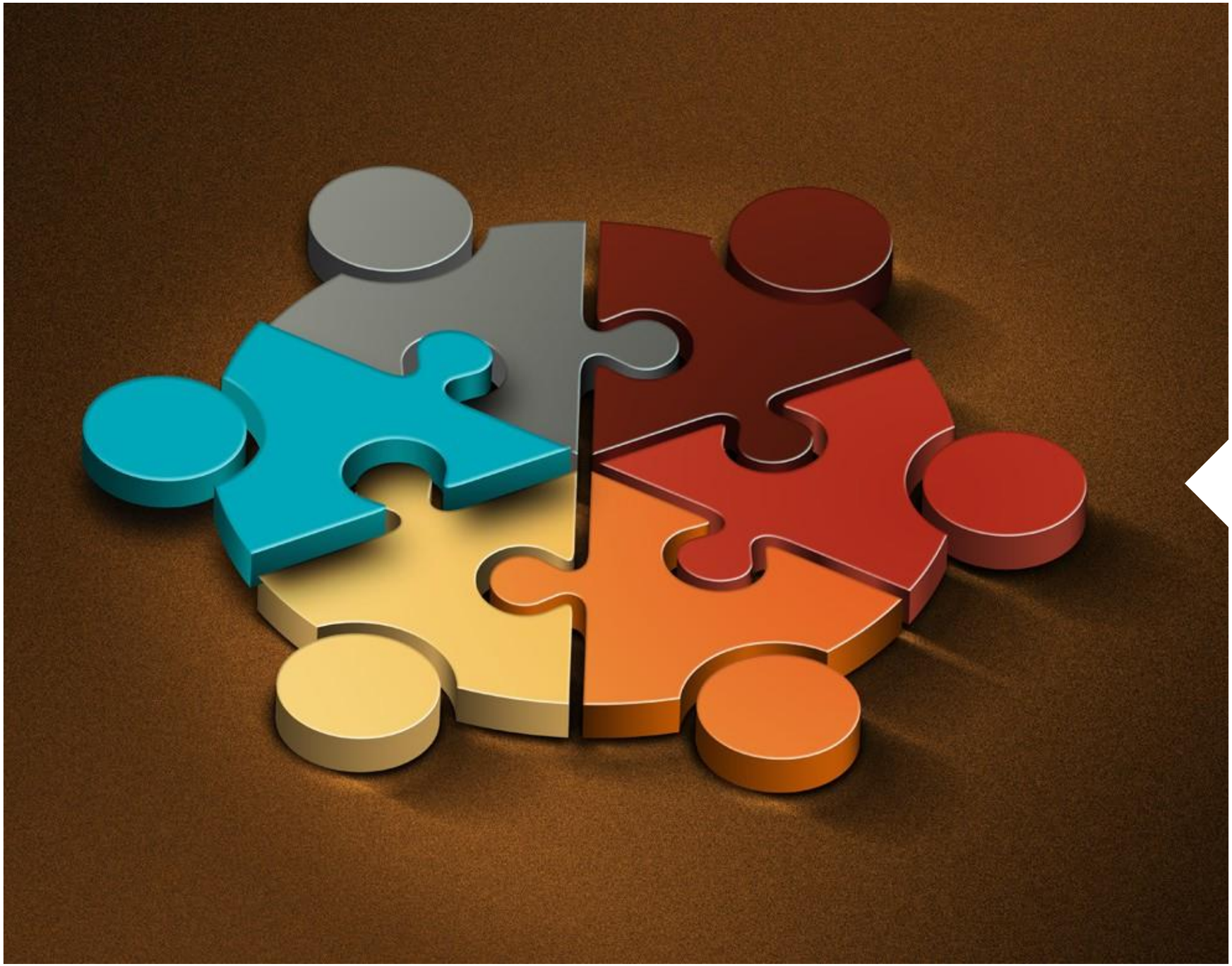

BC Centre for Palliative Care

Inter-professional Palliative Competency Framework

Adapted Dec. 2024

Health-care Assistants

BC Centre for Palliative Care

BC Centre for Palliative Care

Citation: BC Centre for Palliative Care (2024). BC Centre for Palliative Care: Inter-professional palliative competency framework.

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This Framework was adapted from the Palliative Care Competence Framework,[1] with the permission of Ireland Health Service Executive and The Nova Scotia Palliative Care Competency Framework,[2] with the permission of the Nova Scotia Health Authority.

