



**Palliative and Home Care Nursing: Scope of Practice,
Standards, and Competencies**

2017

The Jordanian Nursing Council

The Jordanian Nursing Council (JNC) is a national governmental regulatory institution for nursing and midwifery in Jordan. The JNC is governed by a board headed by Her Royal Highness Princess Muna Al Hussein as president of the council. The board is comprised of 14 key representatives of the health care institutions and through regulating and governing the nursing profession in education, practice and research.

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Foreword

The “*Palliative and Home Care Nursing: Scope of Practice, Standards, and Competencies*” is a policy document developed by the Jordanian Nursing Council to regulate and unify the standards for the practice of palliative nurses. It includes national standards and competencies for the general and advance practice roles. The aims of this document are to standardize practice and safeguard the health and wellbeing. The document is a guide for academic and practice institutions; educational institutions need to transfer the content of this very important document and deal with it as a national curricula for the undergraduate and graduate education of palliative nurses to prepare them for fitness for practice roles, and create a generation that are responsive, ethically committed and supportive for the palliative health.

Practice institutions need to take this document as a policy umbrella for the practice of palliative health and their commitment to implement and create positive environment to allow palliative nurses to function within the agreed upon scope of practice and competencies stated in this document. Institutions need to use these competencies in finalizing job description, roles and responsibilities as a tool for performance evaluation.

This document was developed with distinguished efforts from national academic and services intuitions.

I would like to express my sincere appreciation for all who contributed to the development of this unique document. The implementation of this document at the national level by all institution is a challenge, but we trust your good will and abilities to take it forward and present Jordan as a regional model in the palliative nursing area.

Secretary General

Professor Muntaha Gharaibeh

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Introduction

The development of the palliative care standards and competences mark a significant contribution to improving the care for patients, families, and the community as a whole by focusing on providing quality nursing care. This document *Palliative and Home Care Nursing: Scope of Practice, Standards, and Competencies (2017)* was developed by the committee of palliative and home care nursing established by Jordanian nursing council (JNC) , as part of its mission to promote the health status of the community .This document developed based on national registered nurse frame work,using the best possible evidence of international models and frameworks of palliative and home nursing professional and practice standards, consulting palliative nurse specialists, and reviewing feedback provided by nurses in a variety of palliative and home care practice settings, key stakeholders, palliative and hospice physicians and other health professionals to work collaboratively in developing the national standards and competencies required for certification of palliative nurse specialists and advanced palliative nurse specialists.

The focus of palliative care is on patients with life-threatening conditions and their families. It helps in alleviating suffering and providing comfort measures in caring for patients and their families considering all dimensions of care: physical, psychosocial, and spiritual. Applying the specific competences by palliative care nurses working in different healthcare settings helps them to perform their role which aims to improve the quality of life of patients and families.

This document can be used as a framework for self-assessment, development, and maintenance of a nurse's knowledge, skills, and attitudes required to provide quality palliative nursing care. This framework also provides an outline for nursing education by including palliative care competences in the graduate education programs and influence curriculum development. In addition, this document will provide an assessment tool that will help in professional development and planning training to ensure delivery of high quality service to patients with life-threatening conditions and their families.

Scope of Practice

The World Health Organization (WHO) defines palliative care as “an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.” (WHO,1998)

Palliative care provides pain and other symptoms management; supports life and considers dying as a normal process; incorporates the physical, psychosocial and spiritual dimensions of care; and supports patients and families to live as good a quality of life as possible until death. Palliative care emphasizes the approach of care should meet the patient’s and their family’s needs. Palliative care is applicable early in the course of illness, in combination with other healthcare practices.

The JNC palliative nursing care framework provides a guide in achieving the knowledge, skills, and attitudes required for practice in palliative healthcare settings. Palliative care is provided in all care settings, including the hospitals, specialized palliative care unit’s ambulatory care, and homes. The scope of palliative care nursing is provided at the earlier stages within the trajectory of illness until death and extends to the bereavement period.

The Palliative Care Nurse Specialist

The palliative care nurse specialist is a registered nurse certified to provide specialized palliative care services involved in the care of patients with life-threatening conditions and their families. The palliative care nurse specialist must hold a minimum educational level of a diploma or specialized training from an accredited university or educational institution in a field of palliative care specialty listed and recognized by JNC.

Qualifications:

- Registered with the Jordan Nurses and Midwives Council (JNMC) and is licensed to practice under the Public Health Law.
- Obtained a higher diploma in palliative from an accredited university or educational institution.
- Passed the evaluation mandated by JNC according to the provisions of the bylaw on specialization.

