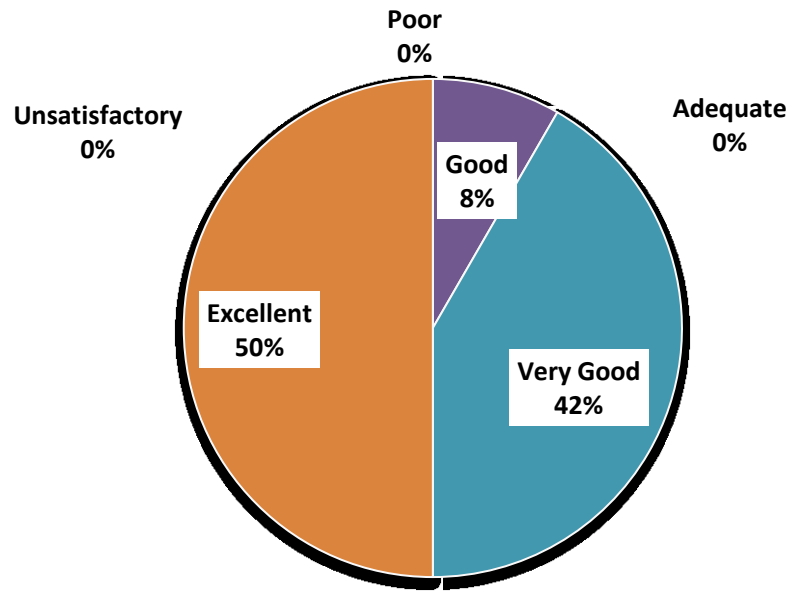


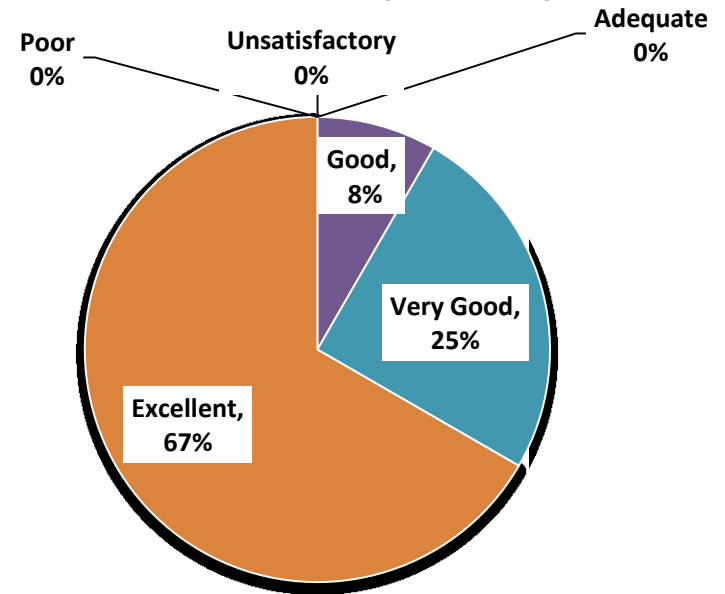
Annexure 4

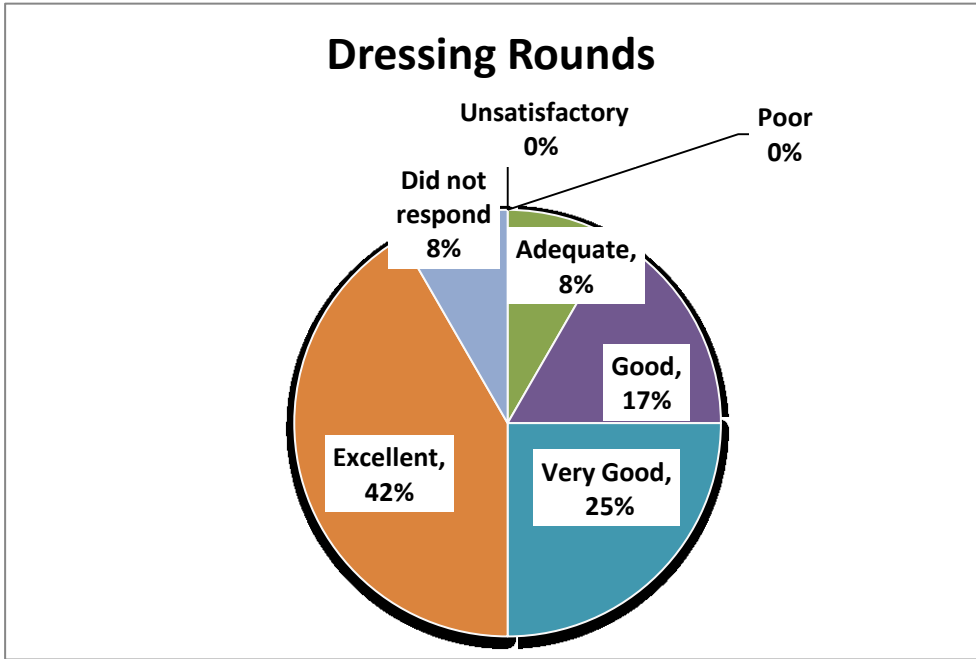
