HOPE HOSPICE & PALLIATIVE CARE, INC.

ASSESSMENT – COMPREHENSIVE ASSESSMENT OF THE PATIENT

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<th>Policy Number: PC.A80</th>
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<td>Regulatory Citation / Other: 42 CFR 418.54, DHS 131.20</td>
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**POLICY STATEMENT:** Hope Hospice and Palliative Care, Inc. (HHPC) Interdisciplinary Group (IDG) conducts and documents a patient-specific comprehensive assessment that identifies the patient’s need for hospice care, including medical, nursing, psychosocial, emotional and spiritual care. The assessment includes all areas of hospice care related to the palliation and management of the terminal illness and related conditions.

**DEFINITION/BACKGROUND:**

Federal Conditions of Participation:
“Comprehensive assessment” means a thorough evaluation of the patient’s physical, psychosocial, emotional and spiritual needs related to the terminal illness and related conditions. This includes a thorough evaluation of the caregiver’s, if any, and family’s willingness and capability to care for the patient.” (Cop 418.54) The comprehensive assessment is divided into five standards, and HHPC has a separate Policy/Procedure for each of the standards. The standards are:

1. Initial assessment;
2. Timeframe for the completion of the comprehensive assessment;
3. Content of the comprehensive assessment;
4. Update of the comprehensive assessment; and
5. Patient outcome measures.

State of Wisconsin Hospice Licensure:
“Initial assessment means inquiry and observation undertaken on admission which results in a description of the patient’s current physical status, including present pain status, physical condition, emotional status, and pertinent psychosocial or spiritual concerns and coping ability of the patient and family support system.” (DHS 131.13 (20))

**PROCEDURES:**

1. The HHPC Case Manager or designee assigns an HHPC RN who performs and documents an initial assessment of the patient/caregiver, if any, within no more than forty eight (48) hours after the patient elects hospice care in order to determine the patient’s immediate care and support needs. (See Assessment-Initial PC A90).
2. The RN Case Manager coordinates the comprehensive assessment process and ensures that the patient-specific physical, emotional, psychosocial, spiritual and bereavement needs are assessed in order to promote the patient’s well-being, comfort, and dignity throughout the dying process. (See Assessment-Content of Comprehensive Assessment PC A85).

3. The HHPC core IDG including the RN Case Manager, social worker, chaplain and physician employee are responsible for providing input into the comprehensive assessment within the scope of his/her practice. Other members of the IDG may also provide input into the comprehensive assessment within the scope of his/her practice as indicated for the specific patient focused comprehensive assessment and requested by the RN case manager.

4. The patient’s comprehensive assessment is updated at a minimum every 15 days and before the patient is recertified into a new benefit period (See Assessment-Updates to the Comprehensive Assessment PC A100).

5. The hospice’s assessment and reassessment tools contain data elements that allow for the measurement of patient outcomes (see Assessment-Patient Outcome Measures-PC A95).

6. The interdisciplinary group treats and prevents symptoms of the patient’s disease and/or co morbidity factors based on findings in the comprehensive assessment and reassessments.