

Accend	Supportive	Assistive	Pre-Reg
Domain A: Person-centred collaborative working			
1.0 Capabilities: Professional values and behaviours			
The practitioner is able to:			
1.1 Seek and engage with individuals' perspectives on their condition, their preferences for their care, and what is important to them and their carers in terms of treatment goals and outcomes			
1.2 Demonstrate understanding of the individual and show empathy for the impact of their cancer diagnosis			
1.3 Value and acknowledge the experience and expertise of individuals, their carers and support networks			
1.5 Recognise the wider impact that symptoms of cancer, often persistent, can have on individuals, their families and those close to them			
1.6 Examine their role in supporting and enabling individuals to lead meaningful lives, whether or not cure or resolution is possible			
1.7 Promote and contribute to a consistent and integrated approach throughout the episode of care, focusing on the identified needs of the individual			
1.10 Adhere to legal, regulatory and ethical requirements, professional codes, and employer protocols			
1.11 Adopt a critical approach to ethical uncertainty and risk, working with others to resolve conflict			
1.12 Demonstrate safe, effective, autonomous, reflective practice			
1.13 Inform their practice and professional development and remain up to date with the best available evidence through the appropriate use of clinical guidelines and research findings			
1.14 Demonstrate accountability for their decisions and actions and the outcomes of their interventions			
1.15 Work effectively as part of a team, using their professional knowledge and skills, and drawing on those of their colleagues			
1.17 Support clinical research to develop cancer practice			
Domain A: Person-centred collaborative working			
2.0 Capabilities: Maintaining an ethical approach and fitness to practice/ law, ethics and safeguarding			
The practitioner is able to:			
2.1 Demonstrate professional practice in own day to day clinical practice			
2.2 Critically reflect on how own values, attitudes and beliefs might influence own professional behaviour and interactions			
2.3 Use critical self-awareness of their own values, beliefs, prejudices, assumptions and stereotypes to mitigate the impact of these in how they interact with others			
2.4 Identify and act appropriately when own or others' behaviour undermines equality, diversity and human rights			
2.5 Reflect on and address appropriately ethical/moral dilemmas encountered during own work which may impact on care to people affected by cancer. Advocate equality, fairness and respect for people and colleagues in day-to-day practice			
2.6 Keep up to date with mandatory training and/or revalidation requirements, encompassing those requiring evidence related to care for people affected by cancer			
2.7 Recognise and ensure a balance between professional and personal life that meets work commitments, maintain own health, promote wellbeing and build resilience			
2.8 Demonstrate insight into any personal health issues and take effective steps to address any health issue or habit that is impacting on own performance			
2.9 Respond promptly and impartially when there are concerns about self or colleagues; take advice from appropriate people and, if necessary, engage in a referral procedure			
2.10 Promote mechanisms such as complaints, significant events and performance management processes in order to improve peoples' care			
2.11 Promote mechanisms such as compliments and letters of thanks to acknowledge and promote good practice			
Domain A. Person-centred collaborative working			
3.0 Capabilities:			
The practitioner is able to:			
3.3 Select appropriate language and media (including remote consultation such as telephone, skype, sign language, written etc) to facilitate effective communication and interactions with people affected by cancer			
3.4 Respond sensitively to individual preferences and needs and uphold and safeguard individuals' interests			

3.5 Establish and integrate individuals' specific needs, preferences, priorities and circumstances to guide the care and treatment they offer			
3.6 Demonstrate respect for individuals' expertise in their own life and condition and empower and support them to retain control and to make choices that fit with their goals			
3.7 Use active listening and facilitation skills to enable individuals to talk about their concerns and priorities relating to their cancer symptoms and implications of its treatment			
Domain A. Person-centred collaborative working			
4.0 Capabilities: Communication and consultation skills			
The practitioner is able to:			
4.1 Actively listen to and communicate effectively with others, recognising that both are an active, twoway process			
4.2 Critically appraise communication strategies and be able to optimise communication approaches appropriately using skills such as active listening e.g. frequent clarifying, paraphrasing and picking up verbal cues such as pace, pauses and voice intonation			
4.3 Reflect on communication strategies and skilfully adapt those employed to ensure communication strategies foster an environment of person empowerment			
