

PALLIATIVE CARE (ADULTS)

EXPERT PROFESSIONAL PRACTICE CURRICULUM

Professional curriculum to support members with
the knowledge, skills, experience and behaviours
to advance in their practice

2014

Disclaimer

This publication is intended as a guide and may not always include all information relating to its subject matter.

You should interpret all information and advice in light of your own professional knowledge and all relevant pharmacy and healthcare literature and guidelines.

Nothing in this publication constitutes legal advice and cannot be relied upon as such.

Whilst care has been taken to ensure the accuracy of content RPSGB excludes to the fullest extent permissible by law any liability whether in contract, tort or otherwise arising from your reliance on any information or advice.

This curriculum has been produced by RPS Faculty partners to support continued advancement in all areas of pharmacy practice.

During 2014 the Curricula Panel of the RPS Faculty will continue to develop the vision for post graduate development to produce the highest quality pharmacy workforce. The Faculty will continue to work with experts and specialist groups to form new guidance for professional advancement. The layout and themes in these curricula may be subject to change. Reviews of curricula can be expected annually while the Faculty is being set up. Please check that you are using the most up to date version of the curricula on the RPS Faculty website (www.rpharms.com/faculty).

Acknowledgements

The mapping tables in this document use the Royal Pharmaceutical Society Advanced Pharmacy Framework (APF) which builds on the widely used Advanced to Consultant Level Framework (ACLF) which was developed by the Competency Development and Evaluation Group (CoDEG).

Professional Curriculum for Advanced Pharmacy Practice in Palliative Care

Pharmaceutical Palliative Care

This curriculum provides an overview of the knowledge, skills, experience and behaviours required to practice at advanced level in pharmaceutical Palliative Care at three levels: Advanced Stage I, Advanced Stage II and Mastery in line with the requirements of the APF.

The document is intended to be used by practitioners to support the development of their practice at advanced level in pharmaceutical Palliative Care. It encourages practitioners to think critically and to use knowledge in Palliative Care, supporting informed decision making using knowledge from this and other related therapeutic areas to promote optimal medicines management for patients. The curriculum also encourages the development of skills in informed, critically relevant, effective discussion with other health and social care practitioners, peers and managers, where appropriate, to maximise optimal medicines related care for patients.

This document is intended to be as useful to the wider community working with Palliative Care as possible from all sectors of care. The syllabus is not intended to cover every aspect of practice and inevitably overlaps with a number of specialities. Users are encouraged to link this syllabus with others in related fields e.g. cancer care, cardiology, renal, respiratory, critical care, gastrohepatology, infection management, dermatology, endocrinology, care of the older person (also known as critical adjacencies).

This syllabus will be reviewed six months from production of version 1 and then annually, in order to keep pace with current developments. Every five years there will be an external review including external experts to re-evaluate the curriculum. Feedback is encouraged to ensure that the document is error-free, fit for purpose and accurately reflects the needs of pharmacists working at the specified levels.

Knowledge, Skills, Experience and Behaviours

Practitioners will develop their portfolios linked to the APF (www.rpharms.com). The recommended knowledge, skills, experience and behaviours which practitioners require to demonstrate competence at Advanced Stage I, Advanced Stage II and Mastery stage for the Expert Professional Practice; Collaborative Working Relationships; Leadership; Management; Education, Training and Development; and Research and Evaluation clusters of the APF in a Clinical Speciality are listed here with additional notes and specific examples for Palliative Care. The APF Mapping tables in this document links the recommended knowledge, skills, experience and behaviours with the relevant developmental descriptors. Examples of the recommended knowledge, skills, experience and behaviours are included below. For a comprehensive list see the mapping tables.

Advanced Stage I

- Demonstrates basic competency in delivering patient care to palliative care patients through a record of reflective practice under the guidance of a more experienced palliative care pharmacist.
- Basic ability to recognise problems and formulate treatment plans.
- Monitored ward visits/mentorship.
- Can perform case presentation.
- Can perform bedside case presentation.
- Ability to recommend justifiable courses of action.
- Demonstrate accurate reasoning.
- Recognises own limitations.
- Able to make decisions in a timely manner with limited information.
- Ability to prioritise problems.
- Demonstrates the ability to follow organisational guidance related to the palliative care.
- Ability to persuade others about individual episodes of care.
- Demonstrates self motivation.
- Negotiates issues around an individual case.
- Communicates to palliative care patients/next of kin in difficult settings.
- Demonstrates learning in difficult situations.
- Listens to patients, their next of kin, visitors and the multidisciplinary team (MDT).
- Member of PCPN or other local/national associations that provide appropriate level of clinical support.
- Presents to pharmacy and the multidisciplinary team (MDT).
- Communication is always clear, precise and appropriate.
- Works as part of clinical pharmacy team.
- Recognises a situation outside competence and refers to supervising pharmacist (appropriate pharmaceutical problems are always appropriately referred).

Advanced Stage II

- Carries out teaching regarding treatment of palliative care patients to pharmacy, nursing, medical staff and other allied healthcare professionals (AHPs).
- Responsible for delivery of care of a wide range of palliative care and called a palliative care pharmacist.
- Produces increasingly complex treatment plans.
- Demonstrates the ability to appraise information, make an informed decision with the evidence available and be able to justify/defend the decision to others.
- Develops policies and procedures specifically for palliative care inpatient unit, outpatients, day hospice and palliative patients throughout the wider organisation . Also via the CCGs for palliative care patients in the community.
- May be involved in the development of supplementary/independent prescribing in palliative care.
- Ability to persuade or influence the palliative care team/pharmacy team with regard to complex cases, organisational change, research, guidelines and protocols.
- Motivates pharmacy clinical team (e.g. to follow a guideline, collect data).
- Negotiates issues between palliative care team and pharmacy such as unlicensed and off-label use of medicines and supply of medicines for use in syringe drivers.
- Communicates to junior staff and multidisciplinary team colleagues.
- Is aware of communication skills and trained in advanced communication with palliative care patients.
- Participating Member of PCPN or local specialist palliative care group.
- Participates in local network, member of pharmacy/cancer board where appropriate.
- Presents to senior MDT including consultant level.
- Shares expertise with pharmacy and palliative care teams.
- Recognition of expertise by the multidisciplinary team.
- Receives and effectively responds to requests for advice in specialist field from within the specialist area within the organisation , teaches junior staff to do so.
- Active participation in multi-disciplinary task forces / service developments.

Mastery

- Applies specialist palliative care knowledge to patients with cancer, non-cancer and multiple pathologies to ensure patients are treated in their preferred place of care.
- Leads palliative care MDT.
- Communicates at an advanced level, is aware of cultural and spiritual values and delivers holistic care.
- Develops new standards and strategies nationally.
- Applies and implements national guidelines and leads on interface issues.
- Influences organisational development and motivates pharmacy at regional or national level.
- Performs audit to inform research.
- Publishes in peer reviewed journals.
- Teaches holistic care of complex patients to pharmacy, healthcare professionals and in higher education institutes.
- Works with national and international groups in palliative care.
- Participates/leads (inter)national networks in palliative care.
- Presents at regional and (inter)national conferences.
- Has expertise recognised by the wider palliative care community regionally and nationally.

Resources for Curricula Development

Useful Websites

- www.pcpn.org.uk
- www.nice.org.uk
- www.npsa.nhs.uk
- www.dh.gov.uk
- www.palliativedrugs.com
- www.cancerbackup.org.uk
- www.mariecurie.org.uk
- www.macmillan.org.uk
- www.britishpainsociety.org
- <http://www.palliativecareguidelines.scot.nhs.uk/default.asp>
- <http://www.journalclub.pallcare.info/>
- <http://pallipedia.org/>
- <http://www.apmonline.org>
- <http://www.eapcnet.eu/>

Textbooks

- Twycross R., Wilcock A., Palliative Care Formulary. Fourth edition. Palliativedrugs.com. 2011
- Twycross R., Wilcock A., Stark Toller C., Symptom Management in Palliative Care. Palliativedrugs.com 2010
- Doyle, D., Hanks, G. Oxford Textbook of Palliative Medicine. Third edition. Oxford University Press. 2005
- Dickman, A., Schneider, J. The Syringe Driver: Continuous subcutaneous infusions in palliative care. Third edition. Oxford University Press. 2011
- Watson M., Lucas C., Hoy A., Wells J. Oxford Handbook of Palliative Care. Second edition. Oxford University Press. 2009
- Dickman A., Drugs in Palliative Care. Oxford University Press. 2010
- Souhami R., Tobias J., Cancer and its Management. Fifth edition. Blackwell Publishing. 2005
- Watson M., Lucas C., Hoy A., Back I. et al. Palliative Adult Network Guidelines. Third Edition. Tricord. 2011
- Twycross R. Introducing Palliative Care. Fourth edition. Radcliffe Medical Press. 2003
- Fallon M., Hanks G., ABC of Palliative Care. Second edition. Blackwell Publishing. 2006
- Lugton J. Communicating with Dying People and their Relatives. Radcliffe Publishing Ltd. 2002

Examples of Journals to Refer to

- Palliative Medicine
- Journal of Pain and Symptom Management
- New England Journal of Medicine
- British Medical Journal
- The Lancet
- Pharmaceutical Journal and Clinical Pharmacist
- American Journal of Hospital Pharmacy

National Guidance

- NICE Cancer Service Guidance Improving supportive and palliative care for adults with cancer. 2004
- NICE Quality Standard. End of Life Care for Adults QS13. 2011
- NICE Clinical Guideline. Opioids in Palliative Care CG140. 2012
- Gold Standards Framework
- Palliative Care Funding Review
- DOH. End of Life Care Strategy – promoting high quality care for all adults at the end of life. 2008
- Diabetes UK. End of life diabetes care: clinical care recommendations. 2012
- NCPC. Improving end of life care in neurological conditions: a framework for implementation. 2010
- NCPC. Parkinson's and the last days of life: consensus statement on the management of symptoms for people with Parkinson's and related conditions in the last days of life. 2011
- Royal College of Physicians and British Society of Gastroenterology. Oral feeding difficulties and dilemmas: a guide to practical care, particularly towards the end of life. 2010

Supporting References and External Resources

- National Patient Safety Agency
- Scottish Medicines Consortium
- Help the Hospices
- National Council Palliative care
- CytP450
- NeLMS – palliative care
- Cochrane library
- Prodigy
- Local cancer and palliative networks

APF Mapping Tables

The following tables list the knowledge, skills, experience and behaviours recommended to demonstrate the APF competencies for the Expert Professional Practice and Building Working Relationship clusters mapped against the relevant APF developmental descriptors. It is intended primarily to support practitioners to develop their practice, but may be useful for portfolio preparation. All statements relate to the practitioner's area of practice/clinical speciality.

