



Learning needs of experienced nurses: A palliative care perspective.

Presented by Peter Cleasby Western Sydney University Doctoral Candidate



Team thanks

Prof Nathan Wilson WSU

Dr Fung Koo WSU

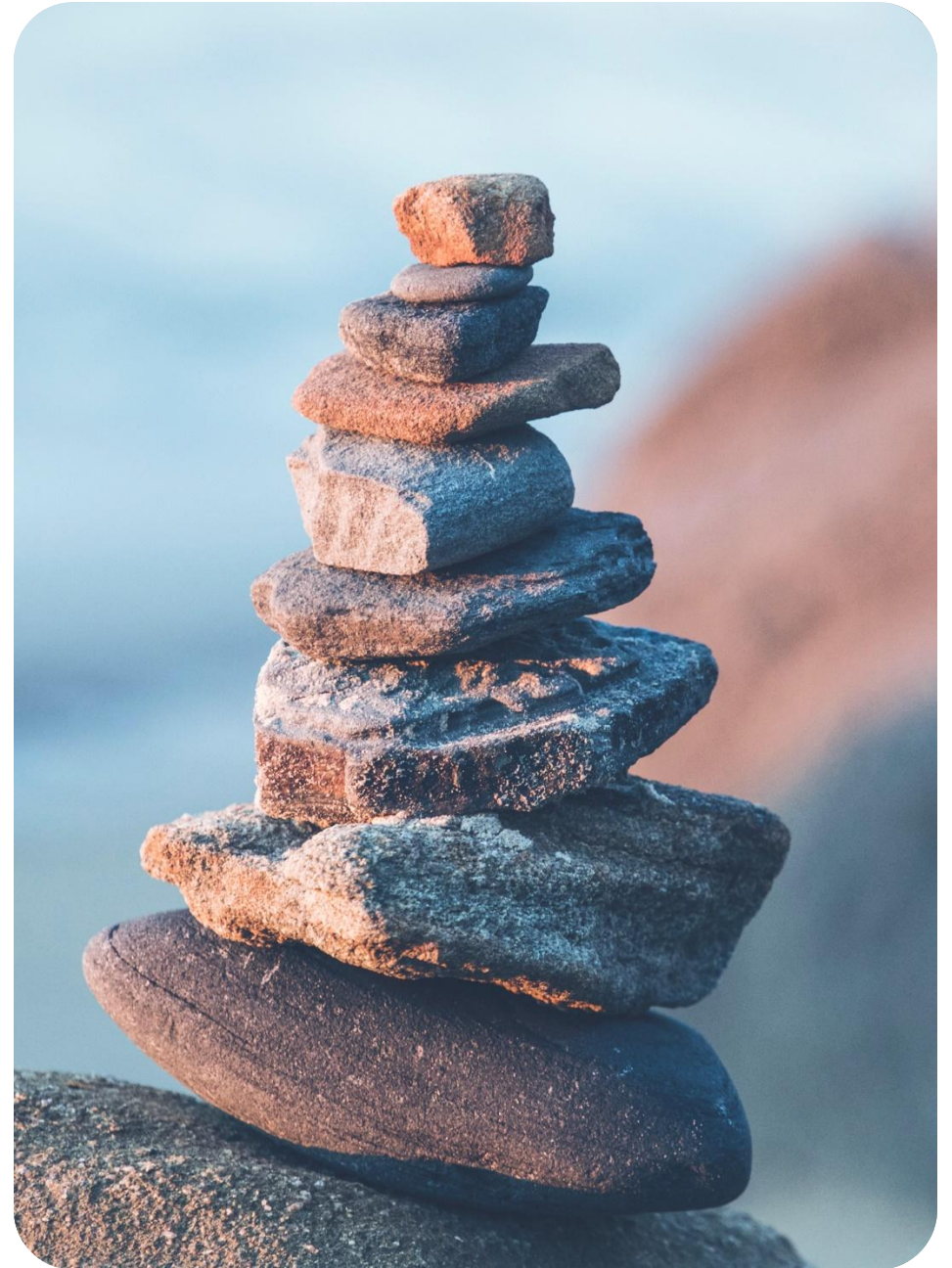
Adj. Assoc. Prof. John Rosenberg
UniSC

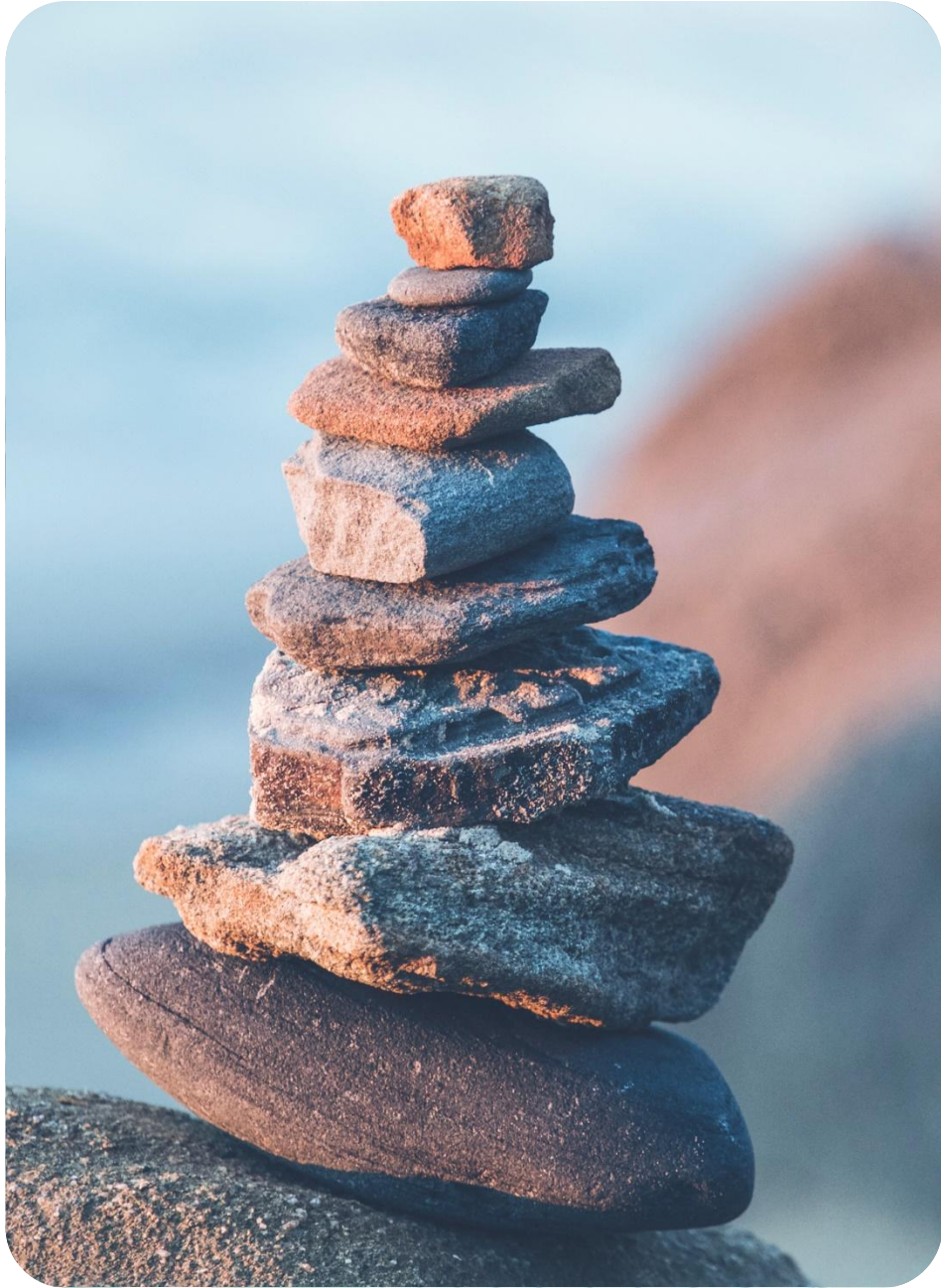
Why

Ongoing CPD is a regulatory requirement and a professional characteristic.

As specialty clinician experience is acquired, and competency addressed, how do learning needs change?

This study sought to contribute to an understanding of role related learning needs and CPD decisions of experienced palliative care RNs in Australia.





How

Context

This study forms part of an exploratory mixed methods investigation .

Recruitment

Peak bodies disseminated information about the study.

Inclusion criteria

Registered nurse working in a palliative care (PC) role for a PC service or in a PC specific care location, or be in an end of life care specific position.

A minimum of two full time equivalent years of experience in specific PC or end of life care nursing roles.