4.4 Communicate in ways that build and sustain relationships, seeking, gathering and sharing information appropriately, efficiently and effectively to expedite and integrate people's care			
4.5 Communicate effectively, respectfully and professionally with service users and carers at times of conflicting priorities and opinions			
4.6 Convey information and address issues in ways that avoid jargon and assumptions; respond appropriately to questions and concerns to promote understanding, including use of verbal, written and digital information			
4.8 Autonomously adapt verbal and non-verbal communication styles in ways that are empathetic and responsive to people's communication and language needs, preferences and abilities (including levels of spoken English and health literacy)			
4.9 Communicate effectively with individuals who require additional assistance, such as sensory or cognitive impairments, to ensure an effective interface with a practitioner, including the use of accessible information			
4.10 Evaluate and remedy situations, circumstances or places which make it difficult to communicate effectively (e.g. noisy, distressing environments which may occur during home visits, care home visits or in emergency situations), and have strategies in place to overcome these barriers			
4.12 Adapt communication approaches to non-face to face situational environments e.g. phone, video, email or remote consultation			
Domain A. Person-centred collaborative working			
5.0 Capabilities: Personalising the pathway for people living with and affected by cancer The practitioner is able to:			
5.1 Demonstrate sensitivity to the significance of individuals' background, identity, culture, values and experiences for how their cancer condition impacts on their life, recognising the expertise that individuals bring to managing their own care			
5.2 Work with individuals to develop personalised care plans that:			
• Reflect their priorities and concerns both now and for the future.			
• Encourage self-care and self-reporting of significant symptoms, including in an emergency.			
• Consider the psychological effects of cancer and strategies to manage this.			
• Incorporate other medical conditions and frailty risk			
• Consider the risks, benefits and consequences of each available option			
5.3 Take account during care planning of the burden of treatment for individuals with cancer and comorbidities, including regular appointments that may also be for the management of their other healthcare needs			
5.4 Use protocols and guidelines to create personcentred individual care pathways and documentation e.g. care plans, treatment summaries, late effects surveillance			
5.10 Recognise the significance of family, carers and social networks in planning and providing care and the importance of developing partnerships with them, with due regard for the complexity and diversity in family relationships and arrangements			
5.12 Evaluate the implications of, and apply in practice, the relevant legislation for meaningful informed consent and shared decision making (e.g. mental capacity legislation, Fraser Guidelines)			

Domain A. Person-centred collaborative working			
6.0 Capabilities: Helping people make informed choices as they live with or are affected by cancer			
The practitioner is able to:			
6.1 Provide information and advice appropriate to the needs, priorities and concerns of individuals			
6.4 Acknowledge and respect the decisions made by individuals concerning their health and wellbeing in relation to cancer, cancer treatments, survivorship and late effects care			
6.6 Make appropriate decisions to seek help and report concerns to colleagues when an individual's choices place them at risk			
6.7 Identify factors that can affect an individual's ability to request, organise or access services or assistance and take appropriate action to help them receive the care they require (e.g. knowledge, confidence, physical constraints, social isolation)			
6.8 Provide information and assistance to help individuals access the services and resources they require to implement their decisions			
Domain A. Person-centred collaborative working			
7.0 Capabilities: Providing information to support self-management and enable independence for people living with and affected by cancer			
The practitioner is able to:			
7.1 Provide written, online and verbal information to individuals about their condition, treatment and services available to support self-care and independence			
7.3 Provide individuals with accessible information to support their intervention plan, for instance, crib sheet/audio visual material of signs and symptoms to be monitored in relation to cancer, cancer treatments, recurrence or likely late effects			
7.6 Evaluate individual's understanding of information, (including written, visual and audiobased information), communicate effectively to correct misunderstandings and explain complex medical terminology in lay terms			
7.7 Direct individuals and family members to local resources, appropriate agencies and information sources, including online information or non-text based information, on issues that may affect them following cancer treatment, including work and finance matters			
