CLINICAL TRAINING RECOMMENDATIONS

For All Clinicians Caring for Adult Patients with Serious Illness

Center to Advance Palliative Care™ capc

All clinicians have the responsibility to improve outcomes and provide person-centered care for people with serious illness—but many have not received the necessary training. Clinicians and health care organizations can use CAPC's training recommendations as a skills-building roadmap.

Based on guidance from the National Consensus Project's Clinical Practice Guidelines for Quality Palliative Care, the recommendations cover four aspects of care:

1. Assessing the needs and concerns of patients
2. Strengthening the clinician-patient relationship and understanding care goals
3. Managing pain and symptoms
4. Preventing crises and helping patients plan ahead

Training Recommendations by Discipline

- Physicians
- Advanced Practice Providers
- Registered Nurses
- Social Workers
- Chaplains
- Clinical Care Managers
- Home Health Aides and Certified Nursing Assistants
- Speech-Language Pathologists

Learn more at capc.org/trainingrecommendations

For Physicians

Domain	Foundational Skills for All Physicians	Additional Skills for Physicians Who Focus Primarily on Supporting People with Serious Illness
Assess the Needs and Concerns of Patients	• Assess patient's physical, mental, social, and spiritual well-being at all stages of disease • Know what palliative care is, and when to request a consult	• Recognize common sources of suffering for patients with serious illness, and perform a comprehensive assessment including: ○ Social risk factors ▪ Presence of caregiver ▪ Caregiver burden ▪ Access to housing, food, and transportation ▪ Racism ▪ Financial strain ○ Polypharmacy ○ Emotional and spiritual distress ○ Physical symptom distress (e.g., pain, dyspnea, constipation) ○ Communication barriers (e.g., vision, hearing, language) ○ Need for adaptive equipment
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Have conversations with patients to understand what matters most to them now that they have a diagnosis of a serious illness, and participate in shared decision-making that is aligned with patients' values and preferences • Conduct advance care planning conversations and complete advance directives • Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities	• Conduct skilled conversations with patients and families about: ○ Bad news ○ Prognosis ○ Patient/family understanding of the illness

Domain	Foundational Skills for All Physicians	Additional Skills for Physicians Who Focus Primarily on Supporting People with Serious Illness
	• Identify patients who are eligible for hospice, and support them to make the decision whether to enroll	

Manage Pain and Symptoms	• Assess, identify, and treat common symptoms associated with serious illness, including:
	  ○ Pain
	  ○ Nausea and vomiting
	  ○ Constipation
	  ○ Dyspnea
	  ○ Fatigue
	  ○ Depression
	  ○ Anxiety
	  ○ Delirium, agitation
	• Assess the feasibility and safety of the care plan with the patient (e.g., whether prescribed medications are accessible and affordable)
	• Assess and identify cognitive impairment
	• Refer patients for a specialty palliative care consult for complex or intractable symptoms
		• Anticipate the full spectrum of symptoms related to specific serious illnesses and along the disease trajectory

Prevent Crises and Plan Ahead	• Recognize non-physical sources of suffering, and refer patients for social work, behavioral health, and/or spiritual support when needed ○ Investigate access to virtual behavioral health support based on patient insurance • Assess function and refer patients for a home safety and/or fall risk evaluation when appropriate • Evaluate risks from polypharmacy and anticholinergic burden, and consider de-prescribing as a component of medication management	• Identify community resources that can support patients living with serious illness, and their caregivers (either directly or by connecting your patients to a social worker) • Identify barriers to meeting patient and family needs and honoring their priorities, and discuss the least restrictive alternatives (e.g., home redesign or board and care home versus nursing home placement) either directly, or through referral to the appropriate health professional

For Advanced Practice Providers (APPs)

Domain	Foundational Skills for All APPs	Additional Skills for APPs Who Focus Primarily on Supporting People with Serious Illness
Assess the Needs and Concerns of Patients	• Assess patient's physical, mental, social, and spiritual well-being at all stages of disease • Know what palliative care is, and when to request a consult	• Recognize common sources of suffering for patients with serious illness, and perform a comprehensive assessment including: ○ Social risk factors ▪ Presence of caregiver ▪ Caregiver burden ▪ Access to housing, food, and transportation ▪ Racism ▪ Financial strain ○ Polypharmacy ○ Emotional and spiritual distress ○ Physical symptom distress (e.g., pain, dyspnea, constipation) ○ Communication barriers (e.g., vision, hearing, language) ○ Need for adaptive equipment
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Have conversations with patients to understand what matters most to them now that they have a diagnosis of a serious illness • Conduct advance care planning conversations and complete advance directives • Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities • Identify patients who are eligible for hospice and support them to make the decision whether to enroll	• Conduct skilled conversations with patients and families about: ○ Bad news ○ Prognosis ○ Patient/family understanding of the illness

