## CAPC CONSENSUS OPERATIONAL FEATURES AND PROGRAM METRICS--SELF ASSESSMENT TOOLS (1-4)

WORKSHEET 1A: SELF-ASSESSMENT OF OPERATIONAL FEATURES: EXISTING PROGRAMS

Domain	WORKSHEET 1A: SELF-ASSESSM Must Have	Inventory	Should Have	Inventory	Action Plan and Potential
Domain	Mustriave	livelitory	Ollowid Have	livelitory	Barriers
Program Administration	Palliative care program staff integrated into the management structure of the hospital to ensure that program processes, outcomes and strategic planning are developed in consideration of hospital mission/goals.	Yes □ No□	Systems that integrate palliative care practices into the care of all hospitalized seriously ill patients.	Yes □ No□	5411010
Types of Services	A consultation service that is available to all hospital inpatients.	Yes □ No□	Resources for outpatient palliative care services, especially in in > 300 bed hospitals	Yes □ No□	
			An inpatient palliative care geographic unit, especially in > 300 bed hospitals	Yes □ No□	
Availability	Monday-Friday inpatient consultation availability and 24/7 telephone support.	Yes □ No□	24/7 inpatient consultation, especially in > 300 bed hospitals	Yes □ No□	
Staffing	Specific funding for a designated palliative care MD(s). All program MDs must be HPM board certified or committed to working toward board certification.	Yes □ No□		Yes □ No□	
	Specific funding for a designated palliative care RN(s), with APN preferred. All program nurses must be certified by the National Board for Certification of Hospice and Palliative Nursing (NBCHPN) or committed to working toward board certification.	Yes □ No□			
	Appropriately trained staff to provide mental health services.	Yes □ No□			
	SW(s) and chaplain(s) available to provide care as part of an interdisciplinary team.	Yes □ No□			
	Administrative support (secretary/administrative assistant position) in hospitals with either more than 150 beds or a	Yes □ No□			