

# IV. The Model to Guide Organization Development and Function

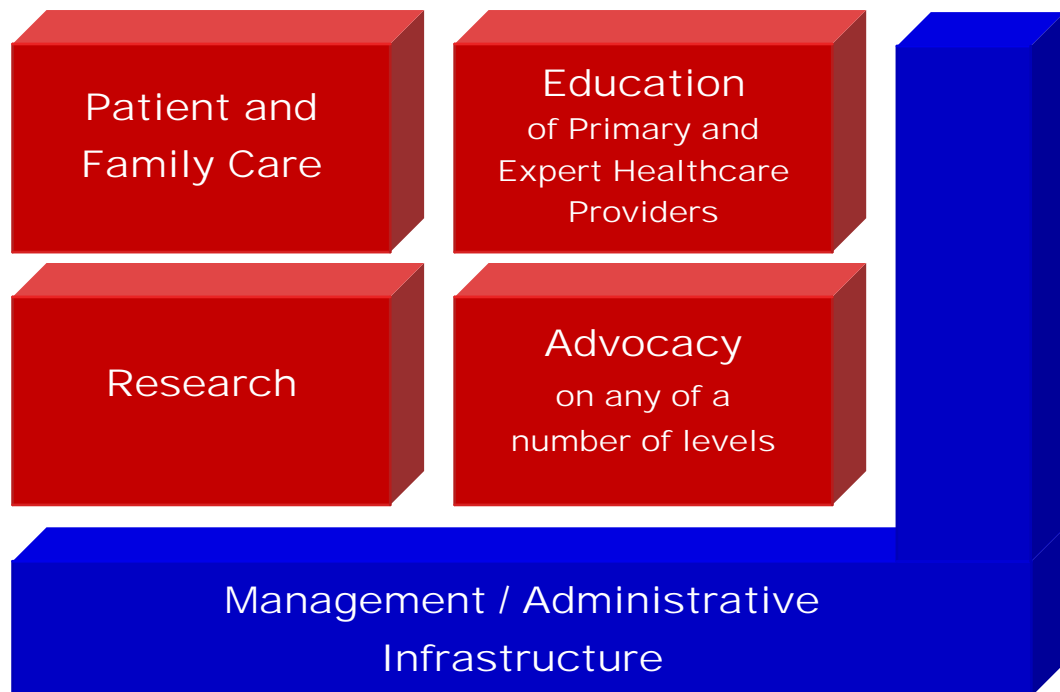
While the model presented in this section will focus on the development and function of a hospice palliative care organization, the concepts are applicable to any group with a task (e.g., a careteam, a regional interdisciplinary team, a committee or workgroup, and families).

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## The Nature of Hospice Palliative Care Organizations

Hospice palliative care organizations are typically in the 'business' of one or more principal activities or 'product lines.' To support these principal activities, each organization must have a management and administrative infrastructure to develop and maintain the resources needed to operate principal activities, and oversee the program's principal functions.

**Figure #12: The Principal Activities of Hospice Palliative Care**



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## **Mission and Vision Statements**

To help identify/define their activities and functions, organizations usually begin by developing a mission and a vision statement. The CHPCA consensus-building process has developed sample mission and vision statements for a hospice palliative care organization.

### **Sample Mission Statement**

A mission statement is a short statement of an organization's purpose (i.e., what it is and what it does). Each organization will create a very personalized mission statement during its strategic planning process. A mission statement might look like:

“The (named) program provides hospice palliative care services and education to all patients and families within (named geographic region or health care district).”

### **Sample Vision Statement**

A vision statement is a short statement of an organization's aspirations (i.e., what it hopes to become and achieve in the future). Each organization will create a very personalized vision statement during its strategic planning process. A vision statement might look like:

“The (named) program will be the leading hospice palliative care program providing clinical services to all patients and families within (named geographic region or health care district) consistent with the Canadian Hospice Palliative Care Association's National Norms of Practice. The (named) program will be a leader in hospice palliative care education and research.”

## Resources

To achieve its mission and vision, deliver its principal activities and maintain its infrastructure, a hospice palliative care organization must develop and maintain a number of key resources.