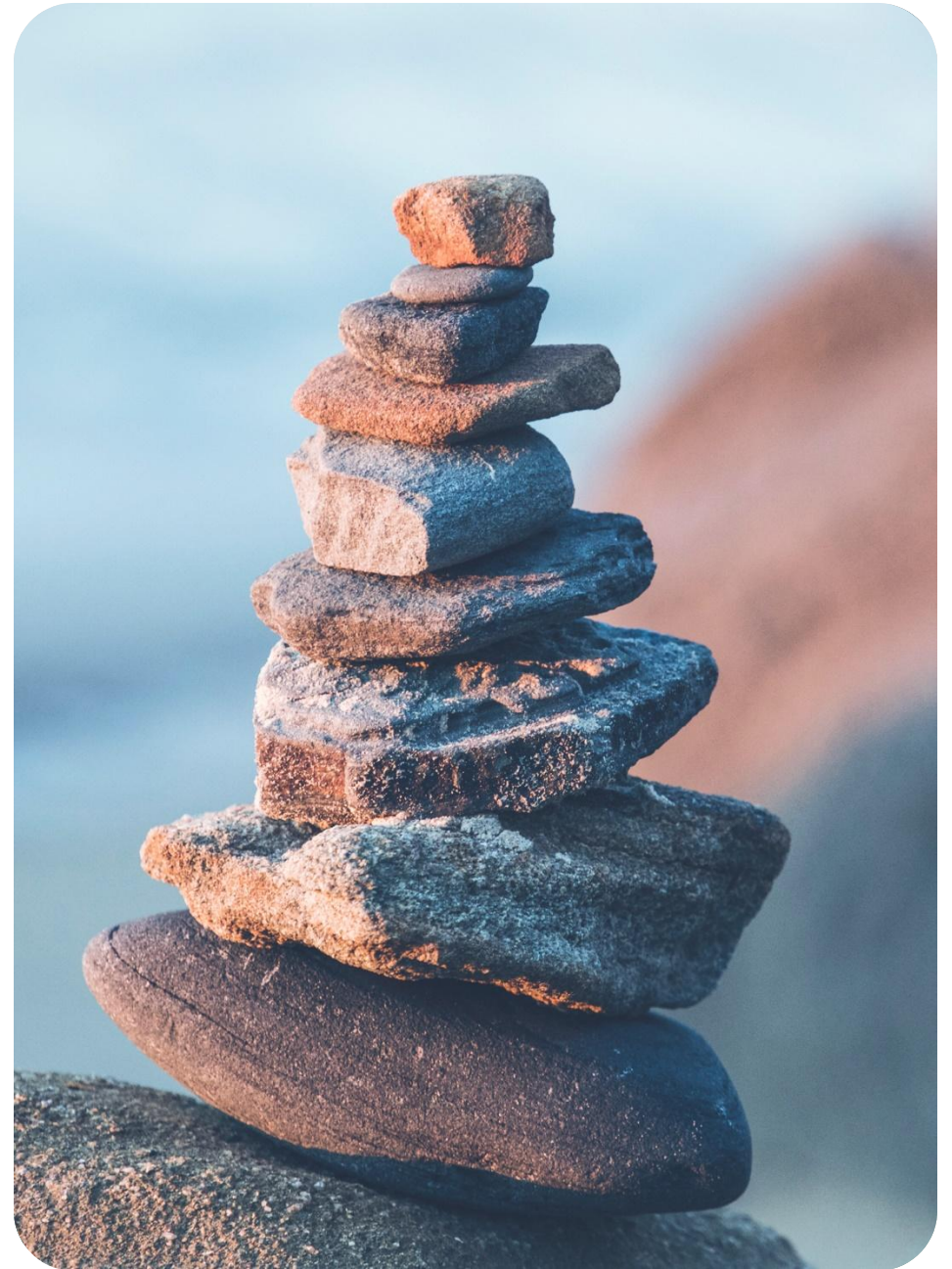
Engagement

Thirteen (13) palliative care nurses were interviewed individually via computer mediated conference.

Specialty experience ranged from 2 years to over 20 years.

Role locations included community and hospital based, plus area / state level responsibilities.

A reflexive thematic analysis was undertaken (Braun & Clarke 2022) utilizing NVivo software .