The Advanced Palliative Care Nurse Specialist

The advanced palliative care nurse specialist is a registered nurse certified to provide specialized palliative care services involved in the care of patients with a life-threatening condition and their families. The advanced palliative care nurse specialist must hold a minimum educational level of a master's degree from an accredited university or educational institution in a field of palliative care specialty listed and recognized by JNC.

Qualifications:

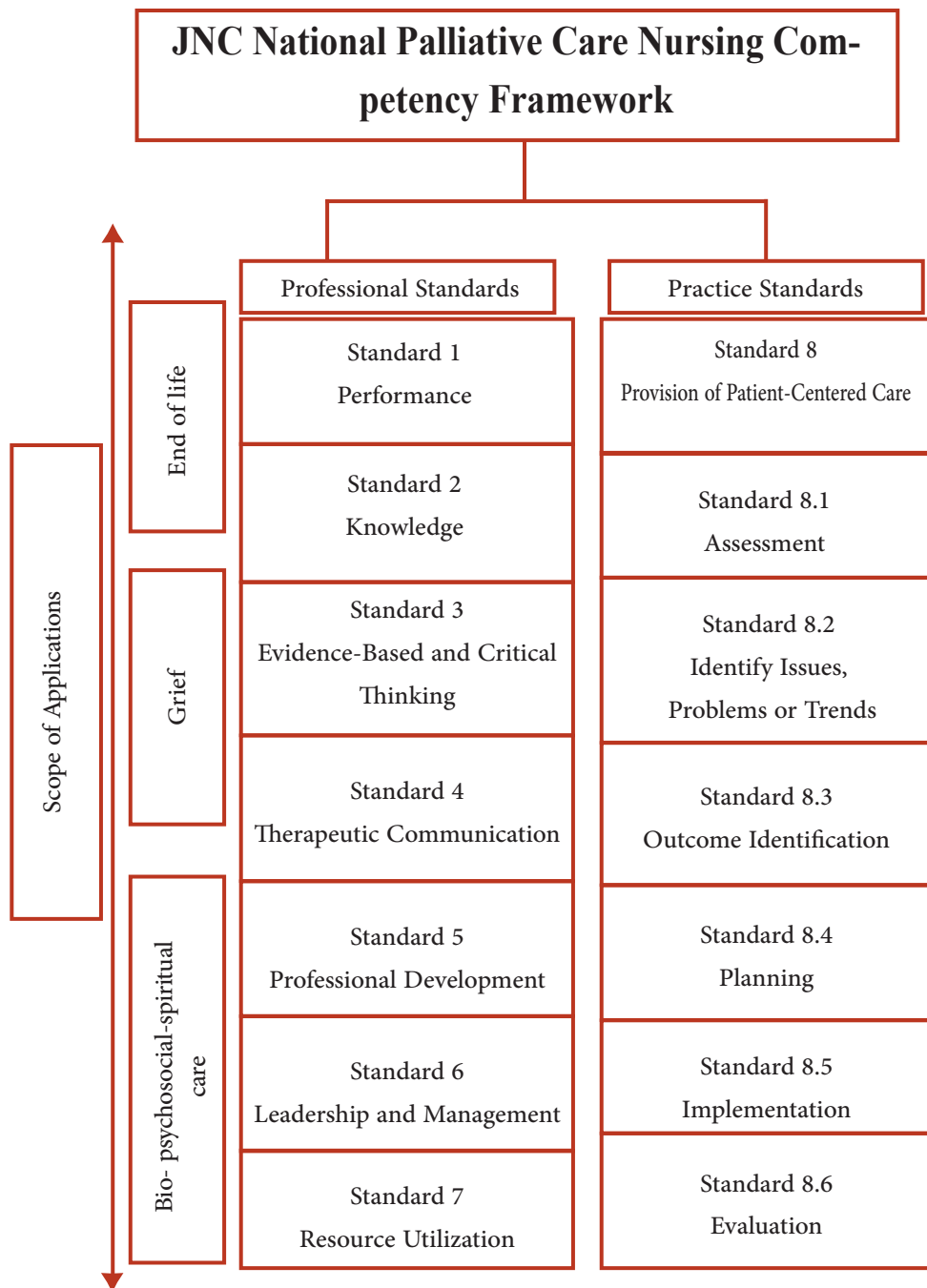
- Obtained a minimum of a second university degree (master's degree) from an accredited university or educational institution in a field of specialty listed and recognized by JNC.
- Registered with JNMC and licensed according to the Public Health Law provisions.
- Passed the evaluation mandated by JNC according to the provisions of the bylaw on specialization.