Domain	Foundational Skills for All APPs	Additional Skills for APPs Who Focus Primarily on Supporting People with Serious Illness

Manage Pain and Symptoms	• Assess, identify, and treat (as allowed by state scope of practice) common symptoms associated with serious illness, including:
	  ○ Pain
	  ○ Nausea and vomiting
	  ○ Constipation
	  ○ Dyspnea
	  ○ Fatigue
	  ○ Depression
	  ○ Anxiety
	  ○ Delirium, agitation
	• Assess the feasibility and safety of the care plan with the patient (e.g., whether prescribed medications are accessible and affordable)
	• Assess and identify cognitive impairment
	• Refer patients for a specialty palliative care consult for complex or intractable symptoms
		• Anticipate symptoms related to specific serious illnesses
		• Consult with or refer patients to palliative care specialists when first-line treatments have not been effective at managing symptoms

Prevent Crises and Plan Ahead	• Recognize non-physical sources of suffering, and refer patients for social work, behavioral health, and/or spiritual support when needed ○ Investigate access to virtual behavioral health support based on patient insurance • Assess function and refer patients for a home safety and/or fall risk evaluation when appropriate • Evaluate risks from polypharmacy and anticholinergic burden and consider de-prescribing as a component of medication management	• Identify community resources that can support patients living with serious illness, and their caregivers (either directly or by connecting your patients to a social worker) • Identify barriers to meeting patient and family needs and honoring their priorities, and discuss the least restrictive alternatives (e.g., home redesign or board and care home versus nursing home placement) either directly, or through referral to the appropriate health professional

For Registered Nurses

Domain	Foundational Skills for All Registered Nurses	Additional Skills for Registered Nurses Who Focus Primarily on Supporting People with Serious Illness

Assess the Needs and Concerns of Patients	• Assess patient's physical, mental, social, and spiritual well-being at all stages of disease
	• Know what palliative care is, and when to request a consult
		• Recognize common sources of suffering for patients with serious illness
		• Collect data on social risk factors, including:
		  ○ Presence of caregiver
		  ○ Caregiver burden
		  ○ Access to housing, food, and transportation
		  ○ Racism
		  ○ Financial strain
		• Perform a medication review for polypharmacy
		• Screen for emotional and spiritual distress, and advocate with team for effective management
		• Screen for common symptoms, and advocate with team for effective management
		  ○ Pain
		  ○ Nausea and vomiting
		  ○ Constipation
		  ○ Dyspnea
		  ○ Fatigue
		  ○ Depression
		  ○ Anxiety
		  ○ Delirium, agitation
		• Screen for communication barriers (e.g., vision, hearing, language, and health literacy)
		• Screen for need for adaptive equipment

Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Elicit information from patients about what matters most to them now that they have a diagnosis of a serious illness, and advocate for care that is aligned with patients' values and preferences • Conduct advance care planning conversations and complete advance directives	• Facilitate and participate in conversations with patients and families about what to expect, and advocate on behalf of patients' values and preferences

Domain	Foundational Skills for All Registered Nurses	Additional Skills for Registered Nurses Who Focus Primarily on Supporting People with Serious Illness
	• Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities • Identify patients who are eligible for hospice and discuss with the care team	

Manage Pain and Symptoms	• Manage the implementation of treatments for common symptoms associated with serious illness, including:
	  ○ Pain
	  ○ Nausea and vomiting
	  ○ Constipation
	  ○ Dyspnea
	  ○ Fatigue
	  ○ Depression
	  ○ Anxiety
	  ○ Delirium, agitation
	• Assess the feasibility and safety of the care plan with the patient (e.g., whether prescribed medications are accessible and affordable)
	• Identify cognitive impairment
	• Identify patients that would benefit from a specialty palliative care consult for complex or intractable symptoms, and discuss with the care team
		• Anticipate symptoms related to specific serious illnesses
		• Consult with, or refer patients to, palliative care specialists when implementation of first-line treatments according to the palliative care plan have not been effective at managing symptoms

