

SOCIAL WORK PRACTICE IN HOSPICE PALLIATIVE CARE: USING THE DELPHI PROCESS TO IDENTIFY CORE COMPETENCIES

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BACKGROUND

- ❖ Social workers provide much of the psychosocial care required by individuals and families at the end of life and during bereavement. However, there is no established set of competencies in Canada for social workers who provide Hospice Palliative Care (HPC).
- ❖ Therefore, in 2003, a national Best Practices Social Work Group stated its intention to identify and describe core competencies for practice in this area. This project was subsequently encouraged and funded by the Secretariat Palliative and End of Life Care under the auspices of Health Canada in 2005.

OBJECTIVE

- ❖ To establish consensus among HPC social workers and academics nationwide regarding core competencies for practice in this area.

METHODS

The Delphi Technique

- ❖ This project is using a modified Delphi technique to establish agreement about core competencies.
- ❖ The Delphi technique is a structured method broadly used in the health sciences.
- ❖ It is intended to synthesize a diverse range of expert opinions until a consensus is achieved.
- ❖ It is an iterative process that comprises 2 to 3 rounds of anonymous questionnaires. The information from each round is analyzed and then used to formulate the questionnaire for the next round until consensus is achieved.
- ❖ A primary advantage of this technique is that it provides an opportunity for participants to confidentially present and respond to ideas without the pressures of face to face influences.

"This process reminded me of all the things that make this profession unique and ever changing. I felt that the descriptions outlined what we aspire to do. No wonder the work days feel well lived."

Participant

METHODS

Phase One

The Best Practices Work Group first reviewed the literature and identified eleven core competencies for practice. They included:

| | | |
|---------------|-----------------------------|--------------------------|
| Advocacy | Community Capacity Building | Information Sharing |
| Assessment | Confirmation | Interdisciplinary Team |
| Care Delivery | Decision Making | Self-reflective Practice |
| Care Planning | Education and Research | |

- ❖ Each competency was described along the domains of attitudes and values, knowledge, and skills.
- ❖ These competencies were used as a starting point for discussion and to build consensus. They were emailed to potential participants across Canada for round 1 of the Delphi process.
- ❖ Participants were chosen according to their expressed interest in the project or because their name had been put forward by a colleague as an expert in HPC.
- ❖ Participants were asked to read the descriptions of each competency and to indicate:
 - whether the competency was essential for social work practice in HPC
 - whether descriptions of competency domains were adequate, and if not, to suggest changes
 - what other competencies, if any, should be added

RESULTS

- ❖ Phase 1 responses were analyzed by two reviewers (doctoral students) under the direction of two members of the Best Practices Social Work Group.
- ❖ The response rate for phase 1 was 63% (19 of 30 participants)
- ❖ 84% of participants (16) agreed that all competencies listed are essential
- ❖ 1 participant identified *community capacity building* as non-essential
- ❖ 2 participants identified *education and research* as non-essential
- ❖ 6 additional competencies were suggested as follows:

| | |
|--|--|
| Cultural Competency** | Adapting to work environment* |
| Supporting spiritual needs of self, team and others* | Counseling and treatment planning* |
| Understanding social determinants of health* | Understanding multidimensional aspects of health & wellness* |

*suggested once
**suggested twice

FINDINGS

Phase Two

- ❖ The responses of phase 1 were compiled into a new questionnaire for phase 2 and recently emailed to the same 19 participants who responded to phase 1.
- ❖ Suggested changes regarding descriptions of the competencies were integrated into the original 11 competencies and highlighted in red. Participants were asked whether they agreed or not with the suggested changes with an opportunity for comments.
- ❖ Participants were also asked to rate how essential each competency is according to a Likert scale: *not essential, somewhat essential, essential, very essential, absolutely essential, and unsure.*
- ❖ Participants were then asked whether the new suggested competencies should be developed further as stand alone competencies.
- ❖ Phase 2 is currently underway and the results will be statistically analyzed and completed by December, 2006.

DISCUSSION

- ❖ The Delphi method has facilitated an effective process to establish consensus among social work clinicians and academics across Canada regarding core competencies in palliative care.
- ❖ Initial results indicate strong agreement among the participants regarding 11 competencies as well as the suggestion of additional competencies.
- ❖ The involvement of front line clinicians in this project has positively affirmed the valuable role of social workers in providing meaningful and effective practice in HPC.

"I applaud the work that has gone into identifying core competencies and achieving this document. It is both comprehensive and inclusive and articulates well the significant role of the social work profession in HPC."

Participant

OUTCOMES

- ❖ The final results of this study will be used to develop a curriculum regarding HPC in Canadian schools of Social Work.
- ❖ The ultimate goal is to establish a consistent level of practice among social workers who are specialists in palliative and end of life care.
- ❖ Therefore, findings will be relevant to social work educators, clinicians and researchers, who are involved in HPC.



Secretariat on Palliative and End of Life Care