JNC National Framework for Advanced Palliative Care Nurse Specialist and Palliative Care Nurse Specialist

The JNC National Framework for Advanced Palliative Care Nurse Specialist and Palliative Care Nurse Specialist is divided into two domains:

- 1) professional standards, 2) practice standards

Figure 1: JNC National Palliative Care Nursing Competency Framework



Professional Standards

Professional standards are requirements that advanced palliative care nurse specialists and palliative care nurse specialists are expected to meet and maintain in performing their duties throughout their careers. The JNC professional standards cover six main standards:

1. Performance

Relates to the professional, legal, and ethical responsibilities, accountability, and advocacy for patient and group rights.

2. Knowledge

Relates to the concepts and principles of palliative care.

3. Evidence-based and critical thinking

Relates to reflection, skills, judgment, critical thinking, analysis, and self-appraisal.

4. Therapeutic communication

Involves professional communication, collaboration, consultation, and coordination with patients, families, peers, colleges, all levels of nursing staff, and the interdisciplinary healthcare team to provide healthcare services in the best interest of the patients.

5. Professional development

Relates to quality improvement and professional development activities, which may include certification and accreditation, articulating organizational policies, and guidelines.

6. Leadership and management

Includes nursing leadership, management, and administration to ensure and promote responsible nursing practice and service.

7. Resource utilization

Relates to utilization of appropriate resources, planning, and providing nursing services that are safe, effective, and financially responsible.

Practice Standards

This domain focuses on the provision of comprehensive, systematic, and prioritized palliative nursing care to achieve identified health outcomes. It consists of one standard, provision of patient-centered care, and six sub-sections: assessment, problem identification, outcome identification, planning, implementation, and evaluation .

Scope of Application

Palliative nurse scope of professional and practice standards and competencies apply for the following areas of palliative care: end of life, bereavement and grief, and biopsychosocial-spiritual care.

Measurement criteria

Measurement criteria are specific and measurable elements enabling the evaluation of the actual performance of the advanced palliative care nurse specialist and palliative care nurse specialist to meet each nursing standard. Measurement criteria are not written in order of importance, nor are intended to be an exhaustive list of criteria for each professional standard.

Section 1: JNC National Professional and Practice Standards for the Advanced Palliative Care Nurse Specialist and Palliative Care Nurse Specialist.

Standard 1: Performance

The advanced palliative care nurse specialist and palliative care nurse specialist meet the professional standards of maintaining legal and ethical responsibilities, accountability, safety, and advocacy of patient and group rights.

Standard 1.1: Practices within professional, legal and ethical nursing context within all relevant national legislation.

Core competency 1:

Fulfils the responsibility and accountability of palliative nursing professional activities.

Measurement criteria:

- Adheres to legislation governing nursing profession.
- Adheres to JNC palliative care nursing standards and competencies.
- Demonstrates awareness of legal implications in palliative nursing practices.
- Demonstrates awareness of the palliative nursing roles and responsibilities in reducing suffering and enhancing quality of life.
- Identifies major responsibilities of the patients, family, and the healthcare team in choosing and providing non-pharmacological interventions for symptoms management.

Core competency 2:

Practices in a way that acknowledges the patients' dignity, culture, values, and beliefs.

Measurement criteria:

- Assists patients regardless of race, culture, religion, age, gender, or physical or mental state.
- Protects patient's privacy and confidentiality.
- Understands and employs confidentiality limits.
- Maintains professional documentation of the patient in a secure location.
- Keeps records in an appropriately designated place.
- Respects patient's rights of well-being, self-determination, beneficence, and equity.
- Maintains effective process of care when challenged by differing values, beliefs, and risks.
- Demonstrates cultural sensitivity given the diversity of patients.
- Defines spirituality and its related terms such as the meaning of life, forgiveness, love and relatedness, hope, creativity, and religious faith and its expression for patients and families.

Core competency 3:

Recognizes general ethical principles and moral reasoning in providing palliative care and end of life care.

Measurement criteria:

- Recognizes the importance of goal-setting and advance care planning.
- Identifies major purposes and types of advanced directives.
- Recognizes that decisions about nutrition and hydration should be made in light of patient's goals and outcomes of care.
- Differentiates between stopping life-sustaining technology, such as mechanical ventilation or hemodialysis; euthanasia; and assisted suicide.