The competencies listed for "Advanced Stage I", "Advanced Stage II" and "Mastery" are additive, i.e. those at "Advanced Stage II" build on the competencies established in "Advanced Stage I", those at "Mastery" build on the competencies established in "Advanced Stage II". Practitioners are expected to demonstrate "Advanced Stage I" first before moving on to "Advanced Stage II" and in "Advanced Stage II" before moving on to "Mastery". Those wishing to demonstrate "Advanced Stage II" will usually be expected to have demonstrated "Advanced Stage I" previously and those wishing to demonstrate "Mastery" will usually be expected to have demonstrated "Advanced Stage II" previously..

A pharmacist starting to specialise in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage I. A practitioner having attained Advanced Stage I in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Advanced Stage II. A practitioner having attained Advanced Stage II in an area of Expert Professional Practice might be expected to be working towards attaining competencies at Mastery stage.

At Advanced Stage I practitioners are expected to build on the General Level Framework competencies and (for the relevant developmental descriptors) to demonstrate experience of caring for patients with disorders, pharmaceutical care issues and co-morbidities that are commonly found in their speciality.

At Advanced Stage II practitioners are expected to build on Advanced Stage I competencies and (for the relevant developmental descriptors) to demonstrate experience of caring for patients with complex co-morbidities or pharmaceutical care issues, or those with more specialist conditions in their speciality.

At Mastery stage practitioners are expected to build on Advanced Stage II competencies and (for the relevant developmental descriptors) to demonstrate experience of caring for patients especially in complex specialist areas. To participate at a regional and national level for strategic planning and guidance; to be involved with research development and publication in peer reviewed journals and be recognised as a specialist by the wider palliative care community.

Expert Professional Practice – Expert Skills and Knowledge (Cluster I.1)

Improving standards of pharmaceutical care for patients.

I.1 EXPERT SKILLS AND KNOWLEDGE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
<p>APF competency developmental descriptors</p>	<p>Demonstrates general pharmaceutical skills and knowledge in core areas.</p> <p>In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.</p>	<p>Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s).</p> <p>In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).</p>	<p>Advances the knowledge base in defined area(s).</p> <p>In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.</p>
<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Application of core specialist knowledge of principles of symptom control in palliative care.</p> <p>Application of basic understanding of drugs used in palliative care e.g. analgesia, laxatives, anti-emetics, etc.</p> <p>Experience of caring for patients with simple palliative care needs and an understanding of appropriate times to discuss discontinuation of medication with patients, carers and healthcare professionals.</p> <p>Understanding of the use of drugs in patients with organ impairment.</p> <p>Comprehensive knowledge of current controlled drug legislation in all healthcare settings.</p> <p>Management of pharmaceutical waste in all healthcare settings.</p>	<p>Able to work with palliative care MDT.</p> <p>Application of specialist knowledge of principles of symptom control in palliative care in any setting to ensure patients are treated in their preferred place of care.</p> <p>Understanding of chemotherapy and radiotherapy regimes used during the palliative phase.</p> <p>Consider psychosocial aspects of patient care, e.g. Advanced communication skills; Patient and/or carers religious/spiritual beliefs.</p> <p>Carries out teaching regarding basic principles of symptom control in palliative care to pharmacy, nursing, medical staff and other healthcare professionals (HCPs).</p>	<p>Application of specialist knowledge of principles of palliative care in patients with both cancer and non-cancer disease and multiple pathologies, in any setting to ensure patients are treated in their preferred place of care.</p> <p>Understanding of prognostic indicators to guide treatment recommendations.</p> <p>Able to identify knowledge gaps and add new knowledge.</p> <p>Audit to inform research.</p> <p>Involved in research and leads research where appropriate.</p> <p>Publications in peer reviewed journals.</p>

Expert Professional Practice – Expert Skills and Knowledge (Cluster I.1)

Improving standards of pharmaceutical care for patients.

I.1 EXPERT SKILLS AND KNOWLEDGE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
<p>APF competency developmental descriptors</p>	<p>Demonstrates general pharmaceutical skills and knowledge in core areas.</p> <p>In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review general pharmaceutical care programmes for patients in core areas.</p>	<p>Demonstrates in-depth pharmaceutical skills and knowledge in defined area(s).</p> <p>In addition for patient focussed roles: Is able to plan, manage, monitor, advise and review in-depth/complex pharmaceutical care programmes for patients in defined area(s).</p>	<p>Advances the knowledge base in defined area(s).</p> <p>In addition for patient focussed roles: Advances in-depth/complex pharmaceutical care programmes for patients.</p>
<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Knowledge of use of drugs beyond licence.</p>	<p>Able to interpret and implement changes in controlled drug legislation and pharmaceutical waste guidance within area of practice.</p> <p>Experience of caring for patients with complex palliative care needs in specialist and non-specialist environments.</p> <p>Audit to inform practice.</p>	<p>Applies specialist knowledge across interface influencing care of patients in all sectors.</p> <p>Carries out teaching regarding holistic care of patients with complex palliative care needs to pharmacy, nursing, medical staff and other HCP's.</p> <p>Links with higher education institutes.</p>

Expert Professional Practice – Delivery of Professional Expertise (Cluster 1.2)

Improving standards of pharmaceutical care for patients.

I.2 DELIVERY OF PROFESSIONAL EXPERTISE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates accountability for delivering professional expertise and direct service provision as an individual.	Demonstrates accountability for the delivery of professional services and expertise via a team or directly to groups of patients/clients/users.	<p>Demonstrates accountability for the delivery of professional expertise at a defined higher level.</p> <p>May include providing expertise and service delivery nationally or at a strategic level.</p>
<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Demonstrates basic competency in delivering care to patients with palliative care needs through a record of reflective practice.</p> <p>Ensure that appropriate patient documentation is maintained for medicines management.</p> <p>Able to report adverse incidents relating to meeting the palliative care needs of the patient.</p> <p>Understanding of the processes behind 24 hour access to palliative care medication.</p>	<p>Responsible for direct delivery of pharmaceutical care to defined groups of patients such as those in a hospice or hospital, in their own home, nursing or other care setting, e.g. prisons.</p> <p>Supports carers in the delivery of pharmaceutical care.</p>	<p>Ensures strategic decisions are made and implemented to maintain the delivery of a patient focussed medicines management/pharmacy service to patients with palliative care needs.</p> <p>Implements this, breaks barriers to and influences patient care across traditional and non-traditional boundaries of care.</p> <p>Develops new standards and strategies to improve patient care nationally.</p> <p>Accountable for direct delivery of pharmacy service to commissioners.</p>

Expert Professional Practice – Reasoning and Judgement (Cluster 1.3)

Improving standards of pharmaceutical care for patients.

I.3 REASONING AND JUDGEMENT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
<p>APF competency developmental descriptors</p>	<p>Demonstrates ability to use skills in a range of routine situations requiring analysis or comparison of a range of options.</p> <p>Recognises priorities when problem-solving and identifies deviations from the normal pattern.</p>	<p>Demonstrates ability to use skills to make decisions in complex situations where there are several factors that require analysis, interpretation and comparison.</p> <p>Demonstrates an ability to see situations holistically.</p>	<p>Demonstrates ability to use skills to manage difficult and dynamic situations.</p> <p>Demonstrates ability to make decisions in the absence of evidence or data or when there is conflicting evidence or data.</p>
<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Basic ability to recognise medication and communication issues and formulate treatment plans.</p> <p>Monitored ward visits/mentorship in secondary care establishments. Peer/medical supervision in primary care setting.</p> <p>Can perform case presentation appropriate to patient's place of care.</p> <p>Ability to recommend justifiable courses of action.</p> <p>Demonstrate accurate reasoning.</p> <p>Recognises own limitations.</p> <p>Able to make decisions in a timely manner with limited information.</p> <p>Ability to prioritise problems.</p>	<p>Produces innovative treatment plans for patients with highly complex physical and/or emotional needs.</p> <p>Demonstrates an ability to appraise information, make an informed decision with the evidence available and be able to justify/defend the decision to others</p> <p>Actively contributes to all aspects of patient care through participation in organisational MDT meetings/ward rounds achieving holistic care for patients.</p>	<p>Act as an external reference of experience clinically and strategically across the interface.</p> <p>Demonstrates an ability to make decisions in the absence of evidence or data or when there is conflicting evidence or data.</p> <p>Actively contributes to all aspects of patient care by working with professionals in all sectors inside and outside of the organisation, achieving holistic care for patients. This should include both health and social care professionals.</p> <p>Able to lead palliative care MDT discussions and decisions.</p> <p>Ensures clinical pharmacy management plans are implemented in the patients preferred place of care which may be outside current primary area of practice e.g. implementing care plans when moving from an institution to home or visa versa.</p>

Expert Professional Practice – Professional Autonomy (Cluster I.4)

Improving standards of pharmaceutical care for patients.

