

<b>Title</b>	<b>Apply a palliative care approach in a health or wellbeing setting</b>		
<b>Level</b>	<b>4</b>	<b>Credits</b>	<b>8</b>

<b>Purpose</b>	<p>People credited with this unit standard are able to, in a health or wellbeing setting:</p> <ul style="list-style-type: none"> <li>• describe potential ethical issues in palliative care;</li> <li>• contribute to supporting a person with a life-limiting or life-threatening condition and their family and/or whānau using a palliative care approach;</li> <li>• contribute to supporting a person, and their family and/or whānau, during the last days of life;</li> <li>• use self-care strategies to preserve emotional and physical health in a palliative care setting.</li> </ul>
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<b>Classification</b>	Health, Disability, and Aged Support > Health and Disability Principles in Practice
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<b>Available grade</b>	Achieved
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## Guidance Information

1 It is recommended that candidates complete unit standard 28738, *Describe the key principles of palliative care and a support worker's role in a palliative approach to care* before attempting this standard.

2 **Assessment conditions**  
Evidence for the practical components of this unit standard must be generated in a health or wellbeing setting.

People awarded credit for this unit standard must work under the guidance and delegation of a health professional in accordance with own role and responsibilities, and organisational policies and procedures.

3 **Assessment notes**  
Evidence generated for assessment against this standard must reflect workplace requirements specified in:

- documented organisational policies, procedures, and methodologies;
- applicable health and safety plans, contract work programmes, and quality assurance programmes.

Evidence generated for assessment against this standard must reflect the values, processes, and protocols required to work with Māori, Pasifika, and people from diverse cultures.

Evidence generated for assessment against this standard must reflect the best practice guidelines and principles specified in:

- NZS 8134.0:2008 *Health and disability services (general) Standard*;
- NZS 8134.1:2008 *Health and disability services (core) Standards*;
- NZS 8158:2012 *Home and Community Support Sector Standard*.

NZ standards can be retrieved from <http://www.standards.co.nz/>.

#### 4 References

Hospice New Zealand. (2012). [Fundamentals of Palliative Care \(hospice.org.nz\)](http://hospice.org.nz/).

Ministry of Health. (2015). [New Zealand Palliative Care Glossary \(health.govt.nz\)](http://health.govt.nz/).

Ministry of Health. (2017). [Te Ara Whakapiri: Principles and guidance for the last days of life \(health.govt.nz\)](http://health.govt.nz/).

Ministry of Health. (2017). [Te Ara Whakapiri: Toolkit \(health.govt.nz\)](http://health.govt.nz/).

Palliative Care Council of New Zealand. (2010). [Positioning Palliative Care in New Zealand: A review of Government Health Policy in relation to the provision of Palliative Care Services in New Zealand \(moh.govt.nz\)](http://moh.govt.nz/).

#### 5 Definitions

*Advance Care Planning* refers to the desired outcome of the process. It is an articulation of wishes, preferences, values and goals relevant to all current and future care. An advance care plan may itself be regarded as an advance directive and should be consistent with, and considered in conjunction with, any advance directive that exists (New Zealand Palliative Care Glossary 2015).

*Functional status* refers to a person's ability to perform everyday physical activities such as mobility, meeting basic needs, independence, and maintaining health and wellbeing.

*Health or wellbeing setting* may include but is not limited to the aged care, acute care, community support, disability, mental health, palliative care, social services, whānau ora providers, and youth development sectors.

*Last days of life* is the period when a person is dying. It is 'the period of time when death is imminent and may be measured in hours or days' (New Zealand Palliative Care Glossary 2015).

*Organisational policies and procedures* are the policies, procedures, and methodologies used in an organisation. They include legislative and regulatory requirements which may apply across an organisation, a specific site, or a workplace. Requirements are documented in organisational health and safety plans, contract work programmes, quality assurance programmes, policies, and procedural documents such as job descriptors and employment contracts.

*Palliative care* is provided according to an individual's need, and may be suitable whether death is days, weeks, months or occasionally even years away. It may be suitable sometimes when treatments are being given aimed at improving quantity of life (New Zealand Palliative Care Glossary 2015).

*Palliative care approach* is an approach to care which embraces the definition of palliative care. It incorporates a positive and open attitude toward death and dying by all service providers working with the person and their family, and respects the wishes of the person in relation to their treatment and care (New Zealand Palliative Care Glossary 2015).

*Total suffering* indicates that there are many factors which contribute to the experience of pain and other physical symptoms. Each person must be treated with the knowledge that physical symptoms cannot be treated in isolation.

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## Outcomes and performance criteria

**Outcome 1**

Describe potential ethical issues in palliative care.

**Performance criteria**

1.1 Potential ethical issues when supporting a person are described.

Range issues may include but are not limited to – artificial nutrition and hydration, palliative sedation, limitation of treatments, do not resuscitate or allow natural death, informed consent, advance care planning, advance directives.

**Outcome 2**

Contribute to supporting a person with a life-limiting or life-threatening condition and their family and/or whānau using a palliative care approach.

**Performance criteria**

2.1 Health professionals are assisted to assess and manage a person's pain and symptoms.

2.2 The person's health, wellbeing, and functional status is recorded and reported in accordance with organisational policies and procedures.

2.3 Support for the person, and their family and/or whānau, reflects the principles of total suffering.

2.4 Advocacy or support for self-advocacy is provided for the person, and their family and/or whānau.

2.5 The cultural and spiritual needs of the person, and their family and/or whānau, are supported, and respect for the person's dignity is maintained.

2.6 The person, and their family and/or whānau, are supported to deal with feelings of loss and grief that arise in a palliative care situation.

**Outcome 3**

Contribute to supporting a person, and their family and/or whānau, during the last days of life.

**Performance criteria**

3.1 Palliative care principles are applied in accordance with *Te Ara Whakapiri: Principles and guidance for the last days of life*.

3.2 The person, and their family and/or whānau, are supported to deal with feelings of loss and grief that arise in the last days of life.

- 3.3 The cultural and spiritual needs of the person, and their family and/or whānau, are supported, and respect for the person's dignity is maintained.
- 3.4 The person's health, wellbeing, and functional status is recorded and reported in accordance with organisational policies and procedures.

#### Outcome 4

Use self-care strategies to preserve emotional and physical health in a palliative care setting.

#### Performance criteria

- 4.1 Self-care strategies are used to preserve own emotional and physical health when supporting a person, and their family and/or whānau, in a palliative care setting.

Range may include but is not limited to – seeking professional help, mental and physical self-care, peer-support networks, recognising stressors and triggers.

<b>Planned review date</b>	31 December 2026
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#### Status information and last date for assessment for superseded versions

Process	Version	Date	Last Date for Assessment
Registration	1	19 May 2016	31 December 2023
Review	2	23 November 2017	31 December 2023
Rollover and Revision	3	24 October 2019	31 December 2023
Review	4	24 June 2021	N/A

<b>Consent and Moderation Requirements (CMR) reference</b>	0024
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This CMR can be accessed at <https://www.nzqa.govt.nz/framework/search/index.do>.

#### Comments on this unit standard

Please contact Careerforce [info@careerforce.org.nz](mailto:info@careerforce.org.nz) if you wish to suggest changes to the content of this unit standard.