In addition, advanced palliative care nurse specialist will perform the following:

- Enforces the integration of national and international regulations, standards, protocols, guidelines, and policies into palliative care practice.
- Identifies the need for new procedures taking into consideration consumer demands, standards of safe practice, and availability of qualified personnel.
- Ensures that there are no regulations or bylaws that would constrain the advanced palliative nursing from incorporating the procedure into practice.
- Identifies mechanism for obtaining medical consultation, collaboration, and referral related to advanced procedures.
- Maintains documentation of the process used to achieve the necessary knowledge, skills, and ongoing competency of the expanded or new procedure.
- Demonstrates nursing accountability related to advance care planning.

- Recognizes the importance of establishing do not attempt resuscitation (DNAR) order for patients and family.
- Recognizes that there is a need to have portable orders and valid indicators of DNAR status for patients moving between facilities.
- Helps the patient and family or surrogate in making their decision regarding DNAR by verifying the benefits and burdens.
- Identifies ethical, legal, and religious perspectives about advance directives.
- Identifies potential risks that can result from the placement of a temporary or permanent feeding tube or the initiation of intravenous access to provide artificial nutrition and hydration.
- Helps the patient and family or surrogate in making their decision regarding permanent and temporary methods of feeding by verifying the benefits and burdens.
- Has the ability to respond ethically and legally to different types of euthanasia.

Core competency 4:

Advocates for patients, families and their rights for healthcare within institutional structures.

Measurement criteria:

- Protects the rights of patients, and families and supports informed choices.
- Identifies resources to meet the needs of patients, and families.
- Identifies procedures and practices that invade the rights of patients (futile care).

In addition, advanced palliative care nurse specialist will perform the following:

- Recommends policies and guidelines to preserve rights of patients and families.
- Recommends policies and guidelines when rights of patients are compromised.
- Advocates for a working culture that promotes motivation and enthusiasm towards professional development of knowledge and competencies as a requirement to achieve excellence in practice.
- Provides training and monitoring services for nurses and multidisciplinary team members to improve patient-centered competencies.

Standard 1.2 Undertakes safe responses and facilitates a physical, psychosocial, cultural and spiritual environment that promotes patients, and families safety and security

Measurement criteria:

- Adheres to nursing national safety guidelines for patients.
- Articulates emotional and psychological responses with patients in a professional manner.
- Provides responding environment by using effective interpersonal skills, and counseling professionals.
- Responds to the needs of dying patient's families in a proactive and timely manner.
- Recognizes personal loss responses, and prevents personal experiences of loss from negatively impacting on other people with a life-limiting condition or their families.
- Uses incident reports for unsafe health nursing practices.

Standard 2: Knowledge

The advanced palliative care nurse specialist and the palliative nurse specialist exhibit the concepts and principles of palliative care.

Standard 2.1: Bases education and practice on current evidence reflective of nursing, palliative care philosophy and other sciences to promote inspired environment for nurses and patients.

Core competency 1:

Has in-depth knowledge regarding the concept of palliative care as a holistic approach.

Measurement criteria:

- Demonstrates knowledge of the core concepts, principles, and goals of modern palliative care.
- Demonstrates understanding of the historical development and origins of palliative care internationally and in Jordan in particular.
- Understands the principles of palliative care according to the WHO palliative care model.
- Differentiates among the various concepts of palliative care, such as hospice care and end of life care.
- Understands the significance of the biopsychosocial-spiritual model of care that affects people with life-threatening conditions and their families throughout the continuum of care.
- Demonstrates knowledge of end of life concepts and issues, e.g., end of life decision-making, assisted suicide, palliative sedation, and different types of euthanasia.

Core competency 2:

Understands the relevant basic science related to pain and pain management approaches.

Measurement criteria:

- Explains the physiology and the pathophysiology of pain.
- Describes different types of pain.
- Differentiates among different etiologies of pain.
- Explains the principles of pain assessment.

Core competency 2.1:

Has an in-depth knowledge of pharmacological pain management.

Measurement criteria:

- Categorizes the uses of opioids in pain management.
- Lists the indications, mechanisms of action, routes, equianalgesic conversions, titration, side effects and its management, and rules of prescription.
- Describes the concepts of tolerance, physical dependence, addiction, and pseudo addiction.
- Explains the WHO ladder of pain management in relation to opioids.

Core competency 2.2:

Recognizes the use of non-opioid analgesics and adjuvant analgesics approaches.

Measurement criteria

- Lists the indications, mechanism of action, routes, side effects and its management, and rules of prescription.
- Explains the WHO ladder of pain management in relation to non-opioid analgesics and adjuvant analgesics.

Core competency 2.3:

Recognizes the uses of non-pharmacologic interventions to manage pain.

