

*To be used in conjunction with the Allied Health Novice to Advanced Practice Frameworks

Novice	Competent	Advanced
<p><i>Examples</i></p> <p>Principles of Community Palliative Care</p> <ul style="list-style-type: none"> Developing knowledge of how disease prognosis and disease trajectory impacts on a person's nutrition care plan. Developing ability to anticipate change in nutrition needs and support adjustments to nutrition care plan as a client moves between palliative care phases. Demonstrates developing ability to support person centred decision making including the appropriateness of nutrition interventions for each person living with a life-limiting illness. Demonstrates developing understanding of the unique contributions of the family and carers in the caregiving and feeding relationship. Demonstrates developing knowledge of the impact and psychological response to loss of appetite/ change in feeding role/eating routine/body image/ ability to prepare meals and overall independence. <p>Evidence-based practice</p> <ul style="list-style-type: none"> Demonstrates an evidenced based approach to practice to nutrition support (including nutrition impact symptoms and nutritional management strategies) and counselling in palliative care. Applies the nutrition care process in the context of palliative care including regular review, monitoring and adapting of the care plan. Makes nutrition diagnosis and identifies priority nutrition issues with clients, their families, multidisciplinary team and key stakeholders. Demonstrates an understanding of how research, evaluation and quality management processes contributes to practice. Developing knowledge of disease trajectories of malignant, non-malignant and progressive neurological disease processes to inform the development of the nutrition care plan. Demonstrates developing knowledge of enteral and parental feeding and its application in a palliative care context, including to promote comfort and quality of life. Demonstrates developing understanding of the holistic meaning of nutrition for clients and carers, focusing on physical, psychological, emotional, cultural, social and spiritual needs. <p>Safe practice</p> <ul style="list-style-type: none"> Exercises professional duty of care in accordance with relevant Dietetic codes of conduct, and ethical requirements relevant to nutrition and hydration. Demonstrates developing awareness and ongoing reflection of own cultural and spiritual beliefs and the influence this has on client nutrition care. Demonstrates developing understanding of risk feeding. Demonstrates developing awareness of the legalities of advance care planning to inform nutrition assessment and recommendations. Demonstrates developing ability to recognise when appetite and swallowing changes are clinical signs of dying/ entering terminal phase. <p>Communication</p> <ul style="list-style-type: none"> Demonstrates an awareness of, and ability to apply nutrition counselling skills to support the development of a therapeutic relationship with patients and carers (including motivational interviewing skills such as active listening) Demonstrates developing ability to tailor nutrition counselling in different settings including telephone, face to face and video telehealth. Demonstrated ability to adapt communication styles and needs for people various cultural, socioeconomic, people with disabilities, organisational and professional backgrounds. Demonstrates effective communication in relation to how hunger and thirst changes in deterioration and terminal phases. <p>Multidisciplinary Teamwork</p> <ul style="list-style-type: none"> Demonstrates ability to build capacity and collaborate with others to improve nutrition and health outcomes. Demonstrates developing ability to actively anticipate and communicate changes in nutrition care needs to multidisciplinary teams. 	<p><i>Examples</i></p> <p>Principles of Community Palliative Care</p> <ul style="list-style-type: none"> Demonstrates comprehensive knowledge of how disease prognosis and trajectory impact on a person's nutrition care plan. Demonstrates ability to anticipate change in nutrition needs and support adjustments to nutrition care plan as a client moves between palliative care phases. Demonstrates comprehensive ability to support person centred decision making including the appropriateness of nutrition interventions for each person living with a life-limiting illness. Demonstrates comprehensive understanding of the unique contributions of the family and carers in the caregiving and feeding relationship. Demonstrates comprehensive knowledge of the impact and psychological response to loss of appetite/ change in feeding role/eating routine/body image/ ability to prepare meals and overall independence. <p>Evidence-Based practice</p> <ul style="list-style-type: none"> Demonstrates critical thinking and integrates evidence into practice as relates to dietetic palliative care management. Positively influences the health of person and their carers to reduce nutrition impact symptom burden and achieve nutrition outcomes. Demonstrates comprehensive understanding of the holistic meaning of nutrition for clients and carers, focusing on physical, psychological, emotional, cultural, social and spiritual needs. Demonstrates comprehensive understanding of PCOC assessment tools (including PCPSS, SAS, AKPS, RUG-ADL and Palliative care phases) and illness trajectories, to assist in prioritisation of nutrition outcomes and goals. Demonstrates comprehensive knowledge of disease trajectories of malignant, non-malignant and progressive neurological disease processes to inform the development of the nutrition care plan. Demonstrates comprehensive knowledge of enteral and parental feeding and its application in a palliative care context, including to promote comfort and quality of life. Demonstrates comprehensive ability to recognise when appetite and swallowing changes are clinical signs of dying/ entering terminal phase. Understanding of pressure care assessments including screening and staging, and nutritional management of pressure care injuries. Demonstrates understanding of physical and psychosocial impacts of cachexia. <p>Safe practice</p> <ul style="list-style-type: none"> Demonstrates ability to identify and acknowledge ethical complexities of nutrition and hydration and formulates a plan to manage this with support from senior staff. Demonstrates comprehensive awareness and ongoing reflection of own cultural and spiritual beliefs