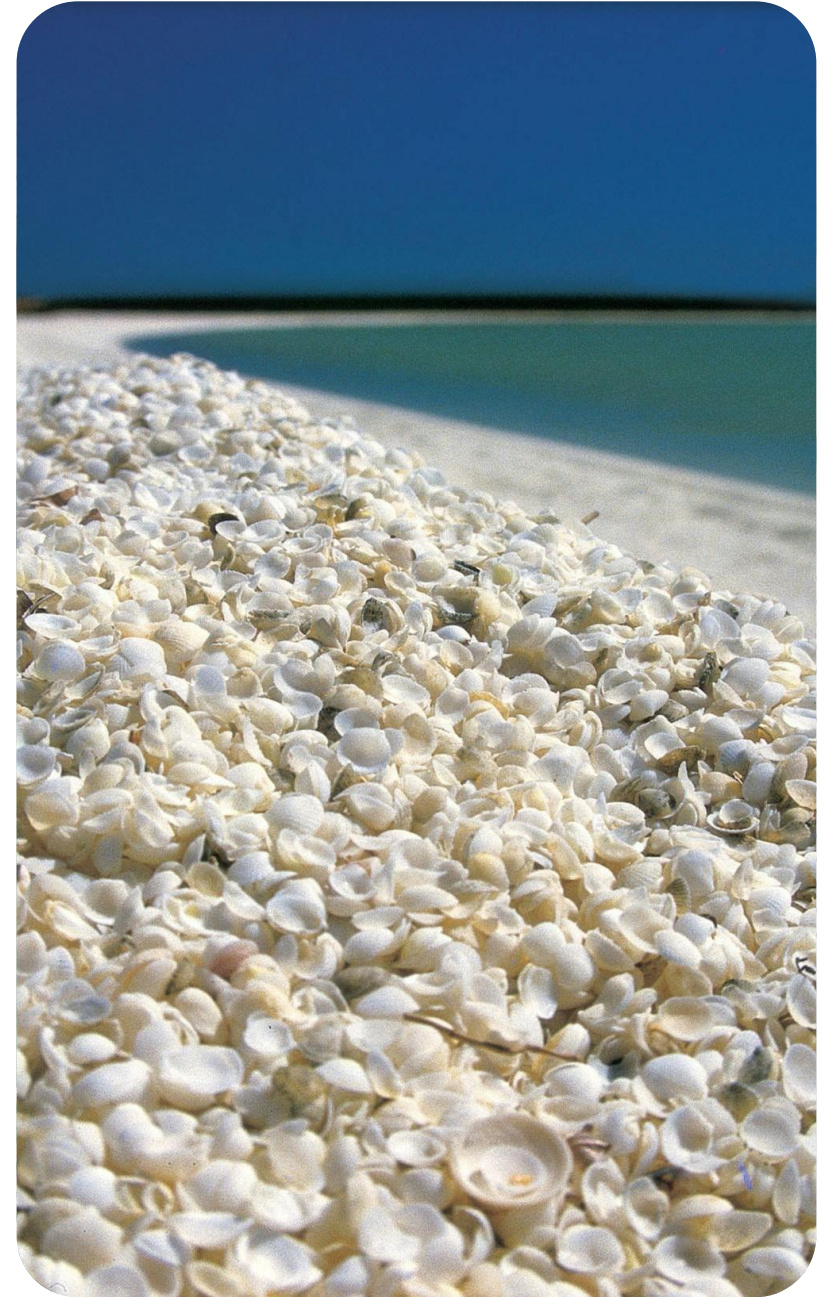


“I remember having a great sense of being a lot more prepared and knowledgeable and skilled than I was, so I felt really confident, you know. Is it the Kruger effect where you start quite confident, and then you realize what you don't know? And it was a huge reckoning pretty early on.”

– Nurse Consultant, 20 years PCN experience

Learning needs identified at commencement in a specialist role.

- Learning good presentation skills was huge learning curve for me really as a new CNC.
- I think that the biggest, the hardest part that I've needed to navigate is politics. Understanding the political landscape.... So, you know, understanding the relationships, understanding the unspoken of rules, and, you know, kind of like a culture of where I work.
- I wish that I had known how challenging it can be to navigate having (end of life) conversations.... with people of culturally and linguistically diverse backgrounds.



Activities to meet learning
needs (CPD)