7.8 Offer guidance and support with accessing appropriate online sources of information			
8.0 Capabilities: Multi-disciplinary, interagency and partnership working			
The practitioner is able to:			
8.1 Practise within their professional and personal scope of practice and access specialist advice or support for the individual or for themselves when appropriate			
8.2 Engage in effective inter-professional communication and collaboration with clear documentation to optimise the integrated management of the individual with cancer			
8.3 Liaise between service users, relatives and carers when making links to members of the multidisciplinary team involved in planning an individual patient's care pathway to optimise interventions			
8.5 Have a knowledge of the range of services available to support people across the care pathway and how to refer/signpost to them with awareness of when it would be appropriate to refer back to treating centres, including for emergency presentations			
Domain A. Person-centred collaborative working			
9.0 Capabilities: Referrals and integrated working to support transitional care for people living with and affected by cancer			
The practitioner is able to:			
9.1 Understand the roles that acute, community and primary care services play in supporting people living with and affected by cancer			
9.2 Understand the issues facing individuals as they complete cancer treatment or are discharged from acute hospital follow-up			
9.3 Support individuals to develop confidence in their ability to cope with transition points in their care such as on discharge from hospital care to self-managing at home, supporting independence and acts as an advocate as appropriate			
Domain B: Assessment, investigations and diagnosis			
10.0 Capabilities: History taking The practitioner is able to:			

10.1 Demonstrate an understanding of the Holistic Needs Assessment and Care Plan (HNA) process, including the physical and psychosocial components, and its implications for practice; understanding the components which might influence personal choice, such as faith, age, culture			
10.5 Use active listening skills and open questions to effectively engage and facilitate shared agenda setting			
10.6 Explore and appraise peoples' ideas, concerns and expectations about their symptoms and condition and whether these may act as a driver or form a barrier			
10.11 Assess the impact of individuals' presenting symptoms, including the impairment of function, limitation of activities and restriction on participation, including work			
10.13 Record all pertinent information gathered concisely and accurately for clinical management, and in compliance with local guidance, legal and professional requirements for confidentiality, data protection and information governance			
Domain B: Assessment, investigations and diagnosis			
11.0 Capabilities: Clinical physical and mental health assessment			
The practitioner is able to:			
11.1 Appropriately obtain consent to physical examination, respect and maintain the patient's privacy, dignity (and comfort as far as practicable), and comply with infection prevention and control procedures			
11.2 Adapt their practice to meet the needs of different groups and individuals (including those with particular needs such as cognitive impairment or learning disabilities), working with chaperones, where appropriate			
11.3 Undertake observational and functional assessments of individuals relevant to their presenting condition to identify and characterise any abnormality			
11.5 Use nationally recognised tools where appropriate to assess peoples' condition and symptoms			
11.10 Record the information gathered through assessments concisely and accurately, for clinical management and in compliance with local guidance, legal and professional requirements for confidentiality, data protection and information governance			
Domain B: Assessment, investigations and diagnosis			
12.0 Capabilities: Investigations, diagnosis and care planning			
The practitioner is able to:			
12.5 Recognise signs and symptoms requiring a change in the care pathway e.g. side effect grading, psychological concerns (such as depression and anxiety) cancer recurrence and end of life care and initiates appropriate interventions			
12.7 Assess the impact of cancer diagnosis and treatment on lifestyle and future employment needs and interventions appropriately			
12.8 Understand the importance and implications of findings and results and take appropriate action. This may be urgent referral/escalation as in life threatening situations, or further investigation, treatment or referral			
12.12 Demonstrate knowledge of tests and investigations commonly used in cancer care, including rationale for use and normal ranges of results			
12.13 Develop individualised patient care plans for tests and investigations and initiate them in accordance with guidelines and protocols			
12.16 Provide appropriate explanations to individuals regarding the procedures involved and the reasons for tests and investigations			