Prevent Crises and Plan Ahead	• Recognize non-physical sources of suffering, and recommend patients for social work, behavioral health, and/or spiritual support when needed ○ Investigate access to virtual behavioral health support based on patient insurance	• Identify community resources that can support patients living with serious illness, and their caregivers (either directly or by connecting your patients to a social worker) • Identify barriers to meeting patient and family needs and honoring their priorities, and discuss the least restrictive alternatives (e.g., home redesign or board and care home

Domain	Foundational Skills for All Registered Nurses	Additional Skills for Registered Nurses Who Focus Primarily on Supporting People with Serious Illness
	• Assess function and refer patients for a home safety and/or fall risk evaluation when appropriate • Screen for polypharmacy, and work with team to consider de-prescribing	versus nursing home placement) either directly, or through referral to the appropriate health professional

For Social Workers

Domain	Foundational Skills for All Social Workers	Additional Skills for Social Workers Who Focus Primarily on Supporting People with Serious Illness
Assess the Needs and Concerns of Patients	• Know what palliative care is, and when to request a consult • Assess patient's physical, mental, social, and spiritual well-being at all stages of disease • Assess caregiving needs and resources	• Recognize common sources of suffering for patients with serious illness, and perform a comprehensive assessment using culturally appropriate tools, including: ○ Social risk factors: ▪ Presence of caregiver ▪ Caregiver burden ▪ Access to housing, food, and transportation ▪ Racism and other culturally-bound factors that influence care ▪ Financial strain ○ Polypharmacy ○ Emotional and spiritual distress ○ Physical symptom distress (e.g., pain, dyspnea, constipation) ○ Communication barriers (e.g., vision, hearing, language, and health literacy) ○ Need for adaptive equipment
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Have conversations with patients to understand what matters most to them now that they have a diagnosis of a serious illness, and participate in shared decision-making that is aligned with patients' values and preferences • Conduct advance care planning conversations and complete advance directives • Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities	• Conduct skilled conversations with patients and families about: ○ Bad news ○ Prognosis ○ Patient/family understanding of the illness ○ Family conflict ○ Financial strain, insurance • Provide education regarding: ○ Coping with serious illness ○ Self-care ○ Spirituality

Domain	Foundational Skills for All Social Workers	Additional Skills for Social Workers Who Focus Primarily on Supporting People with Serious Illness
	• Identify patients who are eligible for hospice, and support them to make the decision whether to enroll	

Manage Pain and Symptoms	• Assess and address the suffering caused by common symptoms associated with serious illness, including:
	  ○ Pain
	  ○ Nausea and vomiting
	  ○ Constipation
	  ○ Dyspnea
	  ○ Fatigue
	  ○ Depression
	  ○ Anxiety
	  ○ Delirium, agitation
	• Assess the feasibility and safety of the care plan with the patient (e.g., whether prescribed medications are accessible and affordable)
	• Assess and identify cognitive impairment
	• Identify patients that would benefit from a specialty palliative care consult for complex or intractable symptoms, and refer or discuss with the care team
		• Anticipate the full spectrum of symptoms related to specific serious illnesses and along the disease trajectory
		• Contextualize treatment and/or interventions to incorporate the values, meaning, and priorities of each individual patient to provide person-centered, family-focused, and culturally congruent care

Prevent Crises and Plan Ahead	• Collaborate in discharge planning • Recognize non-physical sources of suffering, and collaborate with spiritual care colleagues to provide support when needed ○ Investigate access to virtual behavioral health support based on patient need and insurance • Assess functioning, including mental health status, and refer patients for a home safety and/or fall risk evaluation when appropriate	• Identify community resources that can support patients living with serious illness, and their caregivers (e.g., housing, food, transportation, faith communities, state and local agencies) • Identify barriers to meeting patient and family needs and honoring their priorities, and discuss the least restrictive alternatives (e.g., home redesign or board and care home versus nursing home placement) either directly, or through referral to the appropriate health professional • Develop a crisis intervention assessment and plan, including suicide prevention

