-style-type: none"> <li>• Specific issues of safeguarding children receiving palliative care and vulnerable adults.</li> <li>• Own institutions policies and procedures that support palliative care.</li> <li>• Vision, aims and objectives/ performance indicators of own institution that relate to children's palliative care.</li> <li>• How organisations and institutions sustain and develop bereavement practices and services.</li> </ul>	<p>On-line MCQ with feedback.</p> <p>Group presentation.</p> <p>Arts-based reflection of learning e.g. poster or poem.</p>

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
	<p><b>4. Sustaining self-care and supporting the well-being of others</b></p> <p>4.2 Explore strategies designed to manage stress and promote coping and wellbeing for self.</p> <p>4.3 Identify how own behaviour and practices influence others who are distressed and or grieving.</p>	<p><b>3. Identifying and managing symptoms, for examples:</b></p> <ul style="list-style-type: none"> <li>• Awareness of referral routes and resources.</li> <li>• Introduction to common physical symptoms.</li> <li>• Introduction to common mental health issues and reactions in both children and carers living with palliative care needs.</li> <li>• Ability to promote a positive therapeutic environment.</li> <li>• Awareness of common bereavement reactions and referral routes and resources.</li> <li>• Identify persistent complex or prolonged reactions to bereavements.</li> <li>• Identifying resources and referral routes for end of life emergencies.</li> </ul> <p><b>4. Sustaining self-care and supporting the well-being of others, for example:</b></p> <ul style="list-style-type: none"> <li>• How we care for ourselves, resilience, emotional fatigue, burnout.</li> <li>• Role of care givers at end of life/after death.</li> <li>• Child and family centred care, professional boundaries and therapeutic relationships.</li> <li>• Models of grief and bereavement theory.</li> <li>• Understanding differences in and between religious and cultural communities.</li> <li>• Awareness of spirituality in self and others.</li> </ul>	
<p>Sources of evidence <sup>1, 2, 3, 4</sup> and guidance <sup>7,8,9,10,11</sup></p>			

# CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING UNITED KINGDOM AND IRELAND EDUCATION STANDARD FRAMEWORK

## CORE

In this level the focus will be on the learning for people who deliver care to children and their carers. It includes everyone who delivers care to children in education, social and health care who might encounter a child living with a life limiting/threatening condition and or the child's carers (family and communities). The core programmes for sectors of health, education and social care might be different to address the needs of children accessing these types of care. In healthcare this level should include care of the dying child and their carers as well as supporting people with loss and bereavement following a child's death.

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
<p>Certificate QAA England Wales and N Ireland (FHEQ): 4 - 6</p> <p>Certificate Scotland SCQF: 8 - 9</p> <p>Ireland QQI: 7 - 8</p>	<p><b>1. Communicating effectively</b> 1.3 Develop insight into positive cultures and patterns of communication when delivering “bad or unwanted” news/information.</p> <p>1.4 Discuss the design, delivery and evaluation of play for children living with life-limiting/life-threatening conditions.</p> <p><b>2. Working with others in and across various settings</b> 2.4 Analyse the practice and approaches to identifying palliative and end of life care needs of children and their carers.</p> <p>2.5 Identify and reflect on your own role within the team delivering palliative and end of life care.</p> <p>2.6 Discuss professional roles and responsibilities in a multi-disciplinary (or inter-professional) team delivering children's palliative and end of life care.</p> <p>2.7 Explain the legal and practical requirements related to the care of a child's body after death.</p>	<p><b>1. Communicating effectively, for example:</b></p> <ul style="list-style-type: none"> <li>• Breaking bad news, difficult conversations frameworks and strategies.</li> <li>• Self-awareness of verbal and non-verbal communication during difficult conversations/ breaking bad news.</li> <li>• Use of communication aids and technologies to facilitate complex and difficult conversations with children and their carers about palliative and end of life care needs.</li> <li>• Play needs for children living with palliative and end of life care needs.</li> <li>• Importance of play and distraction as a communication aid.</li> </ul> <p><b>2. Working with others in and across various settings, for example:</b></p> <ul style="list-style-type: none"> <li>• Children and carer's palliative and end of life care needs.</li> <li>• Positive discussion of needs with children and their carers.</li> <li>• Legal and ethical issues in palliate care.</li> <li>• Understanding advocacy for children and for carers in palliative care contexts.</li> <li>• Working with other professional groups in own organisation and in other settings.</li> </ul>	<p>Objective Structured Clinical Examination (OSCI).</p> <p>Assignment: word count 2000-3000 words.</p> <p>On-line MCQ with feedback.</p> <p>Group presentation.</p>