and the influence this has on client nutrition care. Demonstrates comprehensive understanding of risk feeding. Demonstrates comprehensive understanding of advanced care planning processes and legalities in relation to nutrition. Demonstrates comprehensive ability to recognise when appetite and swallowing changes are clinical signs of dying/ entering terminal phase. <p>Communication</p> <ul style="list-style-type: none"> Demonstrates comprehensive nutrition counselling skills to support the development of a therapeutic relationship with patients and carers (including shared decision making and goal-setting) Demonstrates comprehensive ability to tailor nutrition counselling in different settings including telephone, face to face and video telehealth. Demonstrates effective communication of the benefits and risks of oral/enteral/parenteral nutrition. Demonstrates comprehensive ability to assess client and family/carer understanding and acceptance of the life limiting illness to facilitate nutrition counselling to support eating related distress. <p>Multidisciplinary Teamwork</p> <ul style="list-style-type: none"> Demonstrates comprehensive communication of progress on achieving nutrition goals with multidisciplinary palliative care team to coordinate care. Demonstrates comprehensive ability to actively anticipate and communicate changes in nutrition care needs to multidisciplinary teams. 	<p><i>Examples</i></p> <p>Principles of Community Palliative Care</p> <ul style="list-style-type: none"> Demonstrates an advanced knowledge of disease trajectories of life limiting illnesses, common symptoms and the impact of these on a person's nutrition care plan. Demonstrates effective sharing of expert knowledge of nutrition needs and support adjustments relevant to phases of palliative care including bereavement. Demonstrates effective sharing of expert knowledge of how prognosis impacts on a person's nutrition care plan, identifying the appropriateness of interventions for each person living with a life-limiting illness, while taking into consideration the person's expressed wishes and identified goals of care. Demonstrates effective sharing of expert understanding of the unique contributions of the family and carers in the caregiving and feeding relationship. Demonstrates effective sharing of expert knowledge of the impact and psychological response to loss of appetite/ change in feeding role/eating routine/body image/ ability to prepare meals and overall independence. <p>Evidence-Based practice</p> <ul style="list-style-type: none"> Demonstrates expert knowledge on developments of nutrition evidenced based practice in palliative care. Demonstrates advanced assessment skills to determine appropriate rehabilitative approach (restorative/ supportive/ palliative) and to collaboratively develop nutrition care plans with the person and their carer/families. Demonstrates effective management of complex problems in ways that enhance outcomes while navigating service requirements and stakeholder relationships. Evaluates and disseminates dietetic practice and evaluation, research or quality improvement outcomes in palliative care widely. Demonstrates effective leadership and knowledge of disease trajectories of malignant, non-malignant and progressive neurological disease processes to inform the development of the nutrition care plan. Demonstrates effective leadership and knowledge of enteral and parental feeding and its application in a palliative care context, including to promote comfort and quality of life. Demonstrates effective leadership and understanding of the holistic meaning of nutrition for clients' and carers, focusing on physical, psychological, emotional, cultural, social and spiritual needs. Demonstrates effective leadership and ability to recognise when appetite and swallowing changes are clinical signs of dying/ entering terminal phase. Leads quality improvement processes and service innovation and demonstrating the impact of nutrition on health outcomes/palliative care services Demonstrates advanced understanding of physical and psychosocial impacts of cachexia. <p>Safe practice</p> <ul style="list-style-type: none"> Demonstrates advanced skills in ethical decision-making including understanding of ethical decision-making models and frameworks to inform complex nutrition conversations with clients and their families (including but not limited to voluntary refusal of nutrition and fluids). Demonstrates effective leadership and awareness in ongoing reflection of own cultural and spiritual beliefs and the influence this has on client nutrition care. Demonstrates advanced understanding and effective teaching about risk feeding. Demonstrates effective leadership in management of advanced care planning processes and legalities in relation to nutrition. Engages in personal and professional development of self and of others on nutrition support in palliative care Engages in quality learning and teaching, training/supervision of nutrition in palliative care. Engages in own dietetic supervision and provides supervision to other dietitians working palliative care. Assists other clinicians to identify limitations, triggers and strategies to proactively engage in self-care. Knowledge and training of trauma informed care and its impact on nutrition support and feeding relationships <p>Communication</p> <ul style="list-style-type: none"> Demonstrates advanced nutrition counselling skills to support the development of a therapeutic relationship with patients and carers (including tending to psychosocial impacts of nutrition and hydration and associated distress). Demonstrates effective teaching of /and ability to tailor nutrition counselling in different settings including telephone, face to face and video telehealth. Demonstrates effective support of advance care directive discussions around eating and drinking or artificial feeding (enteral and parenteral) and hydration based on disease trajectory. <p>Multidisciplinary Teamwork</p> <ul style="list-style-type: none"> Advances and advocates the role of nutrition and dietetics in palliative care

References:

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5. National Palliative Care Standards, 2024, PCA, Canberra. [National Palliative Care Standards - Palliative Care Australia](#)
6. Palliative Care Australia, Palliative Care Service Development Guidelines, January 2018, https://palliativecare.org.au/wp-content/uploads/dlm_uploads/2018/02/PalliativeCare-Service-Delivery-2018_web2.pdf