Measurement criteria:

- Identifies indications, mechanism of action, and the undesired effects of non-pharmacologic interventional pain management procedures used for pain management.
- Explains the role of health professions in pain management.

Core competency 3:

Has sufficient knowledge of the concept symptoms assessment and management for patients with life-threatening illnesses.

Measurement criteria:

- Identifies the most common physical, psychosocial, and spiritual symptoms experienced by patients with life-threatening illnesses.
- Explains the physiology and pathophysiology of distressing physical symptoms and analyzes the underlying cause(s) for each symptom.
- Identifies potential causes for the symptoms.
- Understands the main principles of symptoms assessment and management.
- Identifies drug of choice to treat each symptom based on the patient's condition.
- Explains the most common valid and reliable guidelines in treating symptoms.
- Lists the indications and side effects of medications prescribed for patients with life-threatening illnesses.
- Explains the different routes of drugs administration according to the patient's condition.

Core competency 4:

Has sufficient knowledge about death, dying, and end of life care.

Measurement criteria:

- Recognizes the impact of a terminal illness on the patient's physical, psychological, social, and spiritual well-being and their families.
- Identifies signs and symptoms of impending death.
- Identifies symptoms that affects quality of life at the time of death.

Core competency 5:

Has sufficient knowledge about loss, grief, mourning, and bereavement.

Measurement criteria:

- Discusses the stages of grief as a response to loss.
- Identifies types and manifestations of grief.
- Differentiates the manifestations of normal and complicated grief.
- Identifies family's coping mechanisms.
- Recognizes the vulnerabilities which may put a person at risk of encountering difficulties in their grief.
- Understands the personal impact of loss, grief, and bereavement.

Standard 3: Evidence-based and Critical Thinking

The advanced palliative care nurse specialist and palliative care nurse specialist use analytical skills, clinical judgment, critical thinking and analysis, and self-appraisal for evidence-based knowledge.

Core competency 1:

Participates in and utilizes research to create evidence in the field of palliative care, nursing science and/or other sciences.

Measurement criteria:

- Provides evidence-based rationale for all decisions and actions.
- Knows how and where to access information to support knowledge development for the nursing profession.
- Utilizes relevant literature to update palliative care, and the nursing profession and practice.
- Uses current healthcare research findings and other evidence to expand clinical knowledge, skills, abilities, and judgment, to enhance role performance and to increase knowledge of professional issues.

Core competency 2:

Demonstrates critical thinking and analytical skills in accessing, interpreting, and evaluating evidence-based knowledge.

Measurement criteria:

- Collects information from a variety of sources using assessment skills, and valid and reliable data collection instruments and methods.
- Identifies, analyzes, and uses relevant and valid information when making decisions.

- Uses best available evidence while respecting the values and beliefs of patients or families in the provision of nursing activities.
- Understands the knowledge required to meet the needs of complex situations and identifies options based on the depth and breadth of knowledge.
- Relates biopsychosocial needs and culture to healthcare needs.

In addition, the advanced palliative care nurse specialist will perform the following:

- Analyzes the effect of biopsychosocial-spiritual and financial issues on the environment and human health exposures.
- Updates and recommends guidelines and procedures based on current evidence.
- Contributes to palliative nursing care knowledge by conducting or synthesizing research and other evidence that examines, and evaluates current practice, knowledge, theories, criteria, and creative approaches to improve healthcare outcomes.
- Disseminates research findings through activities such as presentations, publications, consultation, and journal clubs.
- Continues to change healthcare needs in a progressive complex healthcare environment.

Standard 4: Therapeutic Communication

The advanced palliative care nurse specialist and palliative care nurse specialist establish professional communication, collaboration, consultation and coordination with patients, families, peers, colleagues, and other healthcare providers to provide healthcare services.

Core competency 1:

Maintains a therapeutic relationship when communicating with patients with a life-threatening illness and their families.

Measurement criteria:

- Uses appropriate communication skills and strategies when communicating with patients with a life-threatening illness and their families.
- Encourages patients and families to clarify and communicate their values.
- Identifies the appropriate time to communicate with patients with a life-threatening illness and their families.
- Recognizes common barriers, facilitators, and challenges when communicating with patients with a life-threatening illness and their families.
- Identifies the roles and responsibilities of each member in the interdisciplinary team in the communication process.
- Uses clear and concise language that respects whole person care in the documentation process.
- Provides concise statements about the significance of appearance, voice quality, and/or non-verbal communication in clinical interactions.