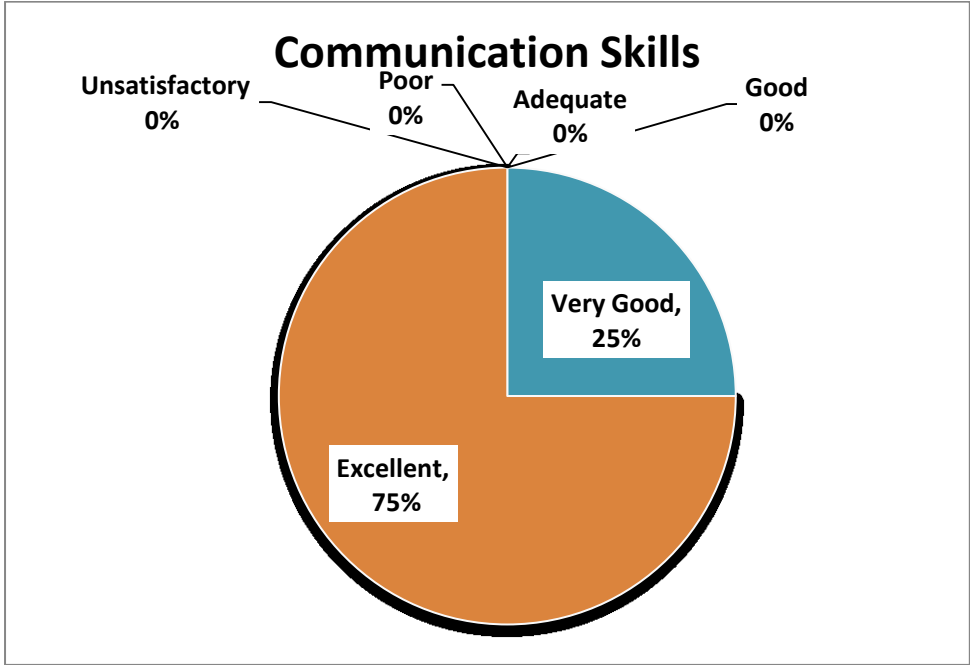
Feedback from Participants

Theory (Lecture) Sessions

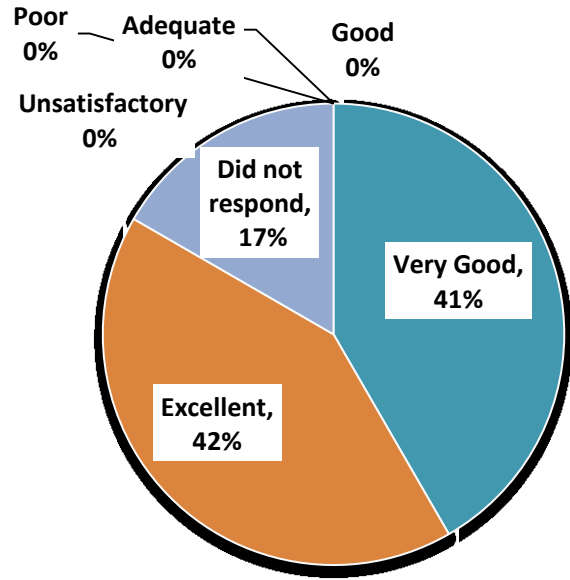


Ward Work (Rounds)