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
	<p><b>3. Identifying and managing symptoms</b></p> <p>3.5 Assess, plan and implement effective symptom management approaches for a number of common symptoms encountered in children’s palliative and end of life care.</p> <p>3.6 Analyse and evaluate the assessment of care and the evidence base of symptom management to include a number of common symptoms encountered in children’s palliative and end of life care.</p> <p>3.7 Discuss the principles and practice of caring for a child’s body after death and supporting those who are bereaved.</p> <p><b>4. Sustaining self-care and supporting the well-being of others</b></p> <p>4.4 Examine children’s understanding and reactions to living with life-limiting/life-threatening conditions and dying and death in childhood.</p> <p>4.5 Reflect on and discuss own experiences of delivering and interactions with those receiving care and the team delivering care.</p>	<ul style="list-style-type: none"> <li>• Team dynamics and own role in delivering palliative care.</li> <li>• Policies and procedures to deal with a child death including care of the body after death.</li> <li>• Legal aspects of caring for a child during and following death in country/state/territory.</li> </ul> <p><b>3. Identifying and managing symptoms, for examples:</b></p> <ul style="list-style-type: none"> <li>• Assessment of palliative and end of life care needs and issues.</li> <li>• Frameworks and strategies for assessing and planning palliative and end of life care</li> <li>• Advance care planning.</li> <li>• Assessment and management of distressing symptoms.</li> <li>• Escalation of treatment including referral routes and resources.</li> <li>• Pain assessment and management.</li> <li>• Risks and burdens of treatments options.</li> <li>• Negotiation of Treatment goals, and end of life decisions, discontinuing life sustaining treatment.</li> <li>• Parallel planning.</li> <li>• Care when death is imminent.</li> <li>• Preferred place of care and how we can facilitate this.</li> <li>• Use of integrative therapies, multi-modal approach to symptom management.</li> <li>• Physical care of the body after death.</li> <li>• Strategies for managing common bereavement reactions and referral routes and resources.</li> <li>• Role of care givers/healthcare professionals (e.g. attending funerals).</li> </ul>	

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
		<p><b>4. Sustaining self-care and supporting the well-being of others, for example:</b></p> <ul style="list-style-type: none"> <li>• Recognising and addressing burn out in ourselves and others.</li> <li>• Spiritual care for child and family.</li> <li>• Evaluating therapeutic relationships and professional boundaries including strategies to promote positive relationships and safe delivery of care.</li> <li>• Dignity in delivering palliative and end of life care.</li> <li>• Apply strategies to deal with common grief and bereavement reactions.</li> </ul>	
<p>Sources of evidence <sup>1, 2, 3, 4</sup> and guidance <sup>7,8,9,10,11</sup></p>			



# CHILDREN'S PALLIATIVE CARE EDUCATION AND TRAINING UNITED KINGDOM AND IRELAND EDUCATION STANDARD FRAMEWORK

## SPECIALIST

In this level leadership and management of palliative and end of life care for children is the focus. It includes clinical, research, education and management leadership. As well as addressing the needs of children and carers with complex and or multiple palliative care needs it would prepare practitioners to be a resource for those learning and delivering care at the other levels. This level includes learning to deliver end of life care in complex situations or where symptom management is challenging.