Core competency 2:

Understands the process of communicating bad news in a compassionate manner

Measurement criteria:

- Assesses patients and family members' wishes regarding the amount of information they want to receive and share.
- Utilizes appropriate evidence-based guidelines and skills when sharing bad news.
- Responds effectively to patients and family members' responses to bad news.

Core competency 3:

Ensures patients' and their families' understanding and participation in decision-making regarding palliative care.

Measurement criteria:

- Assesses patient's and family members' capacity to make decisions.
- Identifies patient's and family members' wishes regarding palliative care decisions.
- Considers patient's and family members' wishes regarding the extent of their participation in decision-making regarding palliative care.

Core competency 4:

Communicates effectively with the interdisciplinary team.

Measurement criteria:

- Explains the need for an interdisciplinary team in palliative care settings.
- Understands the role of each member in the interdisciplinary team in assessing, planning, and implementing care for patients with a life-threatening illness and their families.
- Demonstrates respect and compassion towards members of a multidisciplinary team.
- Accepts feedback from interdisciplinary team members.
- Maintains a balance relationship (i.e., keeping boundaries) with other members of a multidisciplinary team.

In addition, the advanced palliative care nurse specialist will perform the following:

- Demonstrates the ability to educate patients and family members about the biopsychosocial-associated life-threatening illnesses.
- Demonstrates an ability to deliver information sensitively, clearly, and in a timely manner during the dying phase.
- Identifies and utilizes support resources to cope with multiple and cumulative losses and grief.
- Provides consolation services to the patients, their families, and healthcare providers.
- Collaborates with healthcare team to inform policy and guideline development.

- Coordinates human, health system and community resources, and strategies including policies, services, and environmental modifications to develop professional care.
- Promotes open communication systems for professional organization.
- Coordinates learning activities that reflect current evidence to improve nursing competences and professional development.
- Sets limits in the nurse-patient relationship to curtail boundary violations.

Standard 5: Professional Development

The advanced palliative care nurse specialist and palliative care nurse specialist enhance the quality and effectiveness of the nursing profession and practice, obtain certification and accreditation, and articulate organizational policies and guidelines.

Core competency 1:

Drives quality improvement programs and activities.

Measurement criteria:

- Ensures effective mechanisms and programs in implementing and evaluating professional nursing standards.
- Maintains continuing education programs based on the Jordanian continuing education framework.
- Promotes learning and research environment strategies and techniques.
- Supports quality performance improvement activities.

Core competency 2:

Participates in ongoing professional development.

Measurement criteria:

- Participates in educational activities and builds personal and professional knowledge base.
- Commits to lifelong learning through self-reflection and inquiry.
- Acquires knowledge and skills appropriate to specialty area, practice setting, role, or situation.
- Obtains or maintains professional certification.
- Uses the results of quality program activities to initiate change in nursing profession and practice.

- Uses creativity and innovation in nursing activities to improve care delivery and population outcomes.
- Acts as role model for other members of the healthcare team.

Core competency 3:

Uses appropriate strategies to evaluate professional work environment.

Measurement criteria:

- Recognizes work-related symptoms or stressors, e.g., fatigue and moral distress.
- Undertakes regular self-evaluation of professional activities and practices.
- Considers feedback from colleagues and critically reflects on personal professional performance.
- Uses evaluation and monitoring processes to identify areas of strength and areas of weaknesses to determine which areas nursing professional development would be beneficial.

In addition, the advanced palliative care nurse specialist will perform the following:

- Evaluates and regulates processes of patient's capabilities through credentialing, certification, and accreditation.
- Incorporates organizational policies and guidelines according to current best evidence.
- Contributes to continuing education, preceptorship, and mentoring programs for colleagues' development.
- Participates in systematic peer review.

Standard 6: Leadership and Management

The advanced palliative care nurse specialist and palliative care nurse specialist demonstrate leadership and management skills to carry out the responsibility of nursing services .

Core competency 1:

Promotes self-awareness of values and beliefs, self-development, and personal resilience.

Measurement criteria:

- Clarifies personal values and beliefs that are related to death, culture, and religion and how these influence the provision of palliative care.
- Determine strategies that promote self-growth and well-being.
- Reflects on personal professional growth and self-care in order to assist patients and their families.
- Exhibits creativity and flexibility through times of change.
- Demonstrates energy and passionate for quality work.
- Accepts mistakes of oneself and others to create a practice culture in which risk-taking is promoted and expected.
- Inspires loyalty and equity in valuing patients, families and colleagues.

Core competency 2:

Provides nursing professional leadership and management skills.