I.4 PROFESSIONAL AUTONOMY	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Is able to follow legal, ethical, professional and organisational policies/procedures and codes of conduct.	Is able to take action based on own interpretation of broad professional policies/procedures where necessary.	Is able to take action based on own interpretation of broad professional policies/procedures where necessary.
Recommended knowledge, skills, experience and behaviours	Is able to follow Trust/local guidance/national guidance related to the provision of palliative care to patients.	<p>Develops local palliative care guidelines.</p> <p>Participates in the development of independent prescribing in palliative care in both self and others within speciality.</p>	<p>Responsible for the application and implementation of national guidelines to locality/area of work/primary and secondary care.</p> <p>Leads on issues across the interface/Trust/organisation locality related to Palliative Care.</p> <p>Works with national and international groups and bodies with respect to pharmacy issues in palliative care.</p> <p>Involved in the production of regional/national/international guidelines where appropriate.</p>

Collaborative Working Relationships – Communication (Cluster 2.1)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others.
Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

2.1 COMMUNICATION		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible).</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined.</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation.</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion.</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders.</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere.</p>
Recommended knowledge, skills, experience and behaviours	Persuade	Ability to persuade others about individual episodes of care.	Ability to persuade or influence the Palliative Care MDT/Pharmacy/Clinical/Management team with regard to complex cases, organisational change, research, guidelines and protocols.	<p>Ability to persuade or influence clinical teams (palliative care and non-palliative care), organisational development strategy and course of action in extremely complex cases.</p> <p>Develops relationships with commissioners to effect strategic change and raise profile of palliative care practice.</p>
	Motivate	<p>Demonstrates self motivation.</p> <p>Is able to motivate patients and carers with respect to making treatment choices and concordance with medication.</p>	Motivates Palliative Care MDT/Pharmacy team/Clinical team, e.g. follow a guideline, collect data, etc.	Motivates Palliative Care MDT and Pharmacy team at regional or national level.

Collaborative Working Relationships – Communication (Cluster 2.1)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others.

Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

2.1 COMMUNICATION		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible).</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined.</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation.</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion.</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders.</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere.</p>
Recommended knowledge, skills, experience and behaviours	Negotiate	<p>Negotiates issues around an individual case with other healthcare professionals, e.g. GPs, Specialist Nurses, District Nurses, Medical team, Patient, Nurses, etc.</p>	<p>Negotiates issues between Palliative Care MDT/Clinical team and pharmacy such as out of hours access to medicines.</p> <p>Negotiates service provision for patients moving from one area of care to another e.g. one institution to another, institution to home or vice versa.</p>	<p>Negotiates issues on a Trust/organisation wide, regional or (inter)national basis.</p>

Collaborative Working Relationships – Communication (Cluster 2.1)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others. Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

2.1 COMMUNICATION		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible).</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined.</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation.</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion.</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders.</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere.</p>
	Empathise/ Provide reassurance	<p>To palliative care patients/carers in difficult settings with respect to treatment with medicines.</p>	<p>To junior staff and MDT colleagues with respect to complex treatment options.</p> <p>Able to use advanced communication skills in settings with patients/carers where for example treatment options are complex, there is uncertainty in relation to prognosis or discussions are required around end of life issues.</p>	<p>To palliative care professionals at regional or national level.</p> <p>Able to provide reassurance to patients/carers through provision of high quality information about their condition and possible treatment in a timely and sensitive manner at all stages of the patient journey .</p> <p>Considers cultural and spiritual values and sensitivities when communicating with patients.</p>

Collaborative Working Relationships – Communication (Cluster 2.1)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others.
Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

COMMUNICATION		ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors		<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible).</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined.</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation.</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion.</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders.</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere.</p>
Recommended knowledge, skills, experience and behaviours	Listen	<p>Listens to patients, their carers and the multidisciplinary team in a manner that enables decisions to be made in an air of genuine partnership and applies these skills to develop management plans.</p>	<p>Is aware of all forms of communication, interprets and responds appropriately.</p> <p>Listens to patients and develops plans that will maintain the patient's dignity and respect.</p>	<p>Utilises all forms of communication, interprets and responds appropriately.</p>

	Networking Skills	Member of the Palliative Care Pharmacists Network or other local clinical group that provides appropriate level of clinical support.	<p>Participating member of the Palliative Care Pharmacists Network or other local clinical group.</p> <p>Participating member of UKCPA practice interest groups relevant to patients co-morbidities.</p> <p>Participates in local or regional initiatives.</p>	<p>Member of the Palliative Care Pharmacists Network committee/co-opted member for specific projects.</p> <p>Member of other clinical groups relevant to patients co-morbidities that provide clinical, educational or developmental support.</p> <p>Participates/leads (inter)national networks of Palliative Care.</p> <p>Participation in working groups/scoping groups for relevant organisations or initiatives.</p>
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Collaborative Working Relationships – Communication (Cluster 2.1)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others.
Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

COMMUNICATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates use of appropriate communication to gain the co-operation of relevant stakeholders (including patients, senior and peer colleagues, and other professionals where possible).</p> <p>Demonstrates ability to communicate where the content of the discussion is explicitly defined.</p>	<p>Demonstrates use of appropriately selected communication skills to gain co-operation of small groups of relevant stakeholders within the organisation.</p> <p>Demonstrates ability to communicate where the content of the discussion is based on professional opinion.</p>	<p>Demonstrates ability to present complex, sensitive or contentious information to large groups of relevant stakeholders.</p> <p>Demonstrates ability to communicate in a hostile, antagonistic or highly emotive atmosphere.</p>

Recommended knowledge, skills, experience and behaviours	Presentation Skills	<p>Presents to pharmacy colleagues and the multidisciplinary team (MDT).</p> <p>Communication is always clear, precise and appropriate.</p>	Presents to senior MDT including consultant/GP/commissioner level.	Presents at senior Trust level, regional and (inter) national forums and conferences.
	Teamwork	Works as part of the Palliative Care MDT and Pharmacy teams where appropriate.	<p>Share expertise with Pharmacy colleagues and Palliative Care team.</p> <p>Recognition of expertise by multidisciplinary team.</p>	<p>Share expertise with the wider palliative care community including GP's, consultants, specialist nurses, GSF coordinators, assertive case managers, other Community/Hospital/Hospice Pharmacists.</p> <p>Recognition of expertise by the wider palliative care community across both sides of the interface regionally and/or nationally.</p>

Collaborative Working Relationships – Teamwork and Consultation (Cluster 2.2)

Is able to communicate, establish and maintain professionally-driven working relationships and gain the co-operation of others. Including ability to: Persuade; Motivate; Negotiate; Empathise; Provide reassurance; Listen; Influence and Networking skills; Presentation skills.

2.2 TEAMWORK AND CONSULTATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates ability to work as a member of a team.</p> <p>Recognises personal limitations and refers to more appropriate colleague(s) when necessary.</p>	<p>Demonstrates ability to work as an acknowledged member of a multidisciplinary team.</p> <p>Consulted within the organisation for advice which requires in-depth professional expertise.</p>	<p>Works across boundaries to build relationships and share information, plans and resources.</p> <p>Sought as an opinion leader both within the organisation and in the external environment.</p>

<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Consultation</p>	<p>Recognises a situation outside competence and refers to supervising pharmacist (appropriate pharmaceutical problems are always appropriately referred).</p>	<p>Receives requests for advice in specialist field from within the Trust or organisation.</p> <p>Active participation in multidisciplinary taskforces/service developments across the interface.</p>	<p>Receives requests for advice in specialist field from outside the Trust or organisation includes requests from charitable organisations.</p> <p>Leads multidisciplinary taskforces/service developments across the interface.</p> <p>Knowledge of options available to patients under NHS and independent sector including access to self help and support groups, complimentary therapy, spiritual and bereavement support services. Uses these during patient consultations and is able to integrate them into treatment plans where appropriate.</p>
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Leadership – Strategic Context (Cluster 3.1)

Inspires individuals and teams to achieve high standards of performance and personal development.

3.1 STRATEGIC CONTEXT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates understanding of the needs of stakeholders.</p> <p>Practice reflects relevant local and national policy.</p>	<p>Demonstrates ability to incorporate relevant national policy to influence local strategy.</p>	<p>Demonstrates active participation in creating relevant national policies.</p>
Recommended knowledge, skills, experience and behaviours	<p>Awareness of relevant local and national healthcare policy.</p> <p>Incorporates national healthcare policy into palliative care pharmacy practice..</p>	<p>Incorporates national policy into strategic plans for local palliative care service provision.</p>	<p>Lead for pharmacy/AHP/HCS within local supportive and palliative care network (or equivalent).</p> <p>Involved in drawing up national level guidelines or policy (e.g. peer review publication, editorial comment, treatment guidelines, policies and service developments).</p>

Leadership – Governance (Cluster 3.2)

Inspires individuals and teams to achieve high standards of performance and personal development.

