DESK REVIEW REFERENCE GUIDE

PALLIATIVE CARE

For a more timely review of your agency policies and procedures, use this reference guide to ensure you are submitting all ACHC required policies. Reference the ACHC Accreditation Standards for detailed policy and procedure requirements. Your organization must ensure additional state requirements are addressed, if applicable.

Standard	Policy/Document Description	Agency Policy
CBPC1-4A	Conflict of interest disclosure requirements	
CBPC1-5A	Education and experience requirements of manager/leader	
CBPC1-5B	Duties appointed individual assumes during the absence of the manager/leader	
CBPC1-6A	Mechanisms used to provide care/services with a patient-/family-centered approach, optimize quality of life, reduce or relieve suffering, and maintain consistency with patient/family goals	
CBPC1-6B	Additional professionals with credentials, experience, and skills are used to meet the needs of the patient and family in accordance with accepted standards of practice	
CBPC1-9A	Verification process of referring practitioner credentials	
CBPC2-1A	Description of care/services provided by the palliative care program	
CBPC2-2A	Patient Rights and Responsibilities	
CBPC2-3A	Reporting and investigation of alleged violations involving patient care	
CBPC2-4A	Reporting and investigation of patient grievances/complaints	
CBPC2-5A	Securing and releasing confidential Protected Health Information and Electronic Protected Health Information	
CBPC2-6A	Patient's right to accept or decline medical care, patient's preference for cardiopulmonary resuscitation and surgical treatment, and patient's right to formulate an Advance Directive	
CBPC2-6B	Resuscitative guidelines and the responsibilities of personnel	
CBPC2-7A	Provision of care/service to patients with communication or language barriers	
CBPC2-7B	Provision of care/service to patients and families of various spiritual, religious, and existential belief systems	
CBPC2-7C	Methods to deliver culturally and linguistically sensitive services	
CBPC2-8A	Mechanisms used to identify, address, and evaluate ethical issues	
CBPC2-9A	Coordination of care and collaboration with community resources to ensure continuity of care for the patient and family	

Standard	Policy/Document Description	Agency Policy
CBPC2-10A	Description of the different environments of care available to the patient and family	
CBPC2-15A	Provision of grief and bereavement counseling services	
CBPC2-17A	Pain and symptom management	
CBPC3-3A	Care/service rates	
CBPC4-1A	Management of personnel files	
CBPC4-2B	Tuberculosis baseline testing and annual screening	
CBPC4-2C	Hepatitis B vaccine requirements	
CBPC4-2F	Background checks	
CBPC4-2G	Employee handbook and/or personnel policies	
CBPC4-2H	Annual performance evaluations	
CBPC4-3A	Orientation requirements	
CBPC4-4A	Competency assessment requirements	
CBPC4-5A	Education plan	
CBPC4-6A	Observation and evaluation of direct-care personnel	
CBPC4-8A	Special education and/or requirements necessary to administer pharmaceuticals and/or perform special treatments	
CBPC4-9A	Practitioner services provided by qualified individuals and in accordance with standards, practice acts, and program policies	
CBPC4-10A	Nursing services provided by qualified individuals and in accordance with standards, practice acts, and program policies	
CBPC4-11A	Social work services provided by qualified individuals and in accordance with standards, practice acts, and program policies	
CBPC4-11B	Supervision of care/service provided by a Social Worker assistant	
CBPC4-12A	Spiritual care services provided by qualified individuals and in accordance with standards and program job description	
CBPC4-13A	Clinical pharmacy services provided by qualified individuals and in accordance with standards, practice acts, and program policies and/or job descriptions	
CBPC5-1A	Patient record content requirements	
CBPC5-2A	Patient record access, storage, removal, and retention requirements	
CBPC5-3A	Completion of assessment and development of the plan of treatment	
CBPC5-5A	Unmet patient needs and referral to other agencies	
CBPC5-6A	Requirements for patient education	

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Standard	Policy/Document Description	Agency Policy
CBPC5-7A	Requirements for the transfer and discharge of patients	
CBPC5-8A	Medications and/or medication routes not approved for administration by the program	
CBPC5-8B	Administration of first-dose requirements	
CBPC5-9A	Referrals made to a hospice to provide continuum of care	
CBPC5-9B	Provision of postmortem care	
CBPC6-1A	Quality Assessment Performance Improvement Plan	
CBPC6-4A	Process for identifying, reporting, monitoring, investigating, and documenting all adverse events, incidents, accidents, variances, or unusual occurrences that involve patient care/service	
CBPC7-1A	Infection control requirements	
CBPC7-2A	Safety education provided to personnel	
CBPC7-2B	Safety education and training provided to patients	
CBPC7-3A	Emergency Preparedness	
CBPC7-3D	Provision of backup equipment in the patient home	
CBPC7-5A	Office fire and safety management	
CBPC7-6A	Management of hazardous chemicals/materials	
CBPC7-6B	OSHA Hazard Communication requirements	
CBPC7-7A	Process for identifying, reporting, monitoring, investigating, and documenting all adverse events, incidents, accidents, variances, or unusual occurrences that involve personnel	
CBPC7-8A	Performing waived testing requirements	
CBPC7-9A	Use of equipment and supplies in the provision of patient care	
CBPC7-10A	Participation in clinical research/experimental therapies requirements	

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