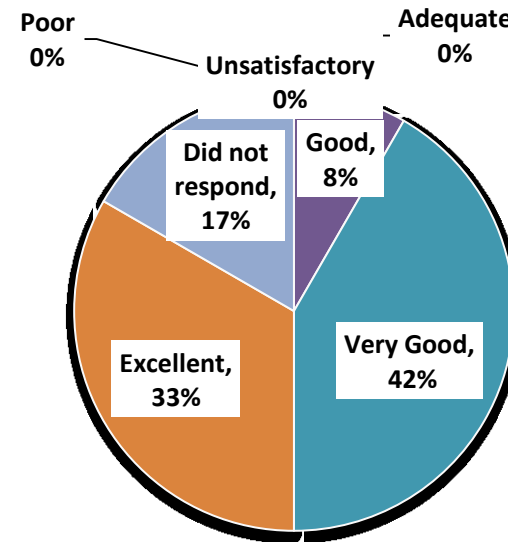




Overall Balance / Mix

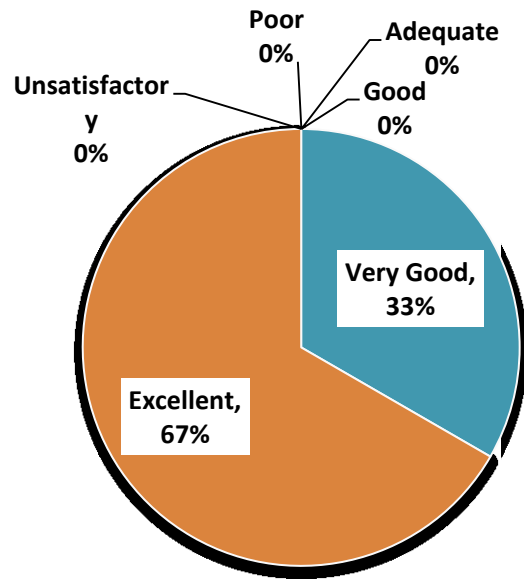


Did the course meet your needs?

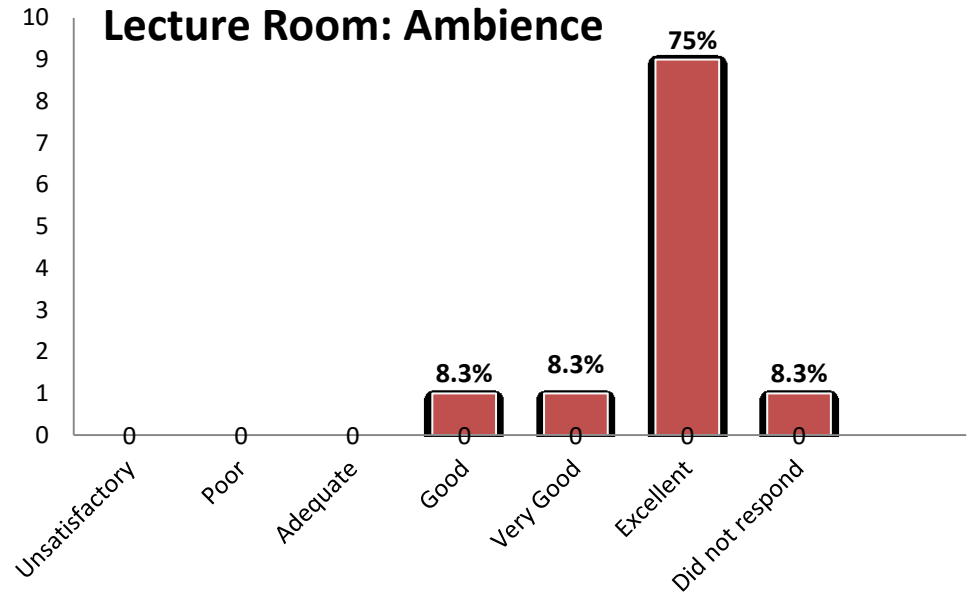


General Amenities:

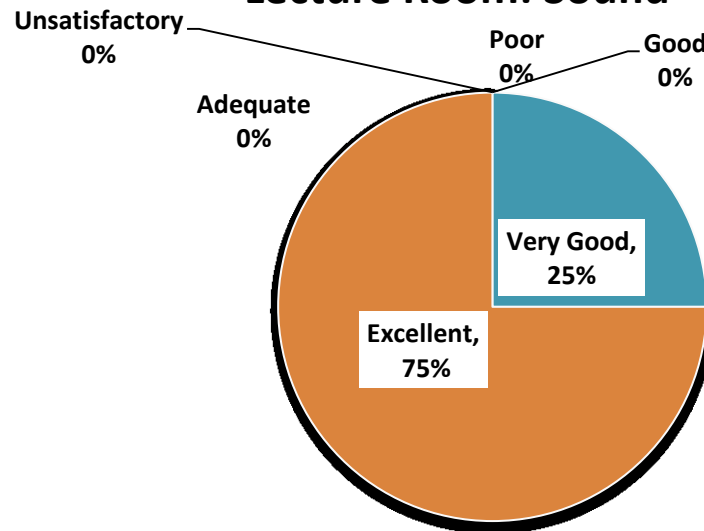
Lecture Room: Comfort



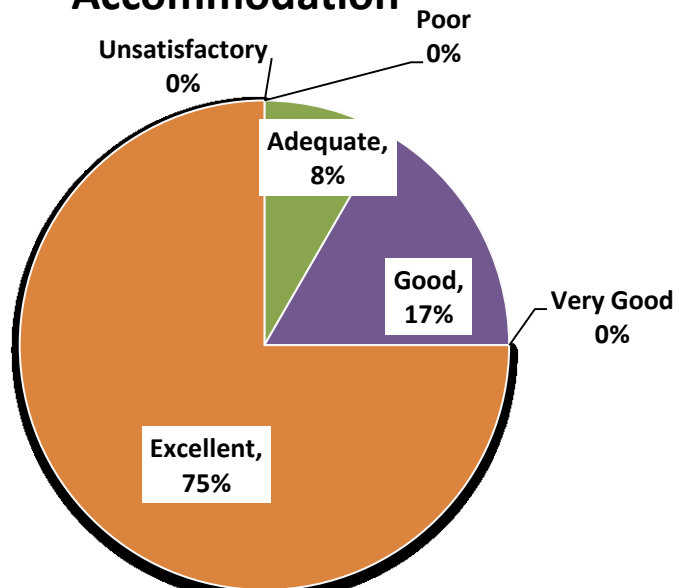
Lecture Room: Ambience



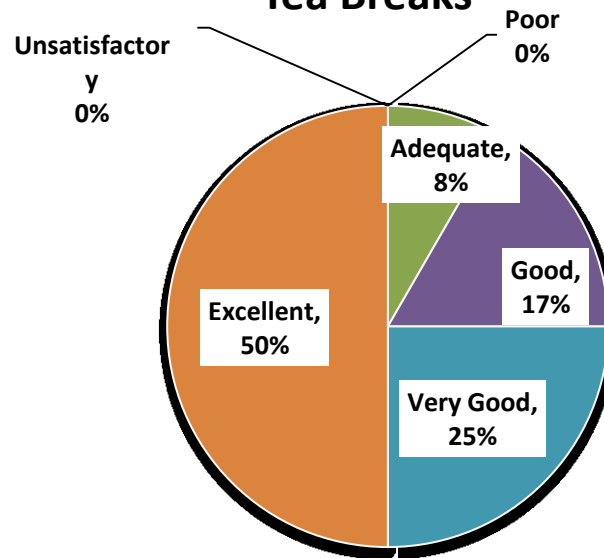
Lecture Room: Sound



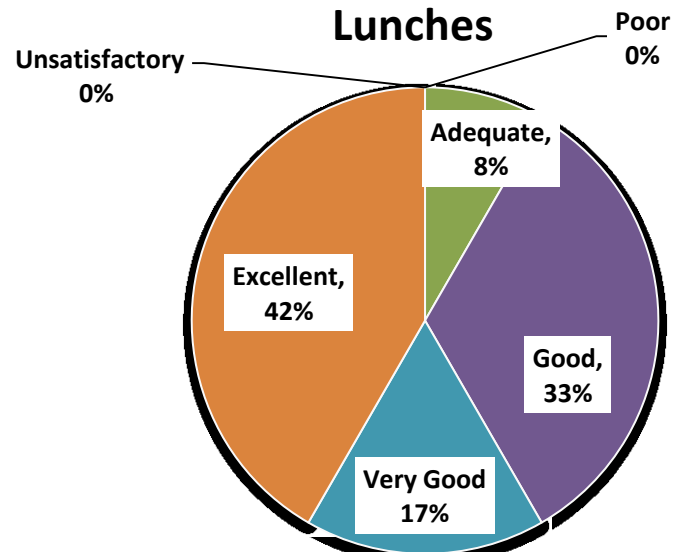
Accommodation



Tea Breaks



Lunches



5 useful learning points that would change / enhance your practice (Theory)

| <u>Doctors: (4/7)</u> | <u>Nurses: (5/7)</u> |
|--|--|
| <ul style="list-style-type: none">• Communication skills – 5 and techniques of role play• Psychosocial aspects - 3• Wound management• Psychiatric issues• Spiritual issues• Breaking bad news• Collusion• Pain management – Dose titration• Symptom management – especially nausea, vomiting and obstruction• Concept of Total Pain• Concept of Team work• Emergencies in Palliative Care• Correct the correctable• Local need assessment• Dressing techniques - 2• Opioid phobia• Architecture of the patient wards | <ul style="list-style-type: none">• Communication skills with patients and attenders – 2• Correct the correctable• Never re-treat• Always try again and again to become perfect• Be silent• Never react only respond• Touch the patient and reassure• Use of charcoal, turmeric and metrogyl for dressing• Theoretical example• To consider the total pain of the patient• Importance of team work• Ward experience with patient• Ground duties enhance our knowledge• Treatment with doctors |