3.2 GOVERNANCE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates understanding of the pharmacy role in governance.</p> <p>Implements this appropriately within the workplace.</p>	<p>Influences the governance agenda for the team and/or service.</p>	<p>Shapes and contributes to the governance agenda at a higher level.</p>
Recommended knowledge, skills, experience and behaviours	<p>Implements changes agreed by local clinical governance group.</p> <p>Ensures compliance with local policies and standards of clinical pharmacy and palliative care practice.</p>	<p>Contributes to local clinical governance group by raising and/or dealing with identified palliative care issues including those raised by the implementation of national guidance, e.g. changes to controlled drug legislation.</p> <p>Contributes to palliative care clinical audit programme as part of local clinical governance agenda.</p>	<p>Contributes to clinical governance agenda at a regional and/or national level.</p> <p>Contributes to clinical and strategic audit programme at a regional and national level.</p>

Leadership – Vision (Cluster 3.3)

Inspires individuals and teams to achieve high standards of performance and personal development

3.3 VISION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of, and contributes to, the workplace vision.	Creates vision of future and translates this into clear directions for others.	Convinces others to share vision at a higher level
Recommended knowledge, skills, experience and behaviours	Understands and contributes to department and/or corporate vision.	<p>Creates vision of clinical pharmacy service to palliative care patients and staff within area of practice.</p> <p>Coordinates clinical pharmacy activities to meet vision.</p> <p>Participation in local working groups e.g. palliative care networks, cancer networks etc to develop palliative care services.</p>	<p>Participation in relevant national working groups e.g. Palliative Care Pharmacists Network, National Council for Palliative Care, cancer and non-cancer networks.</p> <p>Promotes and develops the vision of the palliative care pharmacy service regionally to the Trust/Commissioners and other clinical specialities caring for patients with life limiting disease e.g. renal failure, heart failure, respiratory disease, neurological conditions and nationally to organisations such as Department of Health, NICE, SIGN, Royal College of Physicians.</p> <p>Member of Palliative Care Pharmacists Network committee/steering/task groups.</p>

Leadership – Innovation (Cluster 3.4)

Inspires individuals and teams to achieve high standards of performance and personal development.

3.4 INNOVATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to improve quality within limitations of service.	Recognises and implements innovation from the external environment.	Takes the lead to ensure innovation produces demonstrable improvement.
Recommended knowledge, skills, experience and behaviours	<p>Implements service improvement projects locally.</p> <p>Requires limited supervision.</p>	<p>Recognises where innovative ideas can improve patient care and/or palliative care services.</p> <p>Draws up and implements service improvement projects.</p> <p>Coordinates and reports on relevant local audit and research projects in pharmacy practice and palliative care.</p> <p>Does not require supervision.</p>	<p>Participation in relevant national working groups in palliative care and also provide input to groups/societies providing care to patients with life limiting disease e.g. renal failure through UK renal Pharmacy Group, heart failure through UKCPA Cardiac Pharmacists Group, respiratory disease through UKCPA Respiratory Pharmacists Group, UK Cystic Fibrosis Pharmacists Group, British Thoracic Society, Stroke Association, Motor Neurone Disease Association, etc.</p> <p>Coordinates and reports on regional or national audit and research projects in pharmacy practice and palliative care.</p> <p>Publication in peer reviewed journal.</p>

Leadership - Service Development (Cluster 3.5)

Inspires individuals and teams to achieve high standards of performance and personal development.

3.5 SERVICE DEVELOPMENT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Reviews last year's progress and develops clear plans to achieve results within priorities set by others.	Develops clear understanding of priorities and formulates practical short-term plans in line with workplace strategy.	Relates goals and actions to strategic aims of organisation and profession.
Recommended knowledge, skills, experience and behaviours	Creates objectives in light of previous years progress and develops a plan to meet these.	<p>Participates in prioritising objectives for the pharmacy/palliative care team in line with departmental/organisational strategy.</p> <p>Formulates strategy for palliative care pharmacy service provision within the organisation.</p>	<p>Contributes to strategy for service development within palliative care at regional/national level via relevant groups.</p> <p>Makes strategic goals relevant to organisation and profession.</p>

Leadership – Motivational (Cluster 3.6)

Inspires individuals and teams to achieve high standards of performance and personal development.

3.6 MOTIVATIONAL	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to motivate self to achieve goals.	Demonstrates ability to motivate individuals and/or the team.	Demonstrates ability to motivate individuals and/or teams at a higher level. May include more strategic motivational activities at local, institutional and national levels.
Recommended knowledge, skills, experience and behaviours	<p>Maintains appropriate portfolio of practice.</p> <p>Participate in and completes audits.</p> <p>Meets appraisal objectives.</p>	<p>Leads projects requiring input from and cooperation with other members of the palliative care MDT or Pharmacy Team.</p> <p>Motivates junior pharmacists and pharmacy technicians to set and achieve goals.</p> <p>Motivates other members of the palliative care team to set and achieve goals.</p>	<p>Completes projects that require investment of time/effort of individuals at a higher level within Trust or organisation, network, professional or governmental organisations.</p>

Management – Implementing National Priorities (Cluster 4.1)

Organises and delivers service objectives in a timely fashion.

4.1 IMPLEMENTING NATIONAL PRIORITIES	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the implications of national priorities for the team and/or service.	Shapes the response of the team and/or service to national priorities.	Accountable for the direct delivery of national priorities at a higher level.
Recommended knowledge, skills, experience and behaviours	Can present likely implications of national priorities to the pharmacy team and palliative care MDT.	Shapes clinical pharmacy and palliative care MDT activities to meet priorities. Responsible for meeting national priorities at a local level.	Advises local commissioners on the service specification to purchase to meet national priorities. Accountable for the implementation of national priorities for palliative care at Trust wide or organisational and regional or national level.

Management – Resource Utilisation (Cluster 4.2)

Organises and delivers service objectives in a timely fashion.

4.2 RESOURCE UTILISATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the process for effective resource utilisation.	Demonstrates ability to effectively manage resources.	Demonstrates ability to reconfigure the use of available resources.
Recommended knowledge, skills, experience and behaviours	<p>Understands necessity for managing own time and conflicting priorities.</p> <p>Awareness of service capacity issues.</p>	<p>Demonstrates the ability to deploy pharmacy resources available to the palliative care service ensuring effective cover is provided. This should demonstrate the mentorship and development of junior staff where appropriate.</p> <p>Actively involved in developing capacity plans for the service.</p> <p>Implements plans to improve access to palliative care services and medicines regionally.</p>	<p>Capable of formulating changes to long term strategic plans in order to accommodate short term absences and staff departure or turnover and changing needs of organisation.</p> <p>Advise at a regional/national level of issues affecting capacity.</p> <p>Develops plans to improve access to palliative care services and medicines regionally and nationally.</p>

Management – Standards of Practice (Cluster 4.3)

Organises and delivers service objectives in a timely fashion.

4.3 STANDARDS OF PRACTICE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of, and conforms to, relevant standards of practice.	Demonstrates ability to set and monitor standards of practice at team and/or service level.	Accountable for the setting and monitoring of standards at a higher level
Recommended knowledge, skills, experience and behaviours	<p>Understands and able to conform to existing standards of practice in palliative care.</p> <p>Demonstrates ability to relate the standards of practice to own clinical pharmacy practice.</p>	<p>Demonstrates ability to produce standards of practice for pharmacy staff working within palliative care.</p> <p>Implements and monitors through audit the standards of practice in place within the Trust or organisation.</p>	<p>Involvement in producing standards of practice for palliative care at regional and national level.</p> <p>Implements and monitors through audit the standards of practice in place at this wider level.</p>

Management – Managing Risk (Cluster 4.4)

Organises and delivers service objectives in a timely fashion.

4.4 MANAGING RISK	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates ability to identify and resolve risk management issues according to policy/protocol.</p>	<p>Develops risk management policies/protocols for the team and/or service, including identifying and resolving new risk management issues.</p>	<p>Is accountable for developing risk management policies/procedures at a higher level, including identifying and resolving new risk management issues.</p>
<p>Recommended knowledge, skills, experience and behaviours</p>	<p>Generates incident reports for breaches of policy/protocol.</p> <p>Reports adverse drug reactions identified in palliative care patients via MHRA yellow card scheme.</p> <p>Advises on appropriate course of action within policy/protocol or guidelines and working practices.</p>	<p>Accountable for writing and implementing appropriate policies/protocols/guidelines/working practices to manage risks in pharmacy service provision to palliative care patients and staff arising from incident reports and other reports such as rapid response alerts, safety warnings for medicines, drug alerts, etc.</p> <p>Advises where policy does not exist or is inadequate for managing the risk to palliative care patients or staff providing care within the Trust or organisation.</p> <p>Provides or submits feedback to clinical governance/risk management committees on incidents related to use of medicines in palliative care.</p> <p>Represents pharmacy team on clinical governance/risk management committees (where appropriate)</p> <p>Takes follow up action on incident reports which may involve liaison/links with other organisations across the interface.</p>	<p>Accountable for medicines risk management in palliative care patients, wherever located.</p> <p>Directs the response of palliative care MDT and/or pharmacy team with respect to incident reports.</p> <p>Actively contributes to clinical governance and/or risk management committees on issues relating to medicines in palliative care.</p> <p>Leads on risk management in relation to medicines where policy does not exist or is inadequate for use within the Trust or organisation.</p> <p>Apply or disseminate lessons learnt in palliative care to other areas.</p>

Management – Managing Performance (Cluster 4.5)

Organises and delivers service objectives in a timely fashion.