For Chaplains

Domain	Foundational Skills for All Chaplains	Additional Skills for Chaplains Who Focus Primarily on Supporting People with Serious Illness
Assess the Needs and Concerns of Patients	• Know what palliative care is, and when to request a consult • Assess for emotional, existential, and spiritual distress • Take the patient's spiritual history, including whether the patient is part of a faith community • Assess caregiving needs and resources	• Recognize common sources of suffering for patients with serious illness, and perform a comprehensive assessment using culturally appropriate tools, including: ○ Social risk factors: ▪ Presence of caregiver ▪ Caregiver burden/needs ▪ Racism and other culturally-bound factors that influence care ▪ Financial strain ▪ Access to housing, food, and transportation ○ Emotional and spiritual distress, and how these might manifest as physical symptoms (e.g., pain, shortness of breath, constipation) ○ Communication barriers (e.g., vision, hearing, language, and health literacy) ○ Protective factors that can support resilience during serious illness
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Have conversations with patients to understand what matters most to them now that they have a diagnosis of a serious illness, and participate in shared decision-making that is aligned with patients' values and preferences • Conduct skilled conversations with patients and families about: ○ Serious news ○ Patient/family understanding of the meaning of their illness ○ Family conflict ○ Fear and grief ○ Meaning-making ○ Death and dying	• Provide support regarding: ○ Coping with serious illness ○ Self-care • Conduct advance care planning conversations and complete advance directives • Provide bereavement support for families and caregivers • Support the care team to deliver spiritually-sensitive care; effectively communicate with members of the care team

Domain	Foundational Skills for All Chaplains	Additional Skills for Chaplains Who Focus Primarily on Supporting People with Serious Illness
	• Identify how culture, race, gender, sexual orientation, spirituality, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities • Support patients who are eligible for hospice in the process of deciding whether to enroll	
Manage Pain and Symptoms	• Assess the spiritual/existential underpinnings of suffering caused by common symptoms associated with serious illness, and alert the care team to symptom burden • Identify patients that would benefit from a specialty palliative care consult for complex or intractable symptoms, and refer or discuss with the care team	• Contextualize treatment and/or interventions to incorporate the values and priorities of each patient to provide person-centered, family-focused, and culturally congruent care • Assess the feasibility of the care plan with the patient (e.g., whether prescribed medications are accessible and affordable)
Prevent Crises and Plan Ahead	• Connect patients to spiritual supports, including outreach to faith communities • Recognize the need for social work or behavioral health services, and make appropriate linkages to these services • Identify functioning or mental health needs and make appropriate referrals	• Identify community resources that can support patients living with serious illness, and their caregivers, either directly or by connecting your patients to a social worker (e.g., housing, food, transportation, faith communities, state- and local agencies)

For Clinical Care Managers

Domain	Foundational Skills for All Clinical Care Managers	Additional Skills for Clinical Care Managers Who Focus Primarily on Supporting People with Serious Illness

Assess the Needs and Concerns of Patients	• Know what palliative care is, and how it benefits patients/members
	• Recognize common sources of suffering for people living with serious illness
	• Perform a comprehensive assessment of the needs and concerns of patients using open-ended questions, including the following:
	  ○ Pain and other physical symptom distress
	  ○ Psychological symptom distress, including depression and anxiety
	  ○ Polypharmacy and anticholinergic burden
	  ○ Functional impairment
	  ○ Caregiver burden
	  ○ Social risk factors
	  ○ Communication needs
	• Assess for need for adaptive equipment
		• Determine patient/member's level of knowledge about their illness
		• Listen actively for emotional and spiritual distress; invite dialog on these issues

Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver culturally-responsive care and services • Advocate for care that is aligned with patients' values and preferences	• Explain what to expect about their illness • Elicit information from patients about what matters most to them now that they have a diagnosis of a serious illness • Conduct advance care planning conversations and complete advance directives • Provide tools and referrals to assist with family communication and decision-making
Manage Pain and Symptoms	• Initiate steps for symptom management when patient is in distress • *(If in the context of a health plan or long-term patient engagement)* Perform ongoing monitoring and assessment of symptom control	• Identify patients in need of specialty palliative care consultation, educate patient and family on palliative care, and take steps to initiate a consult