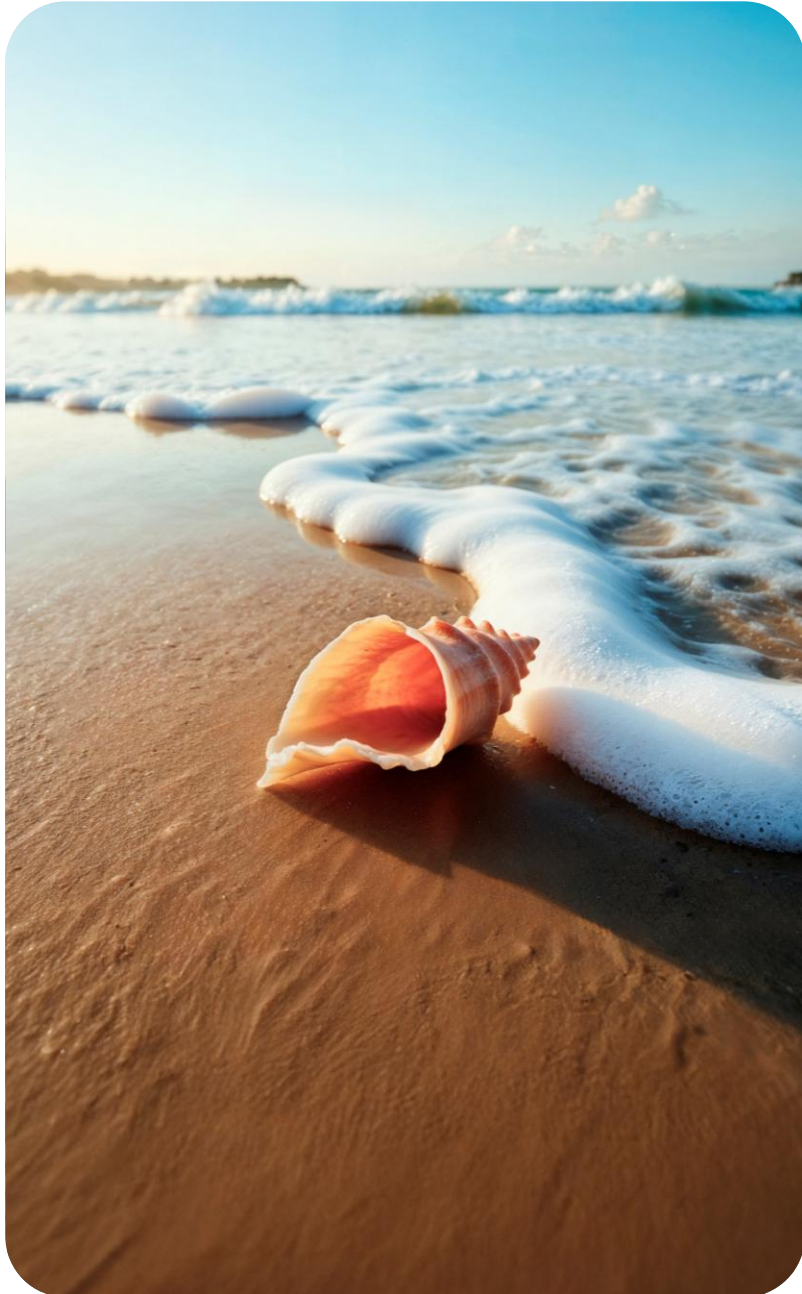
Case / death reviews Cancer education days
clinical supervision training
Journal club weekly education
Journal reading Oncology meetings
conference Online self-directed
PC MDT Webinars grand rounds
Teaching preparation
workshop Teaching systematic review training
Forum Literature review Preceptorship course
Special interest group

Types of learning most valued

- Online education is convenient and time effective, but I don't find it as meaningful to me as face to face education.
- Meeting people you know, like meeting my palliative care colleagues, I think that's how you learn by, you know, talking to them. That's a big part.
- I would like a workshop like something engaging that I have to participate in, because, like, I said, if you just make me sit there and listen, I'm gonna tune out. I get bored.
- If it's not relevant to me, I find it difficult to be interested.



What current, role related
learning need would you want
to address now if no barriers?



- So I would say for me, one of my biggest learning needs would be around research, I think, like, you know how, as a maybe in that research domain, as a CNC to where, you know, you're meant to be leading.
- The newer sort of pharmacological type things that are coming through. So there's so much changes out there with treatments and pain medications.
- I've been wanting to do for a few years is actually cognitive CBT for pain management.
- Probably the thing that I've struggled most with in the field, in end of life, is your cardiac patients. I haven't done a lot of cardiac training. I've done none. I've only done palliative care, and I struggle with that.

Final observations

CPD Barriers and Facilitators

Those identified were consistent with other studies with the possible addition of content relevance as a barrier.

Lifelong learning

Participants acknowledged that there is always more to learn.

Considered learning

Many participants described their learning as opportunistic rather than planned.

CPD

No participants described a formal linkage of learning need assessment with CPD activity.





Contact for more information

pcleasby@gmail.com or

20661120@student.westernsydney.edu.au