12.21 Recognise when a clinical situation is beyond individual capability or competence and escalate appropriately			
Domain C: Condition management, treatment and planning			
14.0 Capabilities: Managing medical and clinical complexity and risk.			
The practitioner is able to:			
14.1 Understand the complexities of working with people who have cancer +/- other clinical conditions including physical, psychological, spiritual and psychosocial			
14.8 Consistently encourage prehabilitation, rehabilitation and, where appropriate, recovery			
14.11 Support people appropriately and with regard for other care providers involved in their care			
Domain C: Condition management, treatment and planning			
15.0 Capabilities: Independent prescribing and pharmacotherapy			

The practitioner is able to:			
15.1 Safely prescribe and/or administer therapeutic medications, relevant and appropriate to scope of practice, including an applied understanding of pharmacology which considers relevant physiological and/or pathophysiological changes and allergies			
15.5 Practice in-line with the principles of antibiotic stewardship and antimicrobial resistance using available national resources			
15.9 Advise people on medicines management, including compliance and the expected benefits and limitations and inform them impartially on the advantages and disadvantages in the context of other management options			
15.10 Understand a range of options available other than drug prescribing (e.g. not prescribing, promoting self-care, advising on the purchase of over-the-counter medicines)			
15.11 Facilitate, refer to and/or prescribe nonmedicinal therapies such as psycho-oncology, lifestyle changes, wellbeing information and support, and social prescribing			
15.13 Support people having pharmacological treatment for cancer including knowledge of and management of side effects and when to seek additional advice			
15.14 Maintain accurate, legible and contemporaneous records of medication prescribed and/or administered and advice given in relation to medicine			
Domain C: Condition management, treatment and planning			
16.0 Capabilities: Prehabilitation and rehabilitation interventions The practitioner is able to:			
16.1 Understand how to screen and assess people with cancer for prehabilitation interventions			
16.2 Understand the importance of prehabilitation interventions at the earliest opportunity from diagnosis and how to implement the elements of effective prehabilitation			
16.3 Understand the prehabilitation interventions and they can support people with cancer			
16.4 Understand the role of common rehabilitation interventions for people with cancer			
16.7 Provide advice on restoring function, including graded return to normal activity, navigation to selfmanagement resources, and modifying activity for limited time periods			
16.8 Understand that cognitive, psychological and emotional support are the key to successful rehabilitation			
16.9 Understand that some individuals such as those living with disability, mental health issues, multimorbidity and/or frailty may require additional rehabilitation support and that their trajectory of recovery and/ or increased independence may be slower than for others			
16.10 Work in partnership with individuals to explore suitability of prehabilitation (universal, targeted and specialist) and rehabilitation interventions, including social prescribing for those requiring universal support e.g. referring individuals to a range of local non-clinical services such as community-based physical activity programmes, where appropriate			
16.12 Refer individuals to highly specialist health and care professionals e.g. allied health professionals where this is appropriate to individuals' needs and wishes			
Domain C: Condition management, treatment and planning			
17.0 Capabilities: Promoting self-management and behaviour change			
The practitioner is able to:			
17.4 Promote the importance of physical activity for general health and advise on what people with cancer related symptoms can and should do			
17.5 Promote the importance of a healthy diet and nutritional requirements to reduce the impact of cancer-related symptoms			
17.7 Provide encouragement to individuals attempting to change or adopt new health related behaviours providing positive reinforcement when they are finding it difficult or achieving less than they hoped, supporting development of realistic short and long-term goals			
17.8 Signpost individuals to local services that support healthy living, whilst acknowledging and respecting their individual decision making, applying knowledge of the range of services available to support and guide individuals across the care pathway			
17.10 Provide practical and emotional support to encourage individuals to take an active role in communicating with health professionals where this is needed, by supporting and encouraging them to ask questions about what is a priority or concern for them			
17.11 Recognise social, economic, and environmental factors that influence behaviour, and those that act as barriers and facilitators, providing intervention and/or signposting to inform and motivate individuals to change behaviour			

Domain C: Condition management, treatment and planning			
18.0 Capabilities: Symptom management The practitioner is able to:			
18.1 Recognise common symptoms and oncological emergencies			
Domain C: Condition management, treatment and planning			
19.0 Capabilities: Late effects The practitioner is able to:			