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
Degree/Masters  QAA England Wales and N Ireland (FHEQ): 6-10  Scotland SCQF: 9-12  Ireland QQI: 8-9	<p><b>1. Communicating effectively</b>            1.5 Analyse cultures and patterns of communication in managing complex issues and in children's palliative and end of life care.</p> <p><b>2. Working with others in and across various settings</b>            2.8 Critically evaluate policy and practices of team working and suggest ways forward to improve team cohesion and performance.</p> <p>2.9 Engage in critical dialogue of leadership for quality improvement and for equality of access in children's palliative and end of life care.</p> <p><b>3. Identifying and managing symptoms</b>            3.8 Assess, plan and implement for complex symptom management including the management of different interacting symptoms encountered in children's palliative and end of life care.</p> <p>3.9 Analyse and evaluate complex symptom management including the management of different interacting symptoms.</p> <p>3.10 Critically evaluate the evidence base for the management of complex/interacting symptoms.</p>	<p><b>1. Communicating effectively, for example:</b></p> <ul style="list-style-type: none"> <li>• Effective consultation models.</li> <li>• Leading teams in delivering breaking bad news, or difficult conversations and supporting staff to communicate in challenging situations.</li> <li>• Influencing policies and practices to support positive cultures of communication.</li> <li>• Educational theories and strategies to help people learn positive communication.</li> <li>• Demonstrate leading learning on communication in teams delivering palliative and end of life care.</li> <li>• Evaluate practices that facilitate communication in complex situations including communication aids and technologies.</li> </ul> <p><b>2. Working with others in and across various settings, for example:</b></p> <ul style="list-style-type: none"> <li>• Develop and evaluate collaborative team working in own organisation and across settings.</li> <li>• Demonstrate effective leadership and management.</li> <li>• Analyse and critique the application of governmental policy and practices in children's palliative care.</li> <li>• Health economics as it affects children's palliative and end of life care.</li> </ul>	<p>Objective Structured Clinical Examination (OSCI).</p> <p>Communication assessment: role play, video capture, peer review.</p> <p>Assignment: word count 2000-3000 words.</p> <p>Portfolio of clinical experience with critical reflection.</p> <p>Literature review.</p> <p>Individual presentation.</p>

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
	<p><b>4. Sustaining self-care and supporting the well-being of others</b></p> <p>4.6 Analyse and evaluate their role, both as an individual and a professional, in self-care and supporting others to manage reactions to complex and or multiple interacting issues contexts.</p> <p>4.7 Demonstrates the understanding, skills and attitudes to design, deliver and evaluate learning opportunities for others.</p>	<ul style="list-style-type: none"> <li>• Contribution to development of policies and guidance at local, regional and national/ international levels.</li> <li>• Evaluate parallel planning and negotiation of care with children, carers and other professional groups.</li> <li>• Design and delivery of improvement plans for palliative care.</li> <li>• Consider inspirational and transformative leadership styles and strategies.</li> </ul> <p><b>3. Identifying and managing symptoms, for examples:</b></p> <ul style="list-style-type: none"> <li>• Assessment and leading the management of distressing symptoms to include complex symptoms.</li> <li>• Planning for and management of end of life emergencies.</li> <li>• Planning and managing complex care (e.g. compassionate extubation in the community) facilitating care and support in the community.</li> <li>• Interacting and complex symptoms.</li> <li>• Assessing and leading management of opioid selection, rotation and palliative sedation.</li> <li>• Evaluating the management of complex cases and facilitating improvement to palliative care provision.</li> <li>• Evaluating and managing symptoms in teams including managed networks.</li> <li>• Case management strategies and practices.</li> </ul>	

Level	Learning Outcome	Suggested local indicative content exemplars	Suggested assessment exemplars
		<p><b>4. Sustaining self-care and supporting the well-being of others, for example:</b></p> <ul style="list-style-type: none"> <li>• Leading the promotion of self-care and care of others in teams.</li> <li>• Designing, delivering and evaluating learning of others in self-care and care of others.</li> <li>• Facilitating learning opportunities.</li> <li>• Working with communities to promote compassionate communities.</li> <li>• Designing, delivering and evaluation interventions with faith leaders.</li> </ul>	
<p>Sources of evidence <sup>1, 2, 3, 4</sup> and guidance <sup>8,9,10,11,12,13,14,15</sup></p>			

## APPENDIX

### CPCET STANDARD AND LEVEL SUMMARY

Framework Level	Description	Academic Level
<b>Public Health</b>	In this level children's palliative care as a public health issue will be addressed. Aspects such as social attitude to death and dying in childhood and bereavement following a child death are explored. This would be expected to be across education, health and social care and involve other stakeholder groups concerned with children, their experience of childhood, learning and support of children, siblings, parents and other family members as well as communities affected by child death (e.g. school communities).	<p style="text-align: center;"><b>Certificate</b></p> <p>QAA England Wales and N Ireland (FHEQ): 2-3</p> <p>Certificate Scotland SCQF: 7</p> <p>Ireland QQI: 6</p>
<b>Universal</b>	In this level the needs will be addressed of all people working in institutions or facilities which provide care and support to children and their carers. It addresses what any person working in such environments is likely to need to understand about children's palliative care. This includes clinical and non-clinical staff. Where children's palliative care is everyone in the workplaces business.	<p style="text-align: center;"><b>Certificate</b></p> <p>QAA England Wales and N Ireland (FHEQ): 2-4</p> <p>Certificate Scotland SCQF: 7</p> <p>Ireland QQI: 6</p>