Domain	Foundational Skills for All Clinical Care Managers	Additional Skills for Clinical Care Managers Who Focus Primarily on Supporting People with Serious Illness
	• Assess the feasibility and safety of the care plan (e.g., whether prescribed medications are accessible and affordable) and alert the care team to any risks	
Prevent Crises and Plan Ahead	• Recommend additional supports and make linkages, based on assessment findings and patient's insurance/available benefits; these supports may include: ○ Benefits and entitlements assistance ○ Personal care assistance ○ Meal assistance ○ Home safety assessment and DME need ○ Adaptive equipment ○ Caregiver/family support services ○ Caregiver respite services ○ Behavioral health services • *(If participating in discharge planning)* Educate patient on follow-up appointments • Discuss potential hospice eligibility with the primary team	• Map the resources and service providers in the community that can support patients with serious illness • Identify patients who may be at high risk for exacerbations, and link to 24/7 supportive services, such as home-based care programs • Identify barriers to meeting patient and family needs and honoring their priorities, and discuss the least restrictive alternatives (e.g., home redesign or board and care home versus nursing home placement) • Recommend spiritual supports, and make linkages as appropriate

For Home Health Aides and Certified Nursing Assistants (CNAs)

Domain	Foundational Skills for All Home Health Aides and Certified Nursing Assistants	Additional Skills for Home Health Aides and Certified Nursing Assistants
Assess the Needs and Concerns of Patients	• Observe for signs of pain and other distress through body language (patient is resisting care or curled in a ball), behavior (striking or yelling out during care), or facial expressions of fear or anxiety • Use communication skills to ask simple-to-gather information through open-ended, non-judgmental questions such as “Does this hurt?” and “Are you in pain?” • Record the behaviors you observe in the care plan or medical record • Report changes in a patient’s condition, behavior, interactions, and relationships to supervisor	N/A
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Develop a warm and trusting relationship with the patient • Get to know the patient’s life story by looking through photos or talking about the past • Use communication to ask what the patient wants and doesn’t want • Document the patient’s wishes, concerns, and preferences in the care plan or medical record • Support patient choice and control whenever possible (for example, let them eat or bathe at different times or allow wandering rather than sitting down at meal times)	N/A
Manage Pain and Symptoms	• Remind and support the patient to take their medications, using preferred foods to help, or distractions such as music	N/A

Domain	Foundational Skills for All Home Health Aides and Certified Nursing Assistants	Additional Skills for Home Health Aides and Certified Nursing Assistants
	• Encourage and support the patient's mobility, such as assisting with transferring, walking, and other activities • Encourage and support the patient's social interaction with you and others through video, phone, and/or in-person events and connections	
Prevent Crises and Plan Ahead	• Maintain a safe and secure living space • Remove trip hazards and fire hazards • Report the need for grab bars, elevated toilet seats, or lift chairs to your supervisor • Make a list for the patient with contact information for the program, family members, doctor's office, and local emergency services • Explain how patient information is shared, and with whom	N/A

For Speech-Language Pathologists

Domain	Foundational Skills for All Speech-Language Pathologists	Additional Skills for Speech-Language Pathologists Who Focus Primarily on Supporting People with Serious Illness
Assess the Needs and Concerns of Patients	• Recognize the factors that can influence the efficacy and utility of a speech and swallowing evaluation for patients with serious illness (e.g., poorly controlled pain, delirium, cognitive impairment, language barriers), and alert the treating team prior to testing • Perform a comprehensive assessment of difficulties related to communication, swallowing, and ability to participate in meal times, and assess the impact of these issues on the patient and caregiver's quality of life and well-being • Review caregiving needs and resources • Understand the impact of medications and routes of administration on the patient's communication and swallowing, and offer suggestions to the patient's treating team and/or pharmacist • Provide alternative communication methods as applicable (e.g., need for adaptive equipment, including call buzzers/switches, communication boards, one-way speaking valves, electronic communication systems) • Know what palliative care is, and when to request a consult	• Determine patient/member's level of knowledge about their illness • Listen actively for emotional, social, psychological, cultural, and spiritual sources of distress related to communication and/or food intake; invite dialog on these issues and alert appropriate team members • Assess for common factors affecting communication and swallowing, and advocate with the treating team for effective management, including: ○ Social risk factors: ▪ Presence of caregiver ▪ Caregiver burden ▪ Racism and other culturally-bound factors that influence care ▪ Access to housing, food, and transportation ▪ Financial strain (e.g., ability to pay for medications, equipment, or food supplements, thickening agents, and modified foods needed to maintain communication and swallow function; or in the case of non-oral nutrition, home administration of intravenous nutrition) ○ Polypharmacy and its impact on communication and swallowing function ○ Emotional, social, psychological, cultural, and spiritual sources of distress (anxiety, etc.) ○ Physical symptom distress (pain, dyspnea, constipation, diarrhea, etc.) ○ Communication barriers (e.g., vision, hearing, dental issues, nonspeaking status, language, and health literacy)