4.5 MANAGING PERFORMANCE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Follows professional and organisational policies/procedures relating to performance management.</p> <p>Refers appropriately to colleagues for guidance.</p>	Is accountable for performance management for a team or group of personnel.	Is accountable for performance management at a higher and/or institutional level.
Recommended knowledge, skills, experience and behaviours	<p>Recognises need to achieve set objectives both personal and team and seeks guidance where appropriate.</p> <p>Supports others in achieving objectives</p> <p>Undertakes CPD to meet registration requirements, in palliative care and other specialities where appropriate.</p>	<p>Sets Pharmacists and Technicians objectives in relation to palliative care (may be jointly with clinical and managerial staff in the speciality) and is accountable for their performance management.</p> <p>Performance appraises junior staff in order to develop competent practitioners.</p>	<p>Responsible for interpreting/dealing with medicines management implications from performance targets set at strategic levels such as Trust board/Region/Network (or equivalent).</p> <p>Advises on delivery options.</p> <p>Develops performance objectives for junior pharmacy staff working within palliative care.</p> <p>Performance appraises more senior palliative care pharmacists/other healthcare professionals within palliative care.</p>

Management – Project Management (Cluster 4.6)

Organises and delivers service objectives in a timely fashion.

4.6 PROJECT MANAGEMENT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the principles of project management.	Demonstrates ability to successfully manage a project at team and/or service level.	Demonstrate ability to successfully manage a project at a higher level
Recommended knowledge, skills, experience and behaviours	Demonstrates understanding of project management principles. Able to carry out simple projects with minimal supervision.	Ability to manage project work related to medicines management in area of clinical practice. Demonstrates ability to manage project work related to the care of patients with palliative care needs as part of the palliative care MDT or pharmacy team.	Manage projects related to supportive and palliative care of patients at a higher level in the Trust or organisation or, wider area such as network/regional/national level (or equivalent) involving senior pharmacists, clinical and managerial staff.

Management – Managing Change (Cluster 4.7)

Organises and delivers service objectives in a timely fashion.

4.7 MANAGING CHANGE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the principles of change management.	Demonstrates ability to manage a process of change for the team and/or service.	Demonstrates ability to manage a process of change at a higher level
Recommended knowledge, skills, experience and behaviours	Understands basic principles of change management, describes differences between old and new processes and how transition will occur.	Draws up and implements changes in pharmacy and/or palliative care processes/policy/procedure at a local level. Is able to manage and guide a team through the change process.	Draws up and implements changes in pharmacy and/or palliative care processes/policy/procedure at a regional or national level.

Management – Strategic Planning (Cluster 4.8)

Organises and delivers service objectives in a timely fashion.

4.8 STRATEGIC PLANNING	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	<p>Demonstrates ability to think 4-12 months ahead within a defined area. Plans the work programme to align with strategy.</p> <p>Demonstrates understanding of formal structures.</p>	<p>Demonstrates ability to think over a year ahead within a defined area.</p> <p>Demonstrates understanding of culture and climate and ability to plan with the whole of the organisation in mind.</p>	<p>Thinks long term and sector wide. Takes the long-term perspective.</p> <p>Demonstrates understanding of organisational politics and changes in the external environment</p>
Recommended knowledge, skills, experience and behaviours	<p>Proactively manages data collection to prepare or contribute to routinely required reports such as medicines expenditure reports, quarterly controlled drug incident reports for local intelligence network and clinical governance reports.</p> <p>Reviews policies and procedures to agreed schedule and understands implications to own practice.</p> <p>Plans work programme for up to a year ahead.</p>	<p>Horizon scans for new therapies or changes to existing therapies with major financial/clinical impact on palliative care and pharmacy teams.</p> <p>Participates in drawing up business cases for submission to Trust/PCT or equivalent.</p> <p>Plans work programme for over a year ahead.</p> <p>Ability to plan for medium term, accounting for changes in the culture and climate within the organisation or Trust.</p>	<p>Contributes to strategic planning for regional palliative care services (or equivalent).</p> <p>Advises external bodies such as Department of Health and Schools of Pharmacy on pharmaceutical aspects of long term planning in palliative and supportive care.</p> <p>Leads on drawing up business cases for submission to Trust/PCT or equivalent.</p> <p>Modifies long term work programme in response to external changes in the organisation or political environment.</p>

Management – Working Across Boundaries (Cluster 4.9)

Organises and delivers service objectives in a timely fashion.

4.9 WORKING ACROSS BOUNDARIES	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to extend boundaries of service delivery within the team.	Demonstrates ability to extend the boundaries of the service across more than one team.	Demonstrates the value of extending service delivery across boundaries in the external environment.
Recommended knowledge, skills, experience and behaviours	<p>Takes on new responsibilities/activities that expand the pharmacy service within area of palliative care practice.</p> <p>Participates in wider pharmacy service provision within area of practice such as outpatient clinics and Day Hospice. This may need to be supervised practice.</p>	<p>Leads on drawing up and implementing new responsibilities/activities that contribute to wider supportive and palliative care services (e.g. outpatient clinics, day hospice review, groups that address pharmacological and non-pharmacological management of disease).</p> <p>Undertakes peer review.</p> <p>Contributes to collaborative work related to new responsibilities/activities with other supportive and palliative care, cancer care and non-cancer care specialist teams, services and units within the region.</p> <p>Participates in palliative care initiatives at the primary/secondary care interface.</p>	<p>Opinions/methods of working sought to contribute to or develop other teams/services.</p> <p>Leads on peer review for palliative care network as required.</p> <p>Identifies medicines management issues for palliative care patients and staff that impact on other places of care e.g. hospice, nursing home, residential/own home, secondary care trust.</p> <p>Engages with the appropriate professionals and leads on collaborative work with other supportive and palliative care, cancer care and non-cancer care specialist teams, services and units within the region and nationally.</p>

Education, Training and Development – Role Model (Cluster 5.1)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.1 ROLE MODEL	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Understands and demonstrates the characteristics of a role model to members in the team and/or service	Demonstrates the characteristics of an effective role model at a higher level.	Is able to develop effective role model behaviour in others.
Recommended knowledge, skills, experience and behaviours	<p>Demonstrates characteristics of an effective role model.</p> <p>Role model for pre-registration pharmacists, pharmacy technicians and peers.</p>	<p>Role model for pharmacy team and palliative care MDT.</p> <p>Actively participates in peer review of clinical pharmacy and palliative care practice at a local level.</p>	<p>Role model for specialist palliative care pharmacists at a national level.</p> <p>Ability to develop role model behaviour in others.</p> <p>Instigates peer review to ensure that standards are maintained.</p> <p>Recognised as a peer reviewer of clinical pharmacy and palliative care practice nationally.</p>

Education, Training and Development – Mentorship (Cluster 5.2)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.2 MENTORSHIP	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the mentorship process.	Demonstrates ability to effectively mentor others within the team and/or service.	Demonstrates ability to effectively mentor outside the team and/or service.
Recommended knowledge, skills, experience and behaviours	Mentors pre-registration pharmacists and pharmacy technicians.	Mentors junior palliative care pharmacists. Mentors rotational pharmacists and post-graduate pharmacists (e.g. as an accredited tutor).	Mentors other palliative care MDT members. Mentors specialist palliative care pharmacists nationally.

Education, Training and Development – Conducting Education and Training (Cluster 5.3)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.3 CONDUCTING EDUCATION & TRAINING	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to conduct teaching and assessment effectively according to a learning plan with supervision from a more experienced colleague.	Demonstrates ability to assess the performance and learning needs of others. Demonstrates ability to plan a series of effective learning experiences for others.	Demonstrates ability to design and manage a course of study, with appropriate use of teaching, assessment and study methods.
Recommended knowledge, skills, experience and behaviours	Teaches junior members of pharmacy team, nurses, AHPs and junior doctors with minimal supervision.	Teaches senior members of pharmacy team and palliative care MDT. Ability to evaluate the learning needs of members of the pharmacy team or the palliative care MDT and plan a series of effective learning experiences at diploma and MSc level.	Ability to direct educational initiatives locally and nationally to meet the needs of pharmacists and other healthcare professionals working in palliative care. Ability to design and manage a course of study with appropriate teaching and assessment methods to implemented locally, nationally or internationally.

Education, Training and Development – Professional Development (Cluster 5.4)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.4 PROFESSIONAL DEVELOPMENT	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates self-development through continuous professional development activity.	Facilitates the professional development of others.	Shapes and contributes to the professional development strategy.
Recommended knowledge, skills, experience and behaviours	Maintains CPD portfolio and evaluates own learning.	Acts as a CPD facilitator and evaluates learning of others locally within the speciality.	Shapes and contributes to CPD strategy of others locally or nationally.

Education, Training and Development – Links Practice and Education (Cluster 5.5)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.5 LINKS PRACTICE AND EDUCATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Participates in the delivery of formal education programmes.	Participates in education and training in an external environment.	Shapes and contributes to or is accountable for the creation or development of higher education qualifications(s)
Recommended knowledge, skills, experience and behaviours	Participates in teaching palliative care therapeutics on undergraduate and postgraduate courses.	Teaches palliative care therapeutics to other healthcare professionals to MSc level. Provides education and training to palliative care pharmacists locally and nationally (e.g. sets agenda for palliative care courses and conferences).	Directs the creation or development of higher education qualifications in collaboration with Higher Education Institutions (HEIs). Teaches palliative care pharmacists at national level directly or, indirectly through written education resources, etc.

Education, Training and Development – Educational Policy (Cluster 5.6)

Supports the education, training & development of others. Promotes a learning culture within the organisation.