Measurement criteria

- Maintains a key role in the work setting by participating in committees, councils, and administrative roles.
- Participates in professional organizations activities.

- Influences decision-making bodies and policy makers to improve patients and group care, healthcare services, and policies.
- Accepts change based on evidence and addresses emerging situations.
- Develops innovative solutions and takes action to resolve conflicts.
- Participates in disaster management plans.
- Promotes communication of information through writing, publishing, and presentations for professional and lay audiences.

In addition, the advanced palliative care nurse specialist will perform the following:

- Models expert practice to inter-professional team members and healthcare consumers.
- Delegates profession practices and aspects of care to others according to their competence and scope of practice.
- Provides effective supervision to ensure that delegated care and professional practice are provided safely and accurately.
- Provides direction to enhance effectiveness of interdisciplinary team work.
- Upholds accountability and responsibility when delegating aspects of care to others.
- Influences decision-making bodies to improve the professional practice environment and healthcare consumer outcomes.

Standard 7: Resource Utilization

The advanced palliative care nurse specialist and palliative care nurse specialist utilize appropriate resources to plan and provide nursing services that are safe, effective, and financially responsible.

Core competency 1:

Makes an equitable decision in utilizing cost-effective and beneficial resources.

Core competency 1.1:

Evaluates factors such as safety, effectiveness, availability, cost and benefits, efficiencies, and impact on the profession and practice.

Measurement criteria:

- Evaluates strategies based on cost-effectiveness and impacts on the environment.
- Monitors resource allocation and utilization.

Core competency 1.2:

Makes equitable decisions about the allocation of resources based on the needs of patients and/or families.

Measurement criteria:

- Demonstrates knowledge on where and how to access and evaluate resources.

Core competency 1.3:

Administers resources for professional and practice development.

Measurement criteria:

- Participates in innovative solutions that address effective resource utilization and maintenance of quality.
- Obtains training on advanced applications and new technology.

In addition, advanced palliative care nurse specialist will perform the following:

- Allocates resources based on identified needs and goals.
- Assists stakeholders in identifying and securing appropriate resources.
- Promotes activities that assist others in becoming informed about costs, risks, and benefits of plans and solutions.
- Uses evaluation methods to measure safety and effectiveness.

Additional competencies for advanced palliative care nurse specialist:

- Determines the population who are served by a palliative care team.
- Analyzes recent evidence-base to decide what assessment tools are appropriate to apply in the clinical setting.

II: The JNC National Practice Standards for the Advanced Palliative Care Nurse Specialist and Palliative Care Nurse Specialist

Standard 8: Provision of Patient-Centered Care

The advanced palliative care nurse specialist and palliative care nurse specialist provide comprehensive, systematic, and prioritized nursing care to patients and families to achieve identified health outcomes.

Standard 8.1: Assessment

Conducts a comprehensive and systematic nursing assessment to collect data pertinent to issues, situations or trends.

Core competency 1:

Demonstrates the ability to apply palliative care approach as early as is appropriate.

Measurement criteria:

- Uses reliable valid evidence-based assessment tools or framework to collect biopsychosocial-spiritual data.
- Assesses nutrition and hydration status in light of patient's goals and outcomes of care.
- Assesses symptoms that affects quality of life at the time of death during palliative care.
- Identifies signs and symptoms of death.
- Identifies the patient's and their family's cultural, values, and spiritual belief systems.
- Identifies the patient's and their family's sacred symbols and relationships that provide meaning.
- Assesses patient's and family's coping strategies.

- Assesses the sources and manifestations of distress for the patient and family.

Additional competencies for advanced palliative care nurse specialist:

- Takes decisions regarding what assessment tools to use in the clinical setting.
- Uses standardized tools to assess prognosis and life expectancy.
- Utilizes different standardized instruments to assess and identify spiritual background, preferences, and related beliefs, rituals, and practices of the patients with life-threatening illnesses and their families.
- Assesses specific risks, including suicide, homicide, violence, abuse, neglect, and drug abuse and monitors risk over time.

Standard 8.2: Problem Identification

Analyzes assessment data to determine the identify issues, problems or trends.

Measurement criteria:

- Analyses and interprets assessment data accurately.
- Integrates clinical, psychological, cultural and economic data to support problem identification.
- Examines and synthesizes complex information and data.
- Identifies the dying patient's priorities or concerns taking in account the patient's vulnerabilities and resources.
- Identifies the individuality of good death and facilitates its achievement.
- Helps the patients and their families identify spiritual strengths, vulnerabilities, resilience, and resources.
- Diagnoses the patient's symptoms.
- Prioritizes problems from assessment data.
- Documents issues and problems accurately.

