



**BC Centre for  
Palliative Care**  
Inter-professional  
Palliative  
Competency  
Framework

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**Health-care  
Assistants**

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This Framework was adapted from the Palliative Care Competence Framework,<sup>1</sup> with the permission of Ireland Health Service Executive and The Nova Scotia Palliative Care Competency Framework,<sup>2</sup> 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.<sup>3</sup>

\*See the [BC Centre for Palliative Care: Inter-professional palliative competency framework](#) for a detailed reference list.



## Discipline-specific competencies

The discipline-specific competencies have been formatted into tables, to allow the reader to see the Core Competencies, which are identical for every discipline, alongside competencies for each category of FEW, SOME and ALL. The competencies are separated into the eight domains.

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.



## DOMAIN 1: PRINCIPLES OF PALLIATIVE CARE AND PALLIATIVE APPROACH

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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Describes key elements of palliative care and a palliative approach.	“Describes the philosophy and principles of care used in hospice and palliative care settings.” <sup>3</sup>	
Describes the role and function of the inter-professional team in palliative care.	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 people who would benefit from a palliative approach.	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.
Describes people as holistic beings (i.e., with physical, emotional, psychosocial, sexual and spiritual aspects).	“Observes [and addresses] physical, emotional, cognitive, and spiritual needs of the dying person.” <sup>3</sup>	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 includes family in care.	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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Practices self-reflection to understand personal and systemic biases.		
Incorporates the uniqueness of each person, family and community into all aspects of care.	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.	
Builds relationships by listening without judgement and being open to learning from others.	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.
Advocates for culturally safe practices that are free of racism and discrimination.	Provides opportunities for people and families to participate in cultural or religious practices, referring to supports as requested.	
Supports colleagues as they address personal well-being in relation to challenges and complexities of this work.	"Honors the person and family's individual and community rituals." <sup>3</sup>	

## 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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
	Uses a variety of strategies to engage in ongoing compassionate, individualized and timely communication with people and their families.	
Provides emotional support to the person and family from diagnosis to bereavement	"Identifies common reactions of family members and provides support." <sup>3</sup>	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.
Asks the person and family what is important to them and, with permission, shares that information with the inter-professional team.		
Advocates for culturally safe practices that are free of racism and discrimination.	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: 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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Provides holistic, person-centred care.	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.” <sup>3</sup>
Incorporates quality of life, as defined by the person, as a key focus of care.	“Provides appropriate interventions as per the care plan. Provides comfort measures for common symptoms.” <sup>3</sup>	Plans personal care for a time when medications for symptom management will be most effective (e.g., in collaboration with the nurse).
Identifies issues affecting quality of life and collaborates with the inter-professional team to develop and implement a care plan.	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.	
Supports people in self-management of their life-limiting condition(s), involving the family as appropriate.	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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Collaborates with the inter-professional team, person and family to ensure care plans are consistent with goals of care, preferences and advance care plans (ACPs), which may change throughout the life-limiting condition(s).	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.
Anticipates, identifies and addresses supportive care needs of the person and family.	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: 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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Identifies grief as a common response to loss with multifaceted aspects that affect how it is experienced.	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 people and their families in their unique ways of grieving.	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 7: 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.

CORE - COMMON FOR EVERY HCP	GENERALIST - ALL	ENHANCED PRACTICE - SOME
Identifies and addresses ethical and/or legal issues in collaboration with the inter-professional team	“Demonstrates an understanding of the beliefs, values, legal and ethical issues related to caring for the dying person.” <sup>3</sup>	Identifies situations with ethical implications and collaborates with the inter-professional team.
	"Maintains personal and professional boundaries." <sup>3</sup>	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.
		Advocates for care that is aligned with person's and family's beliefs, values, goals, and wishes in accordance to the care plan.
	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 7: PROFESSIONAL AND ETHICAL PRACTICE cont'd

*Health Care Assistants (HCAs) in champion or peer leadership roles (those who have demonstrated excellence in enhanced practice competencies)*

		Acts as a mentor and coach for HCA peers in all domains.
		Provides input into the development of education materials for HCAs.
		Provides input into evaluation and quality improvement activities.
		Advocates for the role of HCAs in the inter-professional team.
		Contributes to the development of inter-professional team practices (e.g., de-briefings, rounds).
		Advocates for palliative care improvements on a community level.
		Participates in research activities as appropriate.
		Advocates for the development of resources specific to the care setting, as needed.

## 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.

CORE - COMMON FOR EVERY HCP	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." <sup>3</sup>	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." <sup>3</sup>	
Reflects on, and addresses, own well-being.	Explores own attitudes and beliefs regarding death, dying and caring for people life-limiting conditions. Attends to own responses.	
Supports colleagues as they address personal well-being in relation to challenges and complexities of this work.	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.



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