Framework Level	Description	Academic Level
<b>Core</b>	<p>In this level the focus will be on the learning for people who deliver care to children and their carers. It includes everyone who delivers care to children in education, social and health care who might encounter a child living with a life limiting/threatening condition and or the child's carers (family and communities). The core programmes for sectors of health, education and social care might be different to address the needs of children accessing these types of care. In healthcare this level should include care of the dying child and their carers as well as supporting people with loss and bereavement following a child's death.</p>	<p><b>Diploma/Degree</b>  QAA England  Wales and N Ireland  (FHEQ):  4-6</p> <p>Scotland SCQF:  8-9</p> <p>Ireland QQI:  7-8</p>
<b>Specialist</b>	<p>In this level leadership and management of palliative and end of life care for children is the focus. It includes clinical, research, education and management leadership. As well as addressing the needs of children and carers with complex and or multiple palliative care needs it would prepare practitioners to be a resource for those learning and delivering care at the other levels. This level includes learning to deliver end of life care in complex situations or where symptom management is challenging.</p>	<p><b>Degree/Masters</b>  QAA England  Wales and N Ireland  (FHEQ):  6-10</p> <p>Scotland SCQF:  9-12</p> <p>Ireland QQI:  8-9</p>

## CPCET LEARNING OUTCOME SUMMARY

LEARNING OUTCOME	PUBLIC HEALTH	UNIVERSAL	CORE	SPECIALIST
1. Communicating effectively.	1.1 Gain an appreciation of both 'helpful' and 'unhelpful' patterns of communication with children and their carers who are living with life limiting/life-threatening conditions and those who have experienced a bereavement.	1.2 Identify positive cultures of communication and approaches to use when communicating with people who are distressed or grieving.	1.3 Develop insight into positive cultures and patterns of communication when delivering "bad or unwanted" news/ information.  1.4 Discuss the design, delivery and evaluation of play for children living with life-limiting/life-threatening conditions.	1.5 Analyse cultures and patterns of communication in managing complex issues and in children's palliative and end of life care.
2. Working with others in and across various settings.	2.1 Discuss how to build and sustain compassionate communities and how all children can be included to experience a childhood alongside their peers.	2.2 Discuss principles of safeguarding children with palliative care needs.  2.3 Identify own organisations policies and practices which support, facilitate and sustain palliative and end of life care for children and their carers.	2.4 Analyse the practice and approaches to identifying palliative and end of life care needs of children and their carers.  2.5 Identify and reflect on your own role within the team delivering palliative and end of life care.  2.6 Discuss professional roles and responsibilities in a multi-disciplinary (or inter-professional) team delivering children's palliative and end of life care.	2.8 Critically evaluate policy and practices of team working and suggest ways forward to improve team cohesion and performance.  2.9 Engage in critical dialogue of leadership for quality improvement and for equality of access in children's palliative and end of life care.

LEARNING OUTCOME	PUBLIC HEALTH	UNIVERSAL	CORE	SPECIALIST
			2.7 Explain the legal and practical requirements related to the care of a child's body after death.	
3. Identifying and managing symptoms	<p>3.1 Describe common reactions to health and wellness, stress and grieving and set out potential interventions/ strategies.</p> <p>3.2 Reflect on own beliefs, attitudes and understanding of personal and community responses to death in childhood.</p>	<p>3.3 Describe common reactions and mental health issues and strategies to support wellbeing for children and their carers who are living with life limiting/life-threatening conditions and the bereaved.</p> <p>3.4 Recognise and list common symptoms that children and their carers who are living with life-limiting/life-threatening conditions and the bereaved might experience and set out potential interventions.</p>	<p>3.5 Assess, plan and implement effective symptom management approaches for a number of common symptoms encountered in children's palliative and end of life care.</p> <p>3.6 Analyse and evaluate the assessment of care and the evidence base of symptom management to include a number of common symptoms encountered in children's palliative and end of life care.</p> <p>3.7 Discuss the principles and practice of caring for a child's body after death and supporting those who are bereaved.</p>	<p>3.8 Assess, plan and implement for complex symptom management including the management of different interacting symptoms encountered in children's palliative and end of life care.</p> <p>3.9 Analyse and evaluate complex symptom management including the management of different interacting symptoms.</p> <p>3.10 Critically evaluate the evidence base for the management of complex/interacting symptoms.</p>