5.6 EDUCATIONAL POLICY	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates an understanding of current educational policies relevant to working areas of practice.	Demonstrates ability to interpret national policy in order to design strategic approaches for local workforce education planning and development.	Shapes and contributes to national education and workforce planning and development policy.
Recommended knowledge, skills, experience and behaviours	Awareness of local education policy in health services.	Interprets national education policy and applies it to education of the local pharmacy team and palliative care MDT.	<p>Leads direction of Palliative care Pharmacists Network.</p> <p>Leads education strategy for specialist palliative care pharmacists at national level.</p> <p>Contributes to national education policy in health services.</p>

Research and Evaluation - Critical Evaluation (Cluster 6.1)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.1 CRITICAL EVALUATION	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to critically evaluate and review literature.	Demonstrates application of critical evaluation skills in the context of working practice.	Is recognised as undertaking peer review activities within working practice.
Recommended knowledge, skills, experience and behaviours	<p>Contributes to local "journal club" (or equivalent).</p> <p>Demonstrates ability to critically review literature to effectively answer general enquiries relating to drug treatments in palliative care.</p>	<p>Contributes specialist palliative care pharmacist input to "journal club" (or equivalent).</p> <p>Ability to present critical evaluation of newly published papers in the palliative care speciality to senior members of the palliative care MDT to advise on prescribing practice within area of clinical practice.</p>	<p>Peer reviews palliative care pharmacists in other Trusts or organisations.</p> <p>Produces critical comments on peer reviewed publications that are published.</p> <p>Recognised locally and nationally as a peer reviewer of published literature in the palliative care speciality.</p>

Research and Evaluation - Identifies Gaps in the Evidence Base (Cluster 6.2)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.2 IDENTIFIES GAPS IN THE EVIDENCE BASE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to identify instances where there is a gap in the evidence base to support practice.	Demonstrates ability to formulate appropriate and rigorous research questions.	Demonstrates ability to design a successful strategy to address research questions.
Recommended knowledge, skills, experience and behaviours	Recognises gaps in the evidence base required to support their own practice and that of their peers.	Draws up appropriate research questions to direct research efforts of the palliative care and/or pharmacy team.	Designs successful strategies for the speciality that answer a specific research question.

Research and Evaluation – Develops and Evaluates Research Protocols (Cluster 6.3)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.3 DEVELOPS AND EVALUATES RESEARCH PROTOCOLS	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to describe the core features of research protocols.	Demonstrates ability to design a rigorous protocol to address previously formulated research questions.	Demonstrates active involvement in the critical review of research protocols.
Recommended knowledge, skills, experience and behaviours	Recognises and describes core features of a research protocol.	Draws up a rigorous protocol to address a research question related to drug use in patients with palliative care needs.	Draws up a rigorous protocol to address a research question related to drug use and adjuvant therapies in patients with complex palliative care needs. Supervises production of and reviews research protocols produced by other members of the palliative care team.

Research and Evaluation – Creates Evidence (Cluster 6.4)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.4 CREATES EVIDENCE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to generate evidence suitable for presentation at local level.	Demonstrates ability to generate new evidence suitable for presentation at research symposium.	Demonstrates authorship of primary evidence and outcomes in peer reviewed media.
Recommended knowledge, skills, experience and behaviours	Performs audit and presents results locally.	Undertakes audit at a regional level. Undertakes primary research alone (e.g. MSc dissertation) or with the palliative care MDT Submits work to peer reviewed national and international conferences	Undertakes audit at a national level. Identifies a research question in clinical practice, generates primary evidence and follows through to publication in a peer reviewed journal.

Research and Evaluation – Research Evidence into Working Practice (Cluster 6.5)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.5 RESEARCH EVIDENCE INTO WORKING PRACTICE	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to apply the research evidence base into working practice.	Demonstrates ability to apply research and evidence-based practice within the team and/or service.	Is able to use research evidence to shape policy/procedure at an organisational and/or national level.
Recommended knowledge, skills, experience and behaviours	<p>Demonstrates how own practice changes to incorporate recently published research evidence.</p> <p>Performs CPD and maintains own Personal Development Plan (PDP).</p>	<p>Member of clinical governance team.</p> <p>Writes evidence based prescribing guidelines that are implemented within palliative care.</p>	<p>Member of working parties or service improvement groups at a regional level.</p> <p>Writes or co-writes evidence based guidelines that are implemented on a wider level regionally or nationally.</p> <p>Interprets research and translates into changes to organisational policy or procedure.</p>

Research and Evaluation – Supervises Others Undertaking Research (Cluster 6.6)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.6 SUPERVISES OTHERS UNDERTAKING RESEARCH	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates understanding of the principles of research governance.	Is able to contribute to research supervision in collaboration with research experts.	Is a research project supervisor for postgraduate students.
Recommended knowledge, skills, experience and behaviours	Awareness of ongoing research within local palliative care teams and/or organisations. Understands principles of research governance.	Supervises audit projects by palliative care MDT or pharmacy team. Supervises data collection for established research projects.	Research project supervisor for students undertaking postgraduate research.

Research and Evaluation - Establishes Research Partnerships (Cluster 6.7)

Uses research to deliver effective practice. Identifies and undertakes research to inform practice.

6.7 ESTABLISHED RESEARCH PARTNERSHIPS	ADVANCED STAGE I	ADVANCED STAGE II	MASTERY
APF competency developmental descriptors	Demonstrates ability to work as a member of the research team	Demonstrates ability to establish new multidisciplinary links to conduct research projects	Demonstrates ability to show leadership within research teams concerning the conduct of specialist research.
Recommended knowledge, skills, experience and behaviours	Involved in clinical trials at supply and clinical information level and data collection within the pharmacy team. Involved in research.	Actively contributes to planning and implementation of clinical trials and research projects in partnership with other members of the palliative care MDT.	Member of organising committee for multi-centre research studies. Demonstrates leadership within the research team on the conduct of specialist research.

Syllabus for Advanced and Specialist Palliative Care Pharmacists

This syllabus is a recommended list of the specific elements of pharmaceutical and related care that a practitioner developing towards an advanced level will need to know about and apply in their practice in Palliative Care.

These examples are not about non-medical prescribing or administration of medicines, which falls outside the scope of this document. Their purpose is to be used as an outline intended to guide practice rather than to be a prescriptive list that has to be adhered to in all cases.

Advanced Stage I

Scope

Entry Point: Diploma in General Practice Pharmacy and Statement of Completion of General Level Framework (e.g. Band 6 (DipGPP)) or appropriate proof of equivalent qualification and practice.

Completion Point: Statement of Completion of Advanced Stage I competencies (including application of knowledge during experience in the defined speciality area).

Description

Whilst working towards Advanced Stage I the aim is for practitioners to develop and deliver competent clinical care with a focus on palliative care patients.

The individual works towards becoming competent at delivering a clinical pharmacy service to patients with common disorders in palliative care through experience of delivering a service to these patients.

Advanced Stage II

Scope

Entry Point: Statement of Completion of Advanced Stage I competencies with (including application of knowledge during experience in the defined speciality area).

Completion Point: Statement of Completion of Advanced Stage II competencies (including application of advanced knowledge during experience in palliative care area or areas).

Description

Whilst working towards Advanced Stage II the aim is for practitioners to continue to develop specialist knowledge, skills, experience and behaviours in order to deliver good quality clinical care to the various groups of Palliative Care patients. The practitioner is expected to be an integrated member of the wider multi-professional team and as such works alongside other professionals to achieve the aims of the team, leading where appropriate.

Mastery

Scope

Entry Point: Statement of Completion of Advanced Stage II competencies with (including application of knowledge during experience in the defined speciality area).

Completion Point: Statement of Completion of Mastery stage competencies (including application of advanced knowledge during experience in palliative care area or areas).

Description

Whilst working towards Mastery stage the aim is for practitioners to continue to develop specialist knowledge, skills, experience and behaviours in order to deliver highly specialised clinical care to the various groups of Palliative Care patients. The practitioner is expected to be an integrated member of regional and national specialist teams, working alongside other healthcare professionals to develop strategies to advance the care of palliative patients.

The following tables are the syllabus for Palliative Care. The syllabus is in BNF order, with additional categories. Categories have been left blank where there are no syllabus items. The final column of the table shows whether the syllabus item is expected at Advanced Stage I, Advanced Stage II or Mastery stage.

It is acknowledged that practitioners may have already covered some of this syllabus at general level. Practitioners are reminded that a piece of evidence of a specific knowledge should not be resubmitted to achieve the requirements for another award as credit can only be awarded once for each piece of evidence. However, knowledge gained previously could be used in conjunction with experience to develop and demonstrate competency at Advanced Stage I, Advanced Stage II and Mastery stage of the APF.

Specialist knowledge is defined here as knowledge that is specific to Palliative Care, and is not generally used outside this area. Common knowledge is defined here as knowledge that may be pertinent to other areas of practice outside Palliative Care.

