## HOW DOES YOUR HOSPICE BEREAVEMENT PROGRAM MEASURE UP?

Hospice Bereavement Programs vary greatly. The program components listed below are based on NHPCO standards, which help prepare organizations for the standards or requirements of accrediting or regulatory bodies. Keep in mind that variables such as community composition, state regulations, and availability of resources play a significant role in agency and bereavement structure, staffing, and services.

Instructions: Rate your bereavement program against each of the components listed below:

(1 = Excellent; 2 = Good; 3 = Fair; 4 = Poor or NA = Not Applicable) Note methods of improving rating in each area

HOSPICE BEREAVEMENT PROGRAM COMPONENTS	RATING	SUGGESTIONS FOR PROGRAM IMPROVEMENT - what would you like to improve, add or change in your program?
Agency Related:		
Administration and key managers have a strong/positive commitment to the bereavement program.		
All hospice team members are knowledgeable about anticipatory grief and mourning concepts.		
Hospice team members identify, address and document the patients' and caregivers' needs and goals related to grief and loss issues from the time of admission and throughout the course of care. They identify and reevaluate survivor bereavement risk issues throughout the course of care.		
The IDT includes goals and outcomes related to bereavement care as part of the ongoing care planning process.		
The survivor risk issues identified throughout the course of care are referenced and reevaluated at the time death in the bereavement referral.  Grief and loss in-services are periodically		
provided to both staff and volunteers.		
Bereavement Program:		
We have policies and procedures for each bereavement service provided.		
Policies and procedures related to bereavement services and confidentiality are clear and easy to understand.		

HOSPICE BEREAVEMENT PROGRAM COMPONENTS	RATING	SUGGESTIONS FOR PROGRAM IMPROVEMENT - what would you like to improve, add or change in your program?
Bereavement staff are familiar with and follow these policies and procedures.		
Our Risk Assessment and Plan of Care is individualized.		
We have an effective mechanism to assure "at risk" family members know where to receive the intervention they need, either from us or from community resources.		
Each assessment and reassessment includes a documented evaluation of bereavement needs, issues and level of risk.		
We evaluate all program components routinely.		
We identify trends and implement changes accordingly.		
We identify specific outcomes for our hospice bereavement program and use them to measure our effectiveness.  Our program is recognized in our community		
as a resource for bereavement support.		
Quality improvement is an integral and ongoing part of our bereavement programming.		
<b>Bereavement Staffing:</b>		
Our staffing is adequate to meet the needs of the bereaved.		
Our bereavement program meets the expectations outlined in the Medicare CoP's and NHPCO Standards.		
Our bereavement staff are well qualified for their roles.		
Our bereavement staff meet licensing requirements (if this is required by your state or organization).		
Bereavement Services:		
Our program offers a variety of support options that address the needs of individuals, families, adults, children and teens.		
Bereavement counseling extends to residents of a SNF/NF or ICF/MR when appropriate and is identified in the bereavement plan of care.		

HOSPICE BEREAVEMENT PROGRAM COMPONENTS	RATING	SUGGESTIONS FOR PROGRAM IMPROVEMENT - what would you like to improve, add or change in your program?
Services are available to non-hospice		
members of our community who have been impacted by loss.		
We provide targeted bereavement education		
to the community.		
Our resources and/or mailings are available in		
languages that reflect the diversity in our community.		
Our services are available to people who		
speak languages other than English and/or are		
hard of hearing.		
We have a strong and effective bereavement		
program.		

Partially adapted from the NHPCO Standards of Practice for Hospice Programs (2010) and the Medicare Conditions of Participation (2008).

For additional information about components of bereavement programs, see the NHPCO Guidelines for Bereavement Care in Hospice (2008).