Competency statements within the Health Care Assistant-specific competencies with quotation marks are directly quoted from the BC Provincial HCA (Health Care Assistant) Curriculum Guide.[3]

In November of 2024, this document was updated with permission. The names of the domains were adapted to align with *The Canadian Interdisciplinary Palliative Care Competency Framework*,[17] and the B.C. content has been re-organized into Domains 1-11. Domain 12, Virtual Care, was not included in the original B.C. document so competency statements have been adopted from the Canadian Framework. All modified and new language is identified by **bold** text and an asterisk *. The competency statements within the other domains are unchanged from 2019 and will be adapted in the future.

A reference list is available within the BC Centre for Palliative Care: Inter-professional palliative competency framework (2024).

DOMAIN 1: PRINCIPLES OF **A PALLIATIVE APPROACH TO CARE***

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
"Describes the philosophy and principles of care used in hospice and palliative care settings." [3]	
Understands who the interdisciplinary team is, what their roles are, how to access them and how to collaborate with them.	Describes the role and function of palliative care specialists and consultant teams.
Identifies all people with life-limiting conditions as potentially benefitting from a palliative approach.	Recognizes when a person may fit the criteria for a palliative approach yet hasn't been identified as such and discusses with the inter-professional team.
"Observes [and addresses] physical, emotional, cognitive, and spiritual needs of the dying person." [3]	Discusses how to incorporate their observations of people's needs into their care plan with the inter-professional team.
Identifies who the family is for the person and responds to family's unique needs and experiences.	

DOMAIN 2: CULTURAL SAFETY AND HUMILITY

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Assesses and addresses the needs unique to each person with life-limiting conditions, along with the family's needs, by considering ethnicity, culture, gender, sexual orientation, language, religion, age, ability and preferences. Integrates these into care.	
Demonstrates openness and sensitivity to social, spiritual, and cultural values and practices that may influence preferences of the person and family. Provides opportunities for person and family to exercise these values.	Assists with the development of resources, space, and opportunities for cultural and personal expression.
Provides opportunities for people and families to participate in cultural or religious practices, referring to supports as requested.	
"Honors the person and family's individual and community rituals."[3]	

DOMAIN 3: COMMUNICATION

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Uses a variety of strategies to engage in ongoing compassionate, individualized and timely communication with people and their families.	
"Identifies common reactions of family members and provides support."[3]	Supports the person and family in times of crisis or conflict, identifying people in need of additional support and communicating with the inter-professional team.
Uses developmentally appropriate communication approaches during conversations involving children.	Follows the current principles and best practices for communicating with children about dying, death, loss and grief.

DOMAIN 4: **OPTIMIZING*** COMFORT AND QUALITY OF LIFE

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Provides an empathetic and compassionate presence.	Provides specialized, sensitive care consistent with the goals of care, the trajectory of the life-limiting condition(s), and the palliative approach.
	"Provides specialized, sensitive care for the dying person in line with palliative care principle." [3]
"Provides appropriate interventions as per the care plan. Provides comfort measures for common symptoms." [3]	Plans personal care for a time when medications for symptom management will be most effective (e.g., in collaboration with the nurse).
Communicates observations and interventions to the inter- professional team, according to the care plan, along with the person's response.	
Identifies and communicates changes in the person's condition.	
Provides assistance with personal care needs in a way that maximizes the person's dignity and privacy in self-care, and also when client is no longer able to communicate.	Plans activity when a person has the most energy, focusing on activities which are most important to the person and their family.
Integrates the family in the person's care, while being sensitive to the person's and family's wishes in accordance to the care plan.	Collaborates with the inter-professional team to support the family in order to provide safe, quality care according to the care plan.

DOMAIN 5: CARE PLANNING AND COLLABORATIVE PRACTICE

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Provides and advocates for care that is in alignment with person's goals of care, Health-care directive and/or ACP.	
Understands the role of a substitute decision maker (SDM) and where to access that information.	Facilitates communication between SDM and inter-professional teams.
Supports the person or SDM who wishes to prepare or revise an ACP by listening and then referring them to the appropriate inter- professional team member.	Collaborates with the inter-professional team to ask the person and their family if they have had ACP discussions; provides resources when needed.
Identifies resources available for people and families.	Provides information for people and families on how to access resources that can ease the burden of family caregiving (e.g., driving programs, home support respite, family support groups).
Communicates observations, concerns and changes to the inter- professional team.	Provides input to the care plan based on knowledge of the unique person and family.