5 useful learning points that would change / enhance your practice (practical / hands – on)

| <u>Doctors: (5/7)</u> | <u>Nurses: (7/7)</u> |
|--|--|
| <ul style="list-style-type: none"> • Dressing rounds – 3 (charcoal, self-made dressing materials) • Communication • Bereavement support • S/C infusion • Pain relief • Logistic management – files, cards, cheek, bts • Documentation of patient monitoring – 2 • Evaluation of patients is comprehensive • Maintenance of ward cleanliness using nurses help • Using simple yet effective ways to treat – 2 • Lateral thinking • Contacting support groups • Level of care given to patients • Doctors behavior – attitude • Nurses Behaviour – attitude | <ul style="list-style-type: none"> • Dressing techniques – 3 (metrogyl – both tab/ soln) • Communication with patients - 2 • Ward Visit • Proper use of drugs - opiod • Pain – assessment and management • Duties of attendant with hospital staff • Treatment part • Importance of knowing patient history – both by doctors and nurses • To show more respect to patients and families - 2 • Develop good rapport with patients • Counselling patients • Comprehensive care of patients • 3P's – Placebo, Plumbing, Palliative Care • General care provided to the patient – food, environment • Psychological support first - 3 • Home Care • Knowledge to the family • Be polite • Don't be judgemental • Staff patterns to be known |

What else have you liked?

| <u>Doctors: (5/7)</u> | <u>Nurses: (7/7)</u> |
|--|---|
| <ul style="list-style-type: none">• Home care visit / delivery units – 2• Palliative sedation• A counsellor / psychologist's view point• Use of syringe drivers | <ul style="list-style-type: none">• More practical sessions with assessment, admission, care and home care• Counselling session with patient attendant• Well organized training after all• Team work in wards and training• More training• To be organized more workshop |

Duration of course? (Too long / Too short?.. how many days ideally?)

| <u>Doctors: (5/7)</u> | <u>Nurses: (7/7)</u> |
|--|--|
| <ul style="list-style-type: none">• 3 days - 3• No need for modular course – this is perfect for both theory and practical• 5 days – 2 | <ul style="list-style-type: none">• 3 days – 5• Need another day for counselling and communication• 5 days |

Any comments generally?

| <u>Doctors: (3/7)</u> | <u>Nurses: (6/7)</u> |
|--|---|
| <ul style="list-style-type: none">• No -2• Better to cover both theory and hands on training at same period• Session was well organized and conducted• Very useful training as it helps to improve quality of life patients by doing just little things | <ul style="list-style-type: none">• No• Beautiful workshop to enhance our knowledge• Wards are very neat and tidy• Lovely atmosphere at the hospice• Excellent – 2• Good efforts – 2 |

Any suggestions for improvement?

| <u>Doctors: (5/7)</u> | <u>Nurses: (5/7)</u> |
|--|--|
| <ul style="list-style-type: none">• Provision for pre and post test• Make feedback form anonymous• Session on care for self – 2• Session on counselling• Please have both theory and hands on training at same period to prevent any repetition of theory / some topics thus leaving more time for practical aspects• Have training sessions only here as there is no need for training attended in Delhi | <ul style="list-style-type: none">• Only in theory• No - 2• More in depth• More training in Breaking bad news• More practical classes• Add euthanasia |

What further follow up would you like? If any

| <u>Doctors: (1/7)</u> | <u>Nurses: (3/7)</u> |
|--|--|
| <ul style="list-style-type: none">• More updates on recent advances / studies in relation to palliative care | <ul style="list-style-type: none">• Practical session regarding how to impart knowledge to others• Manage the Ward visit (workshop)• 6 months once |

Would you like to keep in touch? (if so how)

| <u>Doctors: (5/7)</u> | <u>Nurses: (7/7)</u> |
|---|---|
| <ul style="list-style-type: none">• Yes via email – 5 | <ul style="list-style-type: none">• Yes via email - 7 |