National Association of Catholic Chaplains  
Part Two, Section 600  
Standards for Specialty Certification in Palliative Care and Hospice 

Those seeking NACC specialty certification in palliative care and hospice are required to have current certification and be in good standing with NACC.

NACC Standards for specialty certification in palliative care and hospice are presented in the context of the National Consensus Project Clinical Practice Guidelines for Quality Palliative Care (3rd Edition) which includes a definition that characterizes palliative care in the United States, also used by the US Department of Health and Human Services (HHS) Centers for Medicare/Medicaid Services (CMS) and the National Quality Forum (NQF):

Palliative Care means patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social and spiritual needs and to facilitate patient autonomy, access to information and choice.

The following features characterize palliative care philosophy and delivery:

- Care is provided and services are coordinated by an interdisciplinary team
- Patients, families, palliative and non-palliative health care providers collaborate and communicate about care needs;
- Services are available concurrently with or independent of curative or life-prolonging care;
- Patient and family hopes for peace and dignity are supported throughout the course of illness, during the dying process, and after death.

NACC Standards for specialty certification in palliative care and hospice also draw from the National Hospice and Palliative Care Organization Competency Grid and both draw from and parallel the Standards set forth by the Association of Professional Chaplains Board of Chaplaincy Certification, Inc. Palliative Care Specialty Certification for Board Certified Chaplains. These Standards use Palliative Care and Hospice as the title of specialty certification, as hospice care is viewed as a specialized palliative care for terminally ill patients.

601 Theory of Pastoral Care Competencies

The applicant will demonstrate the ability to:

601.1 Integrate a theology of spiritual care into the practice of palliative and end of life care.

601.11 Articulate and/or facilitate discussions with the interdisciplinary care team and patient/families with regard to the theology of suffering, loss and pain as they relate to the practice of palliative and end of life care.

601.12 Articulate an understanding of the consensus definition of spirituality and its integration in palliative and end of life care. Spirituality is defined as, “the aspect of humanity that refers to the way individuals seek and express
meaning and purpose and the way they experience their connectedness to the moment, to self, to others, to nature, and/or to the significant or sacred.”

(NCP Guidelines)

601.13 Recognize spirituality as a fundamental aspect of compassionate, patient and family centered care that honors the dignity of all persons.

601.2 Incorporate a working knowledge of psychological and sociological disciplines and religious beliefs and practices in the provision of palliative and end of life care.

601.21 Provide examples of one’s ability to explore, document and communicate spiritual and existential concerns including, but not limited to life review, assessment of hopes, values, and fears, meaning, purpose, beliefs about afterlife, spiritual or religious practices, cultural norms, beliefs that influence understanding of illness, coping, guilt, forgiveness, and life completion tasks.

601.22 Demonstrate a working knowledge of how patients and families function as a system and how group relationships impact the practice of palliative and end of life care.

601.3 Incorporate the spiritual and emotional dimensions of human development into the practice of palliative and end of life care.

601.4 Demonstrate knowledge and skill in addressing ethical issues that arise in palliative and end of life care.

601.41 Understand the role of a chaplain on ethics committee or ethics consult team.

601.42 Understand the Ethical and Religious Directives for Catholic Healthcare Services as they apply to Catholic institutions and healthcare or home care settings.

601.43 Apply the Ethical and Religious Directives for Catholic HealthCare Services in the care of the seriously ill and dying, serving as an expert resource to patients, families and the interdisciplinary care team.

601.5 Incorporate a working knowledge of the unique aspects of group process and organizational behavior important to palliative care and end of life care.

601.51 Describe the role and responsibilities of the chaplain as an integral member of the interdisciplinary palliative care/hospice team, advancing excellence in spiritual care.

601.6 Integrate the history, philosophy, current research and goals of palliative and end of life care into practice.

602 Identity and Conduct Competencies

The applicant will demonstrate the ability to:

602.1 Function in a manner with patients, their families and the interdisciplinary care team that honors the dignity of all persons and the relevance of the spiritual, religious and existential dimensions of care in palliative and end of life care.
602.11 Act as a model and mentor for the interdisciplinary care team in respecting, exploring and communicating with patients and families regarding their beliefs and practices.

