

# ESMO DESIGNATED CENTRES

of integrated oncology and palliative care services

## Accreditation as a Designated Centre of Integrated Oncology and Palliative Care Application

### Applicant details

Please type or print in capital letters

Date:

Centre name

Mailing address

Department head

Mailing address

Tel.

Fax

E-mail

Hospital / institute head

Mailing address

Tel.

Fax

E-mail

Corresponding physician

Name

Title

Mailing address

Tel.

Fax

E-mail

### Send to

ESMO Head Office  
Scientific Affairs  
Via Ginevra 4  
6900 Lugano  
Switzerland

### Send via e-mail to

T +41 (0)91 973 19 33  
designatedcentres@esmo.org

# ESMO DESIGNATED CENTRES

of integrated oncology and palliative care services

## Accreditation as a Designated Centre of Integrated Oncology and Palliative Care Application

### Section 1: Eligibility Criteria Checklist

Please indicate compliance with each of the 13 items

	YES	NO
1. The centre is a cancer center or oncology department which provides closely integrated oncology and palliative care clinical services.	<input type="checkbox"/>	<input type="checkbox"/>
2. The centre is committed to a philosophy of continuity of care and non-abandonment.	<input type="checkbox"/>	<input type="checkbox"/>
3. The centre incorporates expert medical and nursing care in the evaluation and relief of pain and other physical symptoms.	<input type="checkbox"/>	<input type="checkbox"/>
4. The centre incorporates expert care in the evaluation and relief of psychological and existential distress.	<input type="checkbox"/>	<input type="checkbox"/>
5. The centre provides routine patient assessment of physical and psychological symptoms and social support and has an infrastructure that responds with appropriate interventions in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>
6. The centre provides emergency care of inadequately relieved physical and psychological symptoms.	<input type="checkbox"/>	<input type="checkbox"/>
7. The centre provides facilities and expert care for in patient symptom stabilization.	<input type="checkbox"/>	<input type="checkbox"/>
8. The centre incorporates programmatic support of family members.	<input type="checkbox"/>	<input type="checkbox"/>
9. The centre provides high level home care with expert back-up and coordination of home care with primary cancer clinicians.	<input type="checkbox"/>	<input type="checkbox"/>
10. The centre provides respite care for ambulatory patients for patients unable to cope at home or in cases of family fatigue.	<input type="checkbox"/>	<input type="checkbox"/>
11. The centre provides facilities and expert care for inpatient end of life care and is committed to providing adequate relief of suffering for dying patients.	<input type="checkbox"/>	<input type="checkbox"/>
12. The centre participates in basic or clinical research related to palliative care and the quality of life of cancer patients and their families.	<input type="checkbox"/>	<input type="checkbox"/>
13. The centre is involved in clinician education to improve the integration of oncology and palliative care.	<input type="checkbox"/>	<input type="checkbox"/>

If you have indicated YES to ALL items, then proceed to section 2

### Section 2: Narrative descriptions for accreditation criteria

1. Please submit a typewritten description (clearly addressing each of the sub points listed) of the manner in which each of the 13 criteria is met within your center.
2. Each of the 13 criteria should be addressed on a separate page.
3. Please do not add your own numbered subsections to your application, kindly adhere to the numbered criteria structure, as seen below.
4. For each of the criteria, limit your description to no more than 300 words.
5. Each page must be signed by the Director of the Oncology Service and Hospital/Institute Director.
6. Please e-mail your application as a **Word** document and your signed version as a **PDF** with the updated information clearly highlighted.
7. We ask that you do not use Track Changes to add information to your application, kindly highlight newly added information using the **yellow** highlight text function.

