**Level 2 Psychological Support Skills**

Audience: National

Delivery: Face to Face

Suitable for levels: Advanced, Consultant

Capabilities

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. 4 Use their clinical-reasoning skills to undertake an in-depth assessment of the presenting problem, interpret findings, develop working and differential diagnoses, formulate, communicate, implement and evaluate management plans

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. 9 Value collaborative involvement and engage people with cancer to improve and co -produce person -centred, quality services

1.12 Demonstrate safe, effective, autonomous, reflective practice

1.16 Promote person -centred care to meet individuals’ best interests and to optimise service delivery

2. 1 Demonstrate professional practice in own day to day clinical practice

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. 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

3. 1 Consistently role model highly developed interpersonal and advanced communication skills to engage in effective, appropriate, enabling and complex interactions with individuals, carers and colleagues in the clinical environments and roles in which they practise.

3. 2 Use advanced skills in listening and information-processing, alongside empathetic skills to assess, explore and respond to individuals’ complex needs and concerns

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

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. 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

4.11 Consult in a highly organised and structured way, with professional curiosity as required, whilst understanding the constraints of the time limited nature of consultations and ensure communication is safe and effective.

4.15 Select effective, situation and patient appropriate history taking and consultation skills drawing on knowledge and expertise in advanced communication skills

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. 4 Use protocols and guidelines to create person-centred individual care pathways and documentation e.g. care plans, treatment summaries, late effects surveillance

5. 9 Establish processes and ensure physical, psychological and social assessments are incorporated into local care planning systems, for example health promotion, psychosocial adjustment, work and social functioning.

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

6. 1 Provide information and advice appropriate to the needs, priorities and concerns of individuals

6. 2 Respond to individuals’ descriptions of their needs, preferences and concerns to ensure that care plans meet their goals and needs, managing the changing needs and expectations of patients and their families and ensures care plans reflect the new priorities

6.11 Recognise and promote the importance of social networks and communities for people and their carers in managing cancer related symptoms

7. 6 Evaluate individual’s understanding of information, (including written, visual and audio-based information), communicate effectively to correct misunderstandings and explain complex medical terminology in lay terms

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

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

10. 4 Uses specialist skills and knowledge to carry out screening and clinical assessments, conducting assessments using appropriate standardised, evidence-based screening and assessment tools (Examples include, but not limited to: 5 times sit to stand test; 6-minute walk test; cardiopulmonary exercise test; incremental shuttle walk test; MUST; Royal Marsden nutrition screening tool; Patient generated subjective global assessment questionnaire; Patient health questionnaire-9; Generalised anxiety disorder assessment (GAD-7); Hospital anxiety and depression scales (anxiety and/or depression), EORTC QLQ-C-30; Brief fatigue inventory, WHO disability assessment schedule)

10. 8 Be able to undertake general history-taking, and focused history-taking to elicit and assess ‘red flags,’ acute oncological presentations, reoccurrence, cancer treatment side effects and late effects

11. 5 Use nationally recognised tools where appropriate to assess peoples’ condition and symptoms

11. 6 Perform a mental health assessment appropriate to the needs of the patient and the setting

11. 7 Assess the psychological, social and emotional needs of cancer patients, their relatives and carers including coming to terms with a cancer diagnosis and potentially a terminal diagnosis

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

12.21 Recognise when a clinical situation is beyond individual capability or competence and escalate appropriately

13. 9 Suggest a variety of follow-up arrangements that are safe and appropriate, whilst also enhancing the person’s autonomy

13.12 Recognise, support and proactively manage people who require palliative care and those in their last year of life, extending the support to carers and families as appropriate

14. 1 Understand the complexities of working with people who have cancer +/- other clinical conditions including physical, psychological, spiritual and psychosocial

14. 3 Manage both practitioner and peoples’ uncertainty

15.11 Facilitate, refer to and/or prescribe non-medicinal therapies such as psycho-oncology, lifestyle changes, wellbeing information and support, and social prescribing

16. 8 Understand that cognitive, psychological and emotional support are the key to successful rehabilitation

17. 2 Understand and use behaviour change techniques such as motivational interviewing and health coaching to facilitate cancer patients to understand the contribution of healthy lifestyle behaviours in promoting and sustaining recovery and well-being prior to, during and after treatment

17.14 Ensure that effective strategies are in place to maximise the opportunities for self-management and supported self-management

20. 5 Identify and rationalise any need for additional support for the patient and carer / family, socially, psychologically and medically

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

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. 8 Instigate, promote and utilise clinical supervision for self and other members of the healthcare team to support and facilitate professional development.