LEARNING OUTCOME	PUBLIC HEALTH	UNIVERSAL	CORE	SPECIALIST
4. Sustaining self-care and supporting the well-being of others.	4.1 Develop an awareness of and reflect on their own beliefs, attitudes, values relating to child death in their communities.	4.2 Explore strategies designed to manage stress and promote coping and wellbeing for self.  4.3 Identify how own behaviour and practices influence others who are distressed and or grieving.	4.4 Examine children’s understanding and reactions to living with life limiting/life-threatening conditions and dying and death in childhood.  4.5 Reflect on and discuss own experiences of delivering and interactions with those receiving care and the team delivering care.	4.6 Analyse and evaluate your role, both as an individual and a professional, in self-care and supporting others to manage reactions to complex and or multiple interacting issues contexts.  4.7 Demonstrates the understanding, skills and attitudes to design, deliver and evaluate learning opportunities for others.



## RESOURCES

### EVIDENCE

1. Quality and Qualifications Ireland <https://nfq.qqi.ie/>
2. The Quality Assurance Agency for Higher Education <https://www.qaa.ac.uk/>
3. Royal College of Nursing competencies 1-4 <https://www.rcn.org.uk/professional-development/publications/pub-007033>
4. Scottish Credit and Qualifications Framework <https://scqf.org.uk/>

### GUIDANCE

1. CareSearch AUS (2018). Public Health Palliative Care (Health promoting palliative care). Available at: <https://www.caresearch.com.au/caresearch/tabid/1477/Default.aspx>
2. Haraldsson, E., Clark, P. and Murray, S.A. (2010). Health-Promoting Palliative Care arrives in Scotland. *European Journal of Palliative Care* 17 (3), pp.130-132.
3. Kellehear, A. (2013). Compassionate communities: End of life care as everyone's responsibility. *Quarterly Journal of Medicine (UK)* 106, 12, pp 1071-1076.
4. Public Health Palliative Care International. Available at: <http://phpci.info/>
5. Sallnow, L. Kumar, S. and Kellehear, A. (eds) (2012). *International Perspectives in Public Health and Palliative Care*. Abingdon, Routledge.
6. Conway, S. (2008). 'Public health and palliative care – principles into practice?' *Critical Public Health*, 18 (3), pp. 405-415.
7. Health Education England (HEE) End of Life Care Core Skills Education and Training Framework. Available at: <https://www.eolc.co.uk/uploads/EoLC-Core-Skills-Training-Framework.pdf>
8. International Children's Palliative Care (ICPCN) Network eLearning programme. Available at: <http://www.icpcn.org/icpcns-elearning-programme/>
9. Palliative and End of Life Care A framework to support the learning and development needs of the health and social service workforce in Scotland. Available at: <https://learn.nes.nhs.scot/2450/palliative-and-end-of-life-care-enriching-and-improving-experience>
10. Palliative Care Competence Framework 2014 Ireland. Available at: <https://www.hse.ie/eng/services/publications/clinical-strategy-and-programmes/palliative-care-framework-document.pdf>

11. Together for Short Lives Core Curriculum in Children's Palliative Care: Draft August 2012 V 0. Available at: <https://www.togetherforshortlives.org.uk>
12. Core competencies for Education in Paediatric Palliative Care. Downing J, Ling J, Benini F, Payne S, Papadatou D. Core Competencies for Education in Paediatric Palliative Care – Report of the EAPC Children's Palliative Care Education Taskforce. Milan: EAPC, 2013.
13. NW Childrens Pall Care Network Palliative Care Education Framework. Available at: <http://www.childrenspalliativenw.org.uk/palliative-care-education-framework/>
14. RCPCH Level 3 Generic Syllabus Paediatrics Specialty Syllabus. Available at: [https://www.rcpch.ac.uk/sites/default/files/2018-03/rcpch\\_progress\\_curriculum\\_level\\_3\\_generic\\_syllabus\\_for\\_use\\_from\\_1\\_aug\\_2018.pdf](https://www.rcpch.ac.uk/sites/default/files/2018-03/rcpch_progress_curriculum_level_3_generic_syllabus_for_use_from_1_aug_2018.pdf)
15. RCPCH Paediatric Palliative Medicine Level 3 Paediatrics Sub-specialty Syllabus. [https://www.rcpch.ac.uk/sites/default/files/2018-04/rcpch\\_progress\\_curriculum\\_report\\_palliative\\_medicine\\_updated2018.pdf](https://www.rcpch.ac.uk/sites/default/files/2018-04/rcpch_progress_curriculum_report_palliative_medicine_updated2018.pdf)