**Figure #13: Resources to Support Hospice Palliative Care**

Financial Resources	Human Resources	Information Resources	Physical Resources	Community Resources
Assets <ul style="list-style-type: none"> <li>• Cash</li> <li>• Capital</li> <li>• Investments</li> <li>• Receivables</li> </ul> Liabilities <ul style="list-style-type: none"> <li>• Payables</li> <li>• Depreciation</li> <li>• Taxes</li> </ul> Insurance	Formal caregivers <ul style="list-style-type: none"> <li>• Bereavement counselors</li> <li>• Chaplains</li> <li>• Dietitians</li> <li>• Integrative therapists</li> <li>• Nurses</li> <li>• Occupational therapists</li> <li>• Pharmacists</li> <li>• Physicians</li> <li>• Physiotherapists</li> <li>• Psychologists</li> <li>• Social workers</li> <li>• Speech pathologists</li> <li>• Support workers</li> <li>• Volunteers (caregivers)</li> <li>• Consultants (e.g., ethics, clinical, legal, administrative)</li> </ul> Staff <ul style="list-style-type: none"> <li>• Administration</li> <li>• Support</li> </ul> Volunteers (non-caregivers)	Records <ul style="list-style-type: none"> <li>• Health</li> <li>• Financial</li> <li>• Human resource</li> <li>• Assets</li> </ul> Resources <ul style="list-style-type: none"> <li>• Resource, reference materials, (e.g., books, journals)</li> <li>• Internet, Intranet</li> </ul> Resource directory	Environment <ul style="list-style-type: none"> <li>• Space</li> <li>• Lighting</li> <li>• Heating, cooling</li> <li>• Utilities</li> <li>• Parking</li> </ul> Equipment <ul style="list-style-type: none"> <li>• Medical</li> <li>• Diagnostic and investigative</li> <li>• Office</li> <li>• Communication systems, (e.g., telephones, pagers, e-mail)</li> <li>• Information technology systems, (e.g., computers, printers, networks, internet access)</li> <li>• Security systems</li> </ul> Materials, Supplies <ul style="list-style-type: none"> <li>• Medical</li> <li>• Office</li> <li>• Other</li> </ul>	Host organization Healthcare system Partner healthcare providers Community organizations Faith/religious communities Stakeholders Public

## Principal and Basic Functions

To develop its resources and provide its principal activities, a hospice palliative care organization must implement five principal and a number of basic functions.

**Figure #14: Hospice Palliative Care Principal and Basic Functions**

Governance and Administration	Planning	Operations	Quality Management (Evaluation)	Communications/ Marketing
<p>Leadership</p> <ul style="list-style-type: none"> <li>• Board</li> <li>• Management</li> </ul> <p>Organizational structure/ accountability</p>	<p>Strategic plan</p> <ul style="list-style-type: none"> <li>• Needs assessment</li> <li>• Mission, vision</li> <li>• Values, purpose, principal activities</li> <li>• Goals, objectives, strategies, tactics</li> <li>• Timelines, strategic decision points</li> </ul> <p>Business plan</p> <ul style="list-style-type: none"> <li>• Organizational/ accountability structure</li> <li>• Resource acquisition and management</li> <li>• Implementation</li> <li>• Quality management</li> <li>• Communications, marketing</li> </ul> <p>Business development</p>	<p>Standards of practice, policies and procedures, standards for data collection/documentation</p> <p>Resource acquisition and management:</p> <ul style="list-style-type: none"> <li>• Fund development – stewardship, annual program, foundation and research grants, planned giving</li> <li>• Financial resources - billing, accounting, banking, disbursement</li> <li>• Human resources - recruitment/retention, credentialing, orientation, education, evaluation, staffing, support, recognition, incentives, occupational risk/stress, critical incident debriefing and support, self-actualization and spiritual growth, termination, outplacement</li> <li>• Informational resources - data collection, purchasing, storage, maintenance, reporting, destruction</li> <li>• Physical resources - purchasing, stock control, maintenance, disposal</li> <li>• Community resources - relationship building, contracting, relationship management, contract/ relationship termination</li> </ul> <p>Safety, security, emergency systems</p>	<p>Performance improvement</p> <ul style="list-style-type: none"> <li>• Outcomes</li> <li>• Resource utilization</li> <li>• Adverse events, including errors, complaints</li> <li>• Satisfaction</li> </ul> <p>Routine review</p> <ul style="list-style-type: none"> <li>• Utilization review, clinical outcomes and resource utilization</li> <li>• Risk management</li> <li>• Compliance</li> <li>• Caregiver and employee satisfaction</li> <li>• Community needs</li> <li>• Financial audit</li> <li>• External accreditation</li> <li>• Strategic and business plans</li> <li>• Standards of practice, policies and procedures, standards for data collection/documentation</li> </ul>