## Accreditation as a Designated Centre of Integrated Oncology and Palliative Care Application

### Criteria for designated center accreditation with structured guidelines for submission

- 
- 1. The center is a cancer center which provides closely integrated oncology and palliative care clinical services**
    - 1.1. Please describe the oncology department or cancer center.
    - 1.2. Describe how oncologists and palliative medicine services interact.
    - 1.3. When complex needs are identified, describe how the oncologists and palliative medicine services share responsibilities for patient care.
    - 1.4. Describe the availability of oncology care and evaluation for palliative care patients.
- 
- 2. The center is committed to a philosophy of continuity of care and non-abandonment**
    - 2.1. Please present an overview describing how the center provides continuity of care including, but not limited to, patients who are no longer benefiting from anti-tumor interventions.
- 
- 3. The center incorporates expert medical and nursing care in the evaluation and relief of pain and other physical symptoms**
    - 3.1. Please provide details about the palliative care clinicians involved in the program including their professional training and credentials in palliative care.
- 
- 4. The center incorporates expert care in the evaluation and relief of psychological and existential distress**
    - 4.1. Please provide details about the clinicians involved in psychoncologic care including their professional training and credentials in palliative care.
    - 4.2. Please provide details about the staff involved in chaplaincy, pastoral care or spiritual care including their professional training and credentials in palliative care.
- 
- 5. The center provides routine patient assessment of physical and psychological symptoms and social support and has an infrastructure that responds with appropriate interventions in a timely manner**
    - 5.1. Describe how physical and psychological symptoms of patients with advanced cancer are evaluated in outpatient and inpatient settings.
      - 5.1.1. Describe how severity of symptoms is recorded.
      - 5.1.2. When inadequately controlled symptoms are identified, describe the approach to evaluation and treatment.
    - 5.2. Describe how psychosocial problems or inadequate support of patients with advanced cancer are evaluated in outpatient and inpatient settings.
      - 5.2.1. Describe how these problems are recorded.
      - 5.2.2. When inadequately controlled psychosocial problems are identified, describe the approach to evaluation and treatment.
- 
- 6. The center provides emergency care of inadequately relieved physical and psychological symptoms**
    - 6.1. Describe the availability and type of urgent care for inadequately controlled severe symptoms or psychosocial problems during office hours.
    - 6.2. Describe the availability and type of urgent care for inadequately controlled severe symptoms or psychosocial problems outside of office hours.
- 
- 7. The center provides facilities and expert care for inpatient symptom stabilization**
    - 7.1. Describe the criteria for admission for inpatient care of patients with poorly controlled symptoms in need of symptom stabilization.
    - 7.2. Describe where they are physically cared for (oncology ward, medical ward, palliative care ward).
    - 7.3. Describe who manages the care of patients needing symptom stabilization.
    - 7.4. Describe how these aspects of care are monitored with ward rounds, case conferences etc.
- 
- 8. The center incorporates programmatic support of family members**
    - 8.1. Describe how the needs of the family members of patients with advanced cancer are routinely evaluated and managed.
    - 8.2. Describe the psychological and social support to available to family members.
- 
- 9. The center provides high level home care with expert back-up and coordination of home care with primary cancer clinicians**
    - 9.1. Describe the availability of home care services and the expertise of the care providers.
    - 9.2. In the case that care is delivered by other community services.
      - 9.2.1. Describe the services and their credentials.
      - 9.2.2. Describe the ongoing relationship to those services in the care of your patients.
- 
- 10. The center provides respite care for ambulatory patients for patients unable to cope at home or in cases of family fatigue**
    - 10.1. Please describe the centres approach to situations where the patient, and or family, request admission because either the patient is unable to cope at home or in situations of severe family fatigue.
- 
- 11. The center provides facilities and expert care for inpatient end of life (terminal) care and is committed to providing adequate relief of suffering for dying patients**
    - 11.1. Describe the management approach to dying patients who are unable to manage at home.
    - 11.2. When inpatients are dying, describe how adequacy of comfort is monitored and documented.
    - 11.3. Describe the management approach to refractory symptoms at the end of life.
    - 11.4. Describe the supports offered to comfort the patient and family.
- 
- 12. The center participates in basic or clinical research related to palliative care and the quality of life of cancer patients and their families**
    - 12.1. Please describe, open studies, completed studies and list all publications and presentations.
      - 12.1.1. Research may be related to physical, psychological, or social aspects of patient care.
      - 12.1.2. Research may be related to quality assurance or improvement including models of care delivery.
    - 12.2. Please note that quality of life evaluation as part of routine oncologic studies **does not** constitute palliative care research for purposes of recognition.
- 
- 13. The center is involved in clinician education to improve the integration of oncology and palliative care**
    - 13.1. Please describe palliative cancer care teaching activities to:
      - 13.1.1. Medical and nursing students
      - 13.1.2. House staff
      - 13.1.3. Oncology trainees
      - 13.1.4. Others
    - 13.2. Please describe any teaching publications.
    - 13.3. Please describe any conferences or symposia (post and planned).
    - 13.4. Please describe any other teaching activities.
-