



Self-assessment for Nurses

Name _____ Date _____

Title/Role _____ Organization/Location _____

- **Novice (N)** – may be experienced in psychosocial care but new to palliative care. Needs regular support.
- **Advanced beginner (B)** – can practice independently using some psychosocial skills specific to palliative care but still needs support.
- **Competent (C)** – mostly independent, occasionally seeks out support.
- **Proficient (P)** – autonomous practice, seeks out leadership opportunities.
- **Expert (E)** – highly proficient, is regularly sought out by others.



4 Optimizing comfort and quality of life

4.1 Promoting self-management/care

- 4.1.1** Recognize and educate people and designated family or caregiver(s) about how they can engage in self-management of their condition, while acknowledging the barriers and limitations that may make self-management/care difficult.
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|

4.2 Maintaining dignity

- 4.2.1** Conserve and promote dignity of the person by facilitating expression of needs, hopes, feelings, and concerns in planning palliative care.
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|

4.3 Caring for people holistically

- 4.3.1 A. Generalist**
Understand the concept of “total pain” and the multiple factors that may impact on the person and their designated family or caregiver(s).
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|
- B. Specialist**
Acknowledge the cumulative losses inherent in the experience of a life-limiting condition and its effects on the person and their designated family or caregiver(s).
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|

4.4 Involving the designated family or caregiver(s) in care

- 4.4.1** Recognize and anticipate the impact of the role changes designated families experience as a result of a person’s illness when formulating relevant and realistic care plans.
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|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|
- 4.4.2** Respect the role of the designated family or caregiver(s), and community, especially when caring for members of underserved populations throughout their palliative care.
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|
- 4.4.3** Respect the role of the designated family or caregiver(s), and community, for First Nations, Inuit, and Métis, throughout their palliative care.
- | | | | | |
|---|---|---|---|---|
| N | B | C | P | E |
|---|---|---|---|---|

Self-assessment for Nurses

Palliative care competencies and descriptions		Knowledge/skill level				
4.5	Screening, assessing, and managing pain and other symptoms and psychosocial concerns					
4.5.1	Regularly screen for symptoms and needs, using validated, standardized instruments, such as the Edmonton Symptom Assessment System (ESAS).	N	B	C	P	E
4.5.2	Demonstrate an understanding of the use of non-pharmacological interventions for pain and symptom management, support the person's decision to use complementary and alternative medicine (CAM), and address requests for information. Be aware of the credible resources available within their community regarding CAM. Understand professional responsibilities regarding CAM practices and interventions.	N	B	C	P	E
4.5.3	Implement evidence-informed pharmacological and non-pharmacological approaches for pain and symptom management at end-of-life.	N	B	C	P	E
4.5.4	Recognize that complementary and alternative medicine (CAM) can play an important role in palliative care, especially when caring for members of underserved populations. Collaborate with the person and their designated family or caregiver(s) to incorporate these into the care plan.	N	B	C	P	E
4.5.5	Recognize that traditional medicine can play an important role in palliative care for First Nations, Inuit, and Métis. Collaborate with the person and their designated family or caregiver(s) to incorporate traditional medicine into the care plan.	N	B	C	P	E
4.5.6	A. Generalist Collaborate with the care team to manage pain and symptoms effectively based on the person's identified goals of care.	N	B	C	P	E
	B. Specialist Manage more complex conditions and provide consultation, advice, and mentorship to generalist level nurses.	N	B	C	P	E
4.5.7	Administer medicine or other treatments appropriate for the types and severity of the person's pain, side effects, drug interactions, complications, and condition.	N	B	C	P	E
4.5.8	Demonstrate a comprehensive knowledge of common medications, and respond to potential side effects, interactions, or complications.	N	B	C	P	E
4.5.9	Describe the indications for opioid rotation.	N	B	C	P	E
4.6	Understanding the severity of the person's pain, other symptoms, and condition					
4.6.1	A. Generalist Incorporate knowledge of pain classification, the pathophysiology of pain and other symptoms in management of symptoms.	N	B	C	P	E
	B. Specialist Incorporate evidence-based off label use of medications, as appropriate, for management of symptoms.	N	B	C	P	E
TOTAL	4 Optimizing comfort and quality of life	N	B	C	P	E