Domain	Foundational Skills for All Speech-Language Pathologists	Additional Skills for Speech-Language Pathologists Who Focus Primarily on Supporting People with Serious Illness
Strengthen the Clinician-Patient Relationship and Understand Care Goals	• Identify the patient's surrogate decision-maker • Have conversations with patients to understand what matters most to them now that they have a diagnosis of a serious illness, and participate in shared decision-making that is aligned with patients' values and preferences as related to communication, swallowing impairment, the sensory experience of eating, and preferences about medically administered nutrition and hydration • Support patient and caregivers to weigh the benefits and significant burdens of using thickening agents for food • Identify how culture, race, gender, sexual orientation, and context (e.g., social determinants of health) influence patient and family decision-making in the context of a serious illness, and deliver responsive, unbiased care matched to needs and priorities • When considering referral to hospice, determine whether the swallowing and/or nutritional supports in place can be continued	• Facilitate and participate in conversations with patients and families about what to expect in the future • Participate in conversations about patients' goals of care, and advocate on behalf of patients' values and preferences related to communication, swallowing, eating as a social function, and medically administered nutrition and hydration • Conduct skilled conversations with patients and families about: ○ Bad news (e.g., results of diagnostic swallow exams, anticipated loss of ability to swallow or communicate through speech) ○ Prognosis (communication and swallowing) ○ Patient/family expectations ○ Financial strain • Provide education regarding: ○ Coping with serious illness and its impact on communication and swallowing ○ Self-care ○ Alternatives to maximizing safe oral intake ○ Benefits and burdens of medically administered nutrition and hydration
Manage Pain and Symptoms	• Recognize the impact of common symptoms associated with serious illness on communication and swallowing (e.g., impact of severe pain on ability to participate in treatment sessions), and alert team members about: ○ Pain ○ Nausea and vomiting ○ Constipation and diarrhea ○ Dyspnea ○ Fatigue ○ Depression ○ Anxiety	• Anticipate the full spectrum of symptoms related to specific serious illnesses and along the disease trajectory • Contextualize treatment and/or interventions to incorporate the values, meaning, and priorities of each individual patient to provide person-centered, family-focused, and culturally congruent care

Domain	Foundational Skills for All Speech-Language Pathologists	Additional Skills for Speech-Language Pathologists Who Focus Primarily on Supporting People with Serious Illness
	○ Delirium, agitation • Identify cognitive-linguistic impairment and risk or presence of swallowing disorder • Assess the feasibility (access and affordability) and tolerability/acceptability of the care plan with the patient (e.g., prescribed use of liquid thickening agents or modified diets) • Identify patients that would benefit from a specialty palliative care consult for complex or intractable symptoms, or issues related to communication, swallowing function, and social aspects of oral intake, and initiation of medically administered nutrition and hydration; educate patient and family on palliative care, and refer patients or discuss with the care team	
Prevent Crises and Plan Ahead	• Collaborate in discharge planning • Recognize non-physical sources of suffering, and collaborate with colleagues to provide support when needed • Assess home support system for optimal and safe feeding, as per goals of care, and for alternative communication methods • Support the patient and family on whether to initiate medically administered nutrition and hydration (weighing the risk of aspiration from oral intake against the experience of eating and drinking, based on patient preferences)	• Identify community resources that can support patients living with serious illness, and their caregivers (e.g., support groups) • Identify barriers to meeting patient and family needs and honoring their priorities (oral intake in spite of swallowing disorders or medically administered nutrition and hydration), and discuss the least restrictive alternatives (e.g., provide modified diets) • Develop a proactive assessment and plan, in the event of choking, a severe aspiration event, or pneumonia