- 1 Gastrointestinal System
- 2 Cardiovascular System
- 3 Respiratory System
- 4 Central Nervous System
- 5 Infections
- 6 Endocrine System
- 7 Obstetrics, Gynaecology and Urinary-Tract Disorders
- 8 Malignant Disease and Immunosuppression
- 9 Nutrition and Blood
- 10 Musculoskeletal and Joint Diseases
- 11 Eye
- 12 Ear, Nose and Oropharynx
- 13 Skin
- 14 Immunological Products and Vaccines
- 15 Anaesthesia
- 16 Liver Disease
- 17 Renal Impairment
- 18 Pregnancy
- 19 Breast-Feeding
- 20 Older People
- 21 HIV
- 22 Toxicology
- 23 Parenteral Therapy
- 24 Paediatrics
- 25 Care in the Last Few Days and Hours of Life
- 26 Clinical Trials

- 27 Other issues in Palliative Care

I Gastrointestinal System		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate knowledge/understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common GI cancer.	S	Adv I
Demonstrate knowledge/understanding of the common GI cancers, e.g. gastric, oesophageal, colorectal, and anal cancers.	S	Adv I
Demonstrates understanding of the basic pathophysiology and risk factors for chemotherapy and radiotherapy-induced nausea and vomiting.	S	Adv I
Demonstrates understanding of the basic pathophysiology and risk factors for chemotherapy and radiotherapy-induced mucositis and oesophagitis.	S	Adv I
Demonstrates understanding of the mechanism of action, characteristics and clinical use of treatments for chemotherapy and radiotherapy-induced nausea and vomiting.	S	Adv I
Demonstrates understanding of the mechanism of action, characteristics and clinical use of treatments for chemotherapy and radiotherapy-induced diarrhoea.	S	Adv I
Demonstrates understanding of mechanisms of action, characteristics, routes of administration and clinical use of anti-emetics, pro-kinetics, laxatives and anti-diarrhoeals.	G	Adv I
Demonstrates understanding of mechanism, characteristics and pharmacological management of bowel obstruction.	S	Adv I
Demonstrates understanding of mechanism of action, characteristics and clinical use of antisecretory agents.	S	Adv I
Demonstrates understanding of the role of the dietician and speech and language therapist in managing patients with dysphagia.	G	Adv I
Demonstrates understanding of the basic pathophysiology and management options for dysphagia and its implications for medicines management.	G	Adv I
Demonstrates understanding of the mechanism of action, characteristics and clinical use of treatments for undernourishment, anorexia, profound weight loss and cachexia.	S	Adv I
Demonstrates understanding of the uses of, need for, ethics and implications of PEG/RIG placement.	S	Adv I

2 Cardiovascular System		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Understands the principles, characteristics and clinical use of intravenous fluids, the differences between crystalloids.	G	Adv I
Understands the effect of the administration of fluid (or dehydration states) on various cardiovascular parameters (e.g. venous return, central venous pressure, cardiac output and arterial blood pressure).	G	Adv I
Demonstrates understanding of incidence, pathophysiology, and management of pericardial effusion.	S	Adv II
Understands the available methods for monitoring of cardiovascular function (e.g. ECHO, ECG).	G	Adv I
Demonstrates an understanding of the basic pathophysiology and the mechanism of treatment options for thrombo-embolic disorders e.g. pulmonary embolism, deep vein thrombosis (DVT).	G	Adv I
Demonstrates understanding of the mechanism of action, characteristics and use of diuretics with hydration regimens.	G	Adv I
Demonstrates understanding of the basic pathophysiology and management options for oedema (peripheral and pulmonary) and heart failure (acute and chronic) in patients having hydration regimens.	G	Adv I
Demonstrates understanding of the basic pathophysiology and management options for drug-induced cardiac toxicity.	G	Adv I
Demonstrates understanding of the basic pathophysiology and management options for primary and secondary prevention of drug-induced cardiovascular toxicity.	G	Adv I
To know and understand potentially cardiotoxic chemotherapy.	S	Adv II

3 Respiratory System

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate knowledge/understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common lung cancers, e.g. Small cell lung cancer (SCLC), Non small cell lung cancer (NSCLC), mesothelioma.	S	Adv I
Demonstrate knowledge/understanding of the epidemiology, pathophysiology and the role of therapy for chronic obstructive pulmonary disease (COPD), pulmonary fibrosis (PF), interstitial lung disease and cystic fibrosis (CF).	S	Adv I
Demonstrates understanding of the basic pathophysiology and management options for drug-induced pulmonary toxicity.	G	Adv I
Demonstrates understanding of incidence, pathophysiology, and management of pleural effusion.	S	Adv II
Understand the role of oxygen therapy and assisted ventilation in patients with a palliative diagnosis.	S	Adv II
Demonstrate understanding of the pathophysiology of death rattle and role of therapy.	G	Adv I
Demonstrate understanding of the pathophysiology of dyspnoea in palliative patients and management including pharmacological and non-pharmacological options.	S	Adv I
Able to describe the mechanism of action, evidence base, and use of mucolytics/mucokinetics.	G	Adv I
Understand the role of the physiotherapist in supporting patients with respiratory primary or secondary cancer or respiratory symptoms due to non-cancer lung diseases.	G	Adv I
To know and understand chemotherapy potentially toxic to the respiratory system.	S	Adv I

4 Central Nervous System

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate knowledge/understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common CNS cancers, e.g. glioma, neuroblastoma.	S	Adv I
Demonstrate knowledge/understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for brain metastases and in which cancers they commonly occur.	S	Adv I
Demonstrate knowledge/understanding of the epidemiology, pathophysiology and the role of treatment for motor neurone disease (MND), Parkinson's disease (PD), multisystems atrophy (MSA) and common CNS disorders.	F	Adv II
Demonstrates an understanding of the implications of raised intracranial pressure and methods of drug management including palliation of these patients.	S	Adv II
Demonstrates understanding of common methods of assessing cognitive function.	G	Adv I
Demonstrates understanding of the broad remit and powers of the mental capacity act (MCA).	G	Adv II
Demonstrates understanding of the medico-legal issues involved, and legal stance, of covert administration and consent.	G	Adv II
Demonstrates understanding of basic pathophysiology and common treatment of vestibular disorders e.g. in head and neck cancers.	S	Adv I
Demonstrates understanding of the symptoms, basic pathophysiology and management options in primary or secondary cancer induced epilepsy.	S	Adv I
Demonstrates understanding of the potential interactions between psychiatric illness and epilepsy, and the psychotropics and anticonvulsants.	G	Adv I
Demonstrates understanding of pathophysiology of pain.	S	Adv I
Demonstrates understanding of the treatment options for acute and chronic pain.	S	Adv I
Demonstrates understanding of the treatment options for neuropathic pain.	S	Adv I
Demonstrates understanding of total pain and it's holistic management.	S	Adv II
Demonstrates understanding of the complex issues around comorbidities and selection of pain management options (drug and non-drug) in palliative patients.	G	Adv I
Demonstrates an understanding of the management of pain in opioid dependent patients.	S	Adv II
Demonstrates understanding of the complex issues around pain and involvement of spiritual and/or psychological factors.	S	Adv II
Demonstrates an understanding and knowledge of opioid conversion including changing route of administration and drug choice.	S	Adv I
Demonstrates an understanding and knowledge of spinal anaesthesia and its use in palliative patients.	S	M
Demonstrate an awareness of local and national guidelines for intra-thecal chemotherapy.	S	Adv I

5 Infections		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrates understanding of the mechanism of action, characteristics and use of antibacterial agents in the management of bacterial infections (including spectrums of activity).	G	Adv I
Demonstrates understanding of the mechanism of action, characteristics and use of antibacterial agents in the management of neutropenic sepsis.	G	Adv I
Demonstrates understanding of the use of antibacterial agents in symptom management at end of life.	S	Adv I
Demonstrates understanding of the mechanism of action, characteristics and use of antiviral agents in the management of viral infections.	G	Adv I
Demonstrates understanding of the mechanism of action, characteristics and use of antifungal agents in the management of fungal infections.	G	Adv I
Demonstrate an awareness of central venous access device (CVAD) related infections and their management.	S	Adv I
Demonstrate an understanding of pathophysiology, characteristics and management of mucositis and stomatitis (drug and non-drug management).	S	Adv I
Understands and is able to describe the process of antimicrobial resistance.	G	Adv I
Understands the theory behind selective barrier nursing.	G	Adv I
Demonstrate an understanding of the mechanism of action and characteristics of the use of antibacterials, antifungals and antivirals in immunosuppressed patients.	S	Adv II
Demonstrate an understanding of the mechanism of action of granulocyte colony stimulating factors (GCSF) and criteria for use of GCSF for treatment and prophylaxis (primary and secondary).	S	Adv II
Demonstrate an awareness of local antibiotic prophylaxis with specific cancer treatments (surgery, systemic or radiotherapy).	S	Adv II

6 Endocrine System		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrates an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common endocrine cancers, e.g. pancreatic, adrenal, thyroid.	S	Adv II
Demonstrates an understanding of the role that hormones play in malignant disease, to include the effect on growth and spread of the disease and how this can be managed.	S	Adv II
Demonstrate a knowledge and understanding of diabetes control and other endocrine disorders and their management at end of life.	S	Adv I
Demonstrate a knowledge of pathophysiology, characteristics and management of steroid-induced diabetes.	G	Adv I
Demonstrate a knowledge of the use of corticosteroids in palliative care, indications, regimes and subsequent discontinuation.	S	Adv I

7 Obstetrics, Gynaecology and Urinary-Tract Disorders

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common gynaecological cancers, e.g. ovary, cervix, vulval, endometrial.	S	Adv II
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common urological cancers, e.g. bladder, prostate.	S	Adv II
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common germ cell cancers, e.g. testicular, seminoma, non-seminomatous germ cell tumours.	S	Adv II
Demonstrates understanding of the basic pathophysiology and risk factors for the development of sexual dysfunction and its psychological impact.	S	Adv II
Demonstrates understanding of the drug and non-drug treatments for sexual dysfunction.	S	Adv II
Demonstrates an awareness of the holistic management of incontinence.	S	Adv I

8 Malignant Disease and Immunosuppression

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common cancers	S	Adv II
Demonstrates an awareness of the biology of cancer including the cell cycle, classification, mechanism of action and scheduling of systemic therapy, monitoring response to treatment and disease progression.	S	Adv II
Demonstrates understanding of causes of cancer and the disease process, key roles of the multidisciplinary oncology, haematology and palliative care teams, structure of cancer services (e.g. units, centres, networks), and holistic care of the cancer patient.	S	Adv I
Demonstrates understanding of common terminology used in cancer, staging systems, tumour markers, and performance status.	S	Adv I
Demonstrates an awareness of the mode of action of anti-cancer medicines.	S	Adv II
Awareness of common toxicities of cancer treatment and their management.	S	Adv II
Demonstrates understanding/knowledge of management of oncological /palliative. emergencies e.g. tumour lysis syndrome, hypercalcaemia of malignancy, spinal cord compression, superior vena cava obstruction, raised intracranial pressure, neutropenic sepsis, haemorrhage.	S	Adv I
Demonstrates understanding/knowledge of management of common symptoms/complications of cancer.	S	Adv I
Demonstrates understanding/knowledge of the impact of cancer on the patient and their family.	S	Adv II