19.1 Demonstrate knowledge of symptoms and care interventions for late effects appropriate to own client group/specialty (e.g. endocrine, bone health, cardiac toxicity, psychosexual issues, fertility, dental health, early menopause)			
19.3 Use protocols and guidelines to create holistic individual care pathways and documentation e.g. care plans, treatment summaries, late effects surveillance			
Domain C: Condition management, treatment and planning			
20.0 Capabilities: Palliative and end of life care The practitioner is able to:			
20.1 Take a structured history of a patient presenting with palliative care needs or in the last days of life			
20.4 Understand and practice within the key legal framework relating to end of life care such as:			
• Advanced Directives			
• Legal Power of Attorney			
• Do not resuscitate			
• Treatment escalation plans			
20.5 Identify and rationalise any need for additional support for the patient and carer / family, socially, psychologically and medically			
Domain D: Leadership and collaborative practice			
21.0 Capabilities: Leadership, management and organisation			
The practitioner is able to:			
21.1 Be organised with due consideration for people and colleagues, carrying out both clinical and nonclinical aspects of work in a timely manner, demonstrating effective time management within the constraints of the time limited nature of healthcare			
21.2 Respond positively when services are under pressure, acting in a responsible and considered way to ensure safe practice			
21.5 Demonstrate receptiveness to challenge and preparedness to constructively challenge others, escalating concerns that affect people, families, carers, communities and colleagues' safety and wellbeing when necessary. clarity of roles within teams, to encourage productive working			
21.6 Demonstrate awareness of policies and procedures relevant to their own area of practice in cancer services and support service developments to improve patient outcomes			
21.16 Respond to compliments and complaints appropriately, following professional standards and applicable local policy			
Domain E: Developing evidence-based practice and improving quality			
22.0 Capabilities: Research and evidence-based practice			
The practitioner is able to:			
22.1 Demonstrate a detailed understanding of the importance of clinical research and evidence-based practice and applies to own area of practice			
22.2 Access appropriate sources of evidence to support their own practice in cancer and palliative care services (e.g. journals, literature reviews, research articles, audits, and arts-based practices)			
22.3 Understand and utilise the evidence of best practice to inform own practice			
22.5 Demonstrate working knowledge of:			
• the range of qualitative and quantitative methodologies available and their purpose			
• the concepts of validity and reliability in relation to the design of data collection, collation and analysis.			

<ul style="list-style-type: none"> the processes used to critique a research paper and how to consider the implications for practice 			
22.8 Understand the ethical and legal issues around data collection and information handling, including confidentiality, consent, data protection and storage			
22.11 Apply principles of ethical good clinical practice in relation to research, audit and service evaluation (e.g. working within local governance systems and policies, informed consent and confidentiality)			
Domain F: Developing evidence-based practice and improving quality			
23.0 Capabilities: Service evaluation and quality improvement			
The practitioner is able to:			
23.5 Identify areas of the current service that could be developed including identification of the gaps and potential opportunities			
23.6 Collect data required for service evaluations, audits or research in services for people living with and affected by cancer			
23.16 Contribute to the development and completion of peer review, service review, audits and research within local services			
Domain G: Educating and developing self and other			
24.0 Capabilities: Education The practitioner is able to:			
24.1 Critically assess and address own learning needs, negotiating a personal development plan that reflects the breadth of ongoing professional development across the four pillars of clinical practice			
24.3 Plan, engage in and record learning and development relevant to their role and in fulfilment of professional, regulatory and employment requirements			
24.4 Advocate for and contribute to a culture of organisational learning to inspire future and existing staff			
24.5 Act as a role model, educator, supervisor, coach and mentor, seeking to instil and develop the confidence of others, actively facilitating the development of others			
24.12 Support other staff in the implementation of services for people with cancer			
24.13 Promote awareness and implementation of national guidance for rehabilitation relating to cancer, palliative care and end of life care, for example exercise and bone metastases guidance			
24.19 Recognise people as a source of learning, in their stories, experiences and perspectives, and as peers to co-design and co-deliver educational opportunities. Appraise and respond to learning/information needs of individuals, families, carers and communities delivering informal learning opportunities and formal/structured education and training to people with cancer, their families and carers to promote self-care, support health literacy and empower participation in decision-making about aspects of their care, management and treatment			