DOMAIN 6: LAST DAYS AND HOURS*

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Understand and recognize expected changes as a person nears death.*	
Provide care and comfort measures to support the person and their designated family or caregiver(s) through physical changes in the last days and hours.*	
Provide care of the body immediately following death as per the person and designated family or caregiver's preferences and rituals, and the organization's policies/procedures.*	
Respect the designated family or caregiver's needs and preferences for supports and bring them to the attention of the health care team if they are beyond the scope of the PSW.* **Involve the interdisciplinary care team as needed.***	
Support the designated family or caregiver(s) and community-specific protocols and practices surrounding death, loss, and grief when caring for members of underserviced communities.*	
Support designated family and community-specific protocols and practices surrounding death, loss, and grief when caring for First Nations, Inuit, and Métis.*	

DOMAIN 7*: LOSS, GRIEF AND BEREAVEMENT

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Provides support to the person and family throughout the grieving process, including during illness, decline, time of death and following.	Acknowledges the cumulative losses inherent in the experience of a life-limiting condition and its impact on the person and family.
Supports the person and family as they grieve losses, transitions, decline and death in unique ways and at their own pace.	Recognizes individuals with actual or potential difficult grief reactions and collaborates with the inter-professional team to provide support.
Identifies resources available for grieving families.	Provides information on grief support resources to families.

DOMAIN 8: SELF-CARE

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Describes the effect of a person's death on the HCPs involved and works to provide healthy self-care strategies for the caregiver(s).	
"Describes the effect of a person's death on the HCPs involved in the process."[3]	Mentors and coaches colleagues regarding the personal impact of loss, grief and bereavement, supporting them to recognize their own loss responses, and encouraging engagement in activities to maintain their resilience on an on-going basis.
"Describes the importance of and ways to provide self-care for the caregiver following a death."[3]	
Explores own attitudes and beliefs regarding death, dying and caring for people life-limiting conditions. Attends to own responses.	
Identifies signs of compassion fatigue in self. Seeks help and resources as needed, practicing healthy strategies to help develop resilience.	Contributes to a team environment of caring and support by recognizing compassion fatigue in oneself and colleagues, and engaging in healthy activities including accessing counselling services when needed.

DOMAIN 9*: PROFESSIONAL AND ETHICAL PRACTICE

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
"Demonstrates an understanding of the beliefs, values, legal and ethical issues related to caring for the dying person." [3]	Identifies situations with ethical implications and collaborates with the inter-professional team.
"Maintains personal and professional boundaries."[3]	Identifies the challenge of maintaining personal and professional boundaries, especially when living in a small community or caring for family members. Seeks support from others as needed.
Responds to inquiries regarding Medical Assistance in Dying (MAiD) in accordance with organizational policies and directives.	
Participates in palliative care continuing education opportunities.	
	Describes the role of relevant community organizations such as the BC Hospice and Palliative Care Association (BCHPCA) and local hospice societies.
Identifies situations potentially involving conflict and collaborates with the inter-professional team to resolve.	

DOMAIN 10: EDUCATION, EVALUATION, QUALITY IMPROVEMENT AND RESEARCH*

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Act as a mentor for others new to palliative care.*	Acts as a mentor and coach for HCA peers in all domains.
Participate in continuing education related to palliative care.*	Provides input into the development of education materials for HCAs.
Participate in quality-improvement initiatives.*	Provides input into evaluation and quality improvement activities.
Participate in cultural safety training opportunities, especially any that are specific to underserviced populations. * **Where available, participate in regionally specific training.***	Contributes to the development of inter-professional team practices (e.g. de-briefings, rounds).
Participate in research activities such as data collection*	Participates in research activities as appropriate.
Participate in First Nations, Inuit, and Métis cultural safety training opportunities. Where available, participate in regionally specific training.*	

DOMAIN 11: ADVOCACY*

Health-care providers (HCPs) are expected to demonstrate the competencies only as appropriate for their professional scope of practice, organizational policies, and specific job and role descriptions. Individual practice will range from novice to expert within each category.

GENERALIST - ALL	ENHANCED PRACTICE - SOME
Advocate for incorporation of the person's and their designated family or caregiver's values and beliefs into care planning.*	Advocates for care that is aligned with person's and family's beliefs, values, goals and wishes in accordance to the care plan.
	Advocates for the role of HCAs in the inter-professional team.
	Advocates for palliative care improvements on a community level.
	Advocates for the development of resources specific to the care setting, as needed.

DOMAIN 12: VIRTUAL CARE*

This domain is not included in the Canadian Interdisciplinary Palliative Care Competency Framework for Health Care Assistants (Personal support workers).

GENERALIST - ALL	ENHANCED PRACTICE - SOME

All British Columbians affected by serious illness will have equitable access to compassionate, person-centred care and resource