602.12 Facilitate the religious, spiritual and cultural rituals/practices desired by patients and their families – especially at/after the time of death.

602.2 Model appropriate pastoral leadership and articulate the unique professional role of the chaplain as a core member of the interdisciplinary care team.

602.3 Identify one’s professional strengths and limitations within the interdisciplinary care team.

602.4 Articulate how emotions, values and assumptions affect caring relationships.

602.41 Understand and respect personal and professional boundaries.

602.42 Model non-judgmental behavior and communication.

602.43 Model the ability to maintain personal integrity while addressing the moral, ethical and existential challenges that confront patients, families and caregivers.

602.5 Advocate for the physical, psycho-social, spiritual and cultural needs of patients and families related to their goals of care.

602.6 Model healthy self-awareness, self-care and self-reflection both personally and professionally.

602.61 Articulate one’s own spirituality, grounded in relationship with God, self and others in a way that respects patients, families and members of the interdisciplinary care team.

602.62 Facilitate spiritual reflection and practices within the interdisciplinary care team.

602.63 Demonstrate an understanding of when to seek help to avoid being overwhelmed, enmeshed or otherwise ineffective.

602.7 Provide educational programs for the interdisciplinary care team that facilitate a greater understanding of their role in addressing spiritual and existential issues frequently confronted by patients with life-threatening or serious illnesses and their families, including spiritual pain and distress.

603 Pastoral Competencies

The applicant will demonstrate the ability to:

603.1 Lead, teach and assist the interdisciplinary care team in integrating spiritual screenings, histories and assessments into their professional scope of practice to identify and relieve spiritual and existential suffering.

603.2 Respect the spirituality and beliefs of all members of interdisciplinary care team and contribute to the creation of a healing environment.

603.3 Provide opportunities to engage the interdisciplinary care team in self-care and self-reflection of their beliefs and values as they work with seriously ill and dying patients.
603.4 Mentor and model the inclusion of the patient and family’s spiritual beliefs and values in advance health care planning and goals of care conversations patient/family conferences, support groups and bereavement support.

603.5 Promote professional and institutional use of religious/spiritual symbols and language sensitive to cultural and religious diversity and support patients and families in their desires to display and use their own religious/spiritual and/or cultural symbols.

603.51 Lead and facilitate rituals for patients, families, community and all levels of the organization.

603.6 Facilitate patient’s access to clergy, religious, spiritual and culturally-based leaders, and/or healers in their own religious, spiritual, or cultural traditions.

604 Professional Competencies

The applicant will demonstrate the ability to:

604.1 Utilize a working knowledge of the key physical, psychological and social issues/principles in palliative and end of life care sufficient to effectively communicate with other palliative care/hospice team members.

604.2 Keep current and participate in evidence-based, research-informed best practices in chaplaincy and spiritual care.

604.3 Integrate chaplaincy care into the organization through appropriate measures, such as policies and procedures, use of evidence informed spiritual screening, history taking, assessment and documentation processes and education of the interdisciplinary team about the role of the professional chaplain.

604.4 Demonstrate a working knowledge of the palliative care/hospice team model and the scope of practice of the interdisciplinary care team members and refer effectively to each.

604.5 Foster and enhance inter-professional and team relationships within all levels of the organization.

604.6 Demonstrate working knowledge of community resources, such as hospice and home care, as well as grief and bereavement services and be an advocate/resource for palliative care in the community.

604.7 Address and document spiritual/existential care needs, goals and concerns identified by patients, family members, the interdisciplinary care team or other spiritual care professionals in accordance with established protocols, emphasized during transitions of care, and/or in discharge plans.

604.8 Participate in palliative care focused quality improvement projects.

604.9 Facilitate ethical decision-making for patients and families of diverse populations informed by the Ethical and Religious Directives for Catholic Health Care Service.
Graduate-level theological degree
The NACC defines a graduate-level theological degree as a graduate degree in theology, divinity, religious studies, pastoral ministry, pastoral studies, or spirituality.