9 Nutrition and Blood		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common haematological cancers e.g. leukaemia, myeloma, lymphoma.	S	Adv II
Able to describe and interpret the FBC.	G	Adv I
Demonstrate an understanding of bone marrow transplantation.	S	Adv II
Demonstrate an understanding of when to use appropriate blood products e.g. platelets.	S	Adv II
Demonstrate an understanding of the mechanism of action of granulocyte colony stimulating factors (GCSF) and criteria for use of GCSF for treatment and prophylaxis (primary and secondary).	S	Adv II
Demonstrates understanding of the symptoms, basic pathophysiology and management options for anaemia.	G	Adv I
Demonstrates understanding and knowledge of the symptoms, basic pathophysiology and management options for electrolyte disturbances.	S	Adv I
Demonstrates an awareness of nutrition screening tools.	G	Adv I
Demonstrates understanding of cachexia its causes and management.	S	Adv I
Demonstrates understanding of the role of the dietician in the management of palliative care patients.	G	Adv I
Demonstrates understanding of the role of enteral and parenteral nutrition in palliative care patients.	S	Adv II
Demonstrates understanding of the role of clotting physiology and the effect of drugs upon it.	G	Adv I
Demonstrates understanding of the role and dosing of low molecular weight heparins and thromboprophylaxis in palliative care patients.	S	Adv I
Understands the different options and routes for feeding patients and the implications they have for drug administration (absorption mechanisms, sites of absorption, interactions and side effects).	G	Adv I
Demonstrates an awareness of the management of patients with feeding tubes towards end of life.	S	Adv II

10 Musculoskeletal and Joint Diseases		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common cancers e.g. sarcomas.	S	Adv II
Demonstrate a knowledge of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for bone metastases, pathological fractures, spinal cord compression and in which cancers they commonly occur.	S	Adv II

11 Eye		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) for common eye cancers e.g. retinoblastoma.	S	Adv II

12 Ear, Nose and Oropharynx		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common head and neck cancers e.g. tongue, oropharynx, nasopharynx.	S	Adv II
Knowledge of the importance of oral care in palliative patients e.g. anti-fungals, pain relief, mucositis, xerostomia.	S	Adv I

13 Skin		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common skin cancers e.g. basal cell, melanoma.	S	Adv II
Demonstrates an awareness of acute and chronic skin reactions with radiotherapy and their treatment.	S	Adv II
Demonstrates an understanding of the holistic management of skin and pressure areas in palliative patients.	S	Adv I
Demonstrates an understanding of the management of wounds in palliative patients e.g. fungating tumours.	S	Adv II

14 Immunological Products and Vaccines (no syllabus items available)

15 Anaesthesia		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate knowledge/understanding of the use of anaesthetic drugs in palliative care including the use of spinal and nerve blocks	S	Adv II
Demonstrate a knowledge of the use of anaesthetic agents for the symptom management of pain	S	Adv I

16 Liver Disease		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common hepatocellular and biliary cancers.	S	Adv II
Demonstrate knowledge/understanding of the epidemiology, pathophysiology, and management of ascites.	S	Adv I
Demonstrates understanding of and monitors liver function / dysfunction.	G	Adv I
Demonstrates understanding of the effect of medicines on liver function, particularly in relation to adverse effects.	G	Adv I
Demonstrates understanding of liver failure and liver metastases on drug clearance.	G	Adv I
Demonstrate knowledge and understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of liver metastases and in which cancers they commonly occur.	S	Adv II

17 Renal Impairment		
	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate an understanding of the epidemiology, pathophysiology, and the role of multimodality treatment (surgery, radiotherapy, systemic therapies) in the treatment and palliation of common renal cell cancers.	S	Adv II
Demonstrates an understanding of and monitors renal function/ dysfunction (acute/chronic).	G	Adv I
Demonstrates understanding of the effect of medicines on renal function (acute/chronic) and renal function on medicines.	G	Adv I
Demonstrates understanding of drug/dose alteration in different stages of renal impairment.	G	Adv I
Demonstrates understanding of the basic pathophysiology and risk factors for the development of renal failure (acute/chronic).	G	Adv I
Demonstrates an awareness of the mechanism of action, characteristics and clinical use of treatments of renal failure.	S	Adv I
Demonstrates an understanding and knowledge of the management of dialysis patients at the end of life.	S	Adv II

18 Pregnancy (no syllabus items available)

19 Breast-Feeding (no syllabus items available)

20 Older People (no syllabus items available)

21 HIV (no syllabus items available)

22 Toxicology (no syllabus items available)

23 Parenteral Therapy

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrates awareness of routes of administration for symptom management and end of life care of the palliative patient.	S	Adv I
Demonstrates a working knowledge of the use of speciality devices for drug administration e.g. syringe drivers.	G	Adv I
Demonstrate knowledge of the stability and compatibilities of drugs in infusions, syringe drivers, etc.	G	Adv I
Demonstrate an understanding of skin site reactions in palliative patients receiving subcutaneous infusions and advise on how to manage these.	S	Adv I
Demonstrate awareness of the care of central venous access devices (CVAD).	G	Adv I

24 Paediatrics (no syllabus items available)

25 Care in the Last Few Days and Hours of Life

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrate a knowledge of advance care planning including preferred place of care, death and DNAR.	S	Adv I
Demonstrate an understanding of the management of medicines in the dying patient including stopping unnecessary medicines and changing route of administration of essential medicines.	G	Adv I
Demonstrate a knowledge of the Gold Standards Framework (GSF) and other locally adapted care of the dying guidance.	G	Adv I
Demonstrates a knowledge of the prescribing and administration of anticipatory medicines for symptom management of the dying patient.	G	Adv I
Demonstrates a knowledge of the prescribing and administration of medicines for management of common symptoms such as pain, nausea and vomiting, breathlessness, secretions and agitation in the dying patient.	G	Adv I
Demonstrates a knowledge of the prescribing and administration of medicines for management of terminal agitation.	S	Adv II
Demonstrates an understanding of the pharmacological and non-pharmacological management of catastrophic bleeds.	G	Adv I
Demonstrates an awareness of the appropriate use of fluids in the dying patient.	G	Adv I
Demonstrates an awareness of the issues surrounding cessation of artificial nutrition in the dying patient.	S	Adv I

Demonstrates a knowledge of the issues surrounding supply of medicines for symptom control of the dying patient particularly in the community and out of hours.	G	Adv I
Demonstrates a knowledge of the administration of medicines in the dying patient and conversion from oral to subcutaneous route.	G	Adv I
Demonstrates a knowledge of the function of a syringe driver.	G	Adv I
Demonstrates a knowledge of mixing of medicines in a syringe driver including compatibility and legal issues.	G	Adv I
Demonstrates an awareness of the pre-emptive management of prescribing and administration of medicines to the dying patient in the community setting e.g. out of hours and nursing availability.	S	Adv I
Demonstrates effective communication with relatives and carers of dying patients .	S	Adv II
Demonstrates an awareness of the processes involved in certification of a patients death, referral to the coroner and last offices.	G	Adv II
Demonstrates an awareness of the processes involved in donation of organs.	S	Adv I
Demonstrates a knowledge of bereavement care and identification of those requiring referral before and after a patient's death.	S	Adv II
Demonstrates an awareness of the need for supervision in healthcare professionals providing palliative care.	S	Adv I

26 Clinical Trials

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrates an awareness of clinical trials and how these affect the management of palliative patients.	G	Adv I

27 Other Issues in Palliative Care

	Specialist or Generalist	Advanced Stage I, Advanced Stage II or Mastery
Demonstrates knowledge of national standards of practice, for example NICE guidance, Gold Standards Framework, Palliative Care Funding Review and End of Life Care Strategy. Effect of these standards on patient treatment and care and influence on local guidelines.	G	Adv I
The role of pharmacists in clinics and non-medical prescribing.	S	Adv II
Demonstrate a knowledge of the use of unlicensed medication, informed consent, patient counselling and ensuring continued supply.	G	Adv I
Demonstrates an understanding of factors which influence adherence to symptom management regimes in palliative patients.	G	Adv I
Demonstrates an understanding of the palliative care MDT and it's holistic approach to management of patients.	G	Adv I
Is able to utilise the Palliative Care MDT to enhance the provision of specialist clinical pharmacy.	S	Adv I
Is able to provide palliative care education, training and advice to any multidisciplinary team (MDT).	S	Adv I
Demonstrates advanced communication skills.	S	Adv II
Demonstrates an awareness of alternative therapies and a knowledge of how to manage these safely in combination with conventional medicines.	G	Adv I
Demonstrates an awareness of complementary therapies.	G	Adv I
Demonstrates an awareness of spirituality and cultural beliefs and their importance in the management of palliative care patients.	S	Adv I
Demonstrates an awareness of the health and social care processes and the impact of these on provision of palliative care.	S	Adv I
Demonstrates a knowledge of factors affecting the management of palliative care patients moving across the interface and is able to facilitate the safe and effective transition of patients to their preferred place of care.	G	Adv I
Is able to plan the discharge of palliative patients receiving complex pharmaceutical care.	S	Adv I
Demonstrates a knowledge of the legal processes for taking controlled and prescription drugs to other countries.	S	Adv I
Demonstrates a knowledge of medicines and factors that affect QT interval.	G	Adv I



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