

Palliative Care

GOALS AND OBJECTIVES

Rotation Goals

The Palliative Care rotation provides residents with experience in the comprehensive care of patients with life-limiting and end-of-life illnesses. Residents will develop skills in the assessment and management of common symptoms such as pain, dyspnea, delirium, nausea, and anxiety, while also addressing the psychosocial, cultural, and spiritual needs of patients and families. The rotation emphasizes the consultative role of palliative care across inpatient and outpatient settings, with a focus on goals-of-care discussions, complex communication, and interprofessional collaboration. By the end of the rotation, residents will be able to apply the principles of palliative care to patients with both malignant and non-malignant chronic diseases, integrate evidence-informed approaches to symptom management, and contribute to high-quality, compassionate care that supports dignity and quality of life.

Entrustable Professional Activities

TRANSITION TO DISCIPLINE

- D1 Performing histories and physical exams, documenting and presenting findings, across clinical settings for initial and subsequent care

FOUNDATIONS OF DISCIPLINE

- F1 Assessing, diagnosing, and initiating management for patients with common acute medical presentations in acute care settings
- F3 Consulting specialists and other health professionals, synthesizing recommendations, and integrating these into the care plan
- F6 Discussing and establishing patients' goals of care
- F7 Identifying personal learning needs while caring for patients and addressing those needs

CORE OF DISCIPLINE

- C1 Assessing, diagnosing and managing patients with complex or atypical acute medical presentations
- C2 Assessing, diagnosing, and managing patients with complex chronic diseases
- C3 Providing medical consultation to other clinical services
- C6 Assessing capacity for medical decision-making
- C7 Discussing serious and/or complex aspects of care with patients, families, and caregivers
- C9 Caring for patients at the end of life

TRANSITION TO PRACTICE

- P3 Assessing and managing patients in whom there is uncertainty in diagnosis and/or treatment

- P4 Providing consultations to off-site health care providers
- P6 Working with other physicians and healthcare professionals to develop collaborative patient care plans

Clinical Presentations and Diagnoses

In alignment with the *Royal College Internal Medicine Competencies*, residents are expected to encounter and manage the following Medical Expert topics on this rotation:

Residents will be expected to competently assess and manage the following patient presentations during this rotation:

- Symptoms associated with advanced illness:
 - Pain (including use of opioids)
 - Dyspnea
 - Anxiety/Depression
 - Constipation/Diarrhea
 - Nausea / vomiting
 - Delirium
- Psychosocial and existential distress
- Grief and bereavement
- Uncertain goals of care

Residents will be expected to cover the following diagnoses during this rotation with the goal of competently assessing and managing the following:

- Advanced/metastatic cancer
- Advanced non-malignant disease (e.g. CHF, COPD, cirrhosis, CKD)
- Terminal diagnoses
 - Acute (e.g. catastrophic CVA, ICH, bowel ischemia, ILD Flare)
 - Chronic (e.g. aspiration pneumonia in advanced dementia)

Objectives (by Stage of Training)

The specific objectives for this rotation align with the CanMEDS Competencies and Milestones as outlined in the *Royal College 2023 Entrustable Professional Activities for Internal Medicine document (Version 3.0, 2023)* and the *Royal College Internal Medicine Competencies (Version 1.0, 2018)*. Objectives are structured to ensure progressive acquisition of competence across stages.

Transition to Discipline

Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Establish plans for ongoing care and, when appropriate, timely consultation (ME4)

Communicator

1. Establish professional therapeutic relationships with patients and their families (CM1)
2. Communicate using a patient-centred approach that encourages patient trust and autonomy and is characterized by empathy, respect, and compassion (CM1.1)
3. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

Foundations of Discipline

Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
3. Prioritize issues to be addressed in a patient encounter (ME2.1)
4. Establish goals of care in collaboration with patients and their families, which may include slowing disease progression, treating symptoms, improving function, and palliation (ME2.3)
5. Establish a patient-centered management plan (ME2.4)

Communicator

1. Respond to a patient's non-verbal behaviours to enhance communication (CM1.4)
2. Adapt to the unique needs and preferences of each patient and to his or her clinical condition and circumstances (CM1.6)
3. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
4. Use communication skills and strategies that help patients and their families make informed decisions regarding their health (CM4.3)
5. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

Collaborator

1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care (CL1.1)
2. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions (CL1.3)

Scholar

1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice (SC1.1)
2. Integrate best available evidence into practice (SC3)

Professional

1. Exhibit appropriate professional behaviours and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)

2. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)

Core of Discipline

Medical Expert

1. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner (ME1.4)
2. Carry out professional duties in the face of multiple, competing demands (ME1.5)
3. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in medical practice (ME1.6)
4. Prioritize issues to be addressed in a patient encounter (ME2.1)
5. Establish goals of care in collaboration with patients and their families, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation (ME2.3)
6. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation (ME4.1)

Communicator

1. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
2. Provide a clear structure for and manage the flow of an entire patient encounter (CM2.2)
3. Recognize when the values, biases, or perspectives of patients, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly (CM1.3)
4. Manage disagreements and emotionally charged conversations (CM1.5)
5. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
6. Use communication skills and strategies that help patients and their families make informed decisions regarding their health (CM4.3)
7. Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements (CM5.1)

Collaborator

1. Work effectively with physicians and other colleagues in the health care professions (CL1)
2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care (CL1.2)

Leader

1. Engage in the stewardship of health care resources (LD2)

Health Advocate

1. Respond to an individual patient's needs by advocating with the patient within and beyond the clinical environment (HA1)

Scholar

1. Integrate best available evidence into practice (SC3)

Professional

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)

Transition to Practice

Medical Expert

1. Perform a patient-centered clinical assessment and establish a management plan (ME2)
2. Prioritize issues to be addressed in a patient encounter (ME2.1)
3. Establish a patient-centered management plan (ME2.4)
4. Establish plans for ongoing care and, when appropriate, timely consultation (ME4)

Communicator

1. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families (CM2)
2. Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding (CM3.1)
3. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe (CM4.1)

Collaborator

1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centered collaborative care (CL1.1)
2. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions (CL1.3)
3. Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture (CL2.2)
4. Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care (CL3)
5. Determine when care should be transferred to another physician or health care professional (CL3.1)

Leader

1. Engage in the stewardship of health care resources (LD2)

Health Advocate

1. Respond to an individual patient's needs by advocating with the patient within and beyond the clinical environment (HA1)

Professional

1. Exhibit appropriate professional behaviors and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality (PR1.1)
2. Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice (PR3.1)