



Self-assessment for Personal Support Workers

- **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.



Palliative care competencies and descriptions

Knowledge/skill level

1 Principles of a palliative approach to care

1.1 Understanding the core philosophy of Palliative Care and the palliative approach to care

1.1.1	Understand the principles and practices of palliative care and a palliative approach.	N	B	C	P	E
1.1.2	Understand community-specific protocols, in particular when caring for members of underserved populations who are living with a life-limiting illness so they can live fully throughout their care.	N	B	C	P	E
1.1.3	Understand community-specific protocols of caring for First Nations, Inuit, and Métis who are living with a life-limiting illness so they can live fully throughout their care.	N	B	C	P	E

1.2 Identifying people who would benefit from a palliative approach

1.2.1	Collaborate with the care team and use evidence-based tools to identify people who could benefit from a palliative approach.	N	B	C	P	E
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1.3 Understanding the interdisciplinary team

1.3.1	Understand the role of the interdisciplinary team in providing palliative care, as well as the roles of each team member.	N	B	C	P	E
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1.4 Including designated family or caregiver(s) in the unit of care

1.4.1	Acknowledge who the person considers to be family, and include the designated family or caregiver(s) in the person's care, if the person wishes	N	B	C	P	E
1.4.2	Respect the importance of the role of designated family or caregivers and community for members of underserved populations throughout their palliative care.	N	B	C	P	E

Palliative care competencies and descriptions		Knowledge/skill level				
1.4.3	Respect the importance of the role of designated family and community for First Nations, Inuit, and Métis, throughout their palliative care.	N	B	C	P	E
1.5 Seeing people holistically						
1.5.1	Acknowledge the physical, emotional, mental, social, and spiritual aspects to care.	N	B	C	P	E
TOTAL	1 Principles of a palliative approach to care	N	B	C	P	E



2 Cultural safety and humility

2.1 Supporting cultural practices						
2.1.1	Understand the influence of culture and lived experiences on a person's attitudes towards health, wellness, serious illness, and death. Incorporate these attitudes into the care of members of underserved populations.	N	B	C	P	E
2.1.2	Understand that First Nations, Inuit, and Métis cultural practices and beliefs influence how palliative and end-of-life care is provided. Incorporate First Nations, Inuit, and Métis community-specific protocols and practices into provision of palliative care.	N	B	C	P	E
2.1.3	Provide culturally safe care.	N	B	C	P	E
2.1.4	Partner with people and their designated families and caregivers to provide opportunities for cultural, religious, or personal practices.	N	B	C	P	E
2.2 Engaging in self-reflection						
2.2.1	Practice self-reflection to identify and address personal biases.	N	B	C	P	E
2.3 Acting as an advocate						
2.3.1	Advocate for the incorporation of people's and their designated family or caregivers' values and beliefs into the care plan.	N	B	C	P	E
2.3.2	Advocate for culturally safe practices that are free of racism and discrimination.	N	B	C	P	E
TOTAL	2 Cultural safety and humility	N	B	C	P	E