

Are future medical oncologists sufficiently trained to communicate about palliative care? The medical oncology curriculum in Flanders, Belgium.

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Introduction

- In 2004, the recommendations for a Global Core Curriculum in Medical Oncology, developed by The American Society of Clinical Oncology (ASCO) and the European Society for Medical Oncology (ESMO) were published.
- In Belgium, medical oncology was officially recognised as a distinct specialty in 2007. Subsequently, the 4 main universities of Flanders (Brussels, Leuven, Antwerp and Ghent) developed a common educational program for medical oncology, inspired by the ESMO/ASCO recommendations.
- One competency domains for medical oncology trainees concerns communication
- It has been well documented that good communication skills for oncologists are indispensable, especially for communication about palliative care.

Aim

This contribution focuses on the question to what extent communication skills for discussing palliative care are acquired and developed within the framework of a formal academic training program in medical oncology in Flanders, a part of Belgium.

Methods

This qualitative study is grounded in a social health sciences approach. Data were collected using:

- Comparative document analysis from the ESMO/ASCO recommendations and the documents of the Master after Master medical oncology program in Flanders
- Interviews and group interviews with Flemish medical oncology trainees of the 2014, 2015 and 2016 educational cohort.

Results

Only a few recommendations for training communication skills for communication about palliative care were found in the ASMO/ASCO recommendations and even less in the Flanders Master after Master program documents. Oncology trainees are mainly exposed to palliative care communication during the clinical practice of their training program. Only very few lectures or seminars in the medical oncology educational program are devoted to palliative care and even less on communication about palliative care. They reported several barriers to communicate about palliative care on different levels.

Conclusions

This study revealed some promising early developments for the training of Flemish medical oncologists to discuss palliative care. However, there is still a need for more formal theoretical training on palliative care complemented and integrated with "hands-on" communication skills trainings. Communication training in general needs to be fully integrated as a core skill within the medical curriculum at large and should be promoted as lifelong a learning and competency development.



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