Standard 8.3: Outcome Identification

Identifies expected outcomes for individualized plan.

Measurement criteria:

- Develops context specific outcomes based on assessment data and evidence-based literature in relation to ethical consideration, patient or group preferences, costs, resources, and risk-benefit ratio in collaboration with other healthcare teams.
- Reviews and updates expected outcomes based on change in patient or group conditions.
- Attends to patient's expectations and the involvement of family in the care plan.
- Documents expected outcomes accurately.

Standard 8.4: Planning

Plans nursing care in coordination with the healthcare team to develop options of care to achieve expected outcomes.

Measurement criteria:

- Determines priorities of healthcare needs of patients and families.
- Identifies time frame for achievement of the expected outcomes.
- Documents plan of care accurately.

Standard 8.5: Implementation

Provides comprehensive, safe, and effective evidence-based and patient-centered care to achieve identified health outcomes

Measurement criteria:

- Implements nursing care safely, effectively, and in a timely manner.
- Provides nursing care according to the agreed pre-determined plan.
- Coordinates all resources to implement the care plan.
- Prioritizes workload based on the patient's or group's needs, and optimal time for intervention.
- Manages pain and symptoms effectively using pharmacological and non-pharmacological approaches.
- Assists the patients and their families in their own expression of biopsychosocial-spiritual needs and coping strategies.
- Makes referrals throughout disease trajectory including end of life to professionals with specialized psychosocial-spiritual advisor or group.
- Uses best-practice guidelines to address patient's or group's concerns and needs.
- Shares the needs assessment with other concerned healthcare teams.
- Provides a variety of interventions and approaches to spiritual care related to the patient's and family's needs assessment and developed inter-professional care plans.
- Facilitates prayer, rituals, rites, ceremonies, and other psychosocial and spiritual services.
- Documents comprehensive assessment, implementation, and referral data.

Additional competencies for advanced palliative care nurse specialist:

- Refers appropriate health resources to patients who develop tolerance, physical dependence, or addiction.
- Prescribes some of the pharmacologic management of pain according to the agreed guidelines and policies of the healthcare institution and national laws.
- Provides consultation services regarding pain and symptom management.
- Understands the principles of advance care planning and the importance of appropriate timing to engage in discussions about preferences for care with patients with life-threatening illnesses and their families.
- Recommends or develops valid assessment tools to gather information and direct treatments at end of life.
- Assists families to access loss, grief, and bereavement information and support according to their needs and according to the available resources.
- Provides consolation services to the patients, their families, and healthcare providers.

Standard 8.6: Evaluation

Evaluates advancement of expected patient's health outcomes in collaboration and consultation with the healthcare team.

Measurement criteria:

- Determines progress of patients and families toward planned outcomes.
- Revises the plan of care and determines further outcomes in accordance with evaluation data.
- Judges the efficiency of bio-psychosocial spiritual interventions related palliative care .

References:

- Ahmedzai, S. H., Costa, A., Blengini, C., Bosch, A., Sanz-Ortiz, J., Ventaf-
rida, V., Verhagen, S. C., & international working group convened by
the European School of Oncology. (2004). A new international frame-
work for palliative care. *European Journal of Cancer*, 40(15), 2192-
2200. doi:10.1016/j.ejca.20004.06.009
- American Nurses Association. (2014) Nursing: Scope and Standards of
Practice (3rd ed.). Silver Spring, Maryland: American Nurses Publish-
ing.
- Cancer, WHO Definition of Palliative Care. (n.d.) In the World Health Organi-
zation. Retrieved from <http://www.who.int/cancer/palliative/definition/en/>
- Ferrell, B., Coyle, N., & Paice, J. (2015), Oxford Textbook of Palliative
Nursing (4th ed.). New York: Oxford University Press.
- Gamondi, C., Larkin, P., & Payne, S. (2013). Core competencies in palli-
ative care: an EAPC white paper on palliative care education—part 2.
European Journal of Palliative Care, 20(3), 140-145.
- Jordanian Nursing Council. (2016) National Standards for Registered Nurse.
- Morrison, L. J., Scott, J. O., Block, S. D., & American Board of Hospice and
Palliative Medicine Competencies Work Group. (2007). Developing ini-
tial competency-based outcomes for the hospice and palliative medicine
subspecialist: phase I of the hospice and palliative medicine competen-
cies project. *Journal of palliative medicine*, 10(2), 313-330. doi:10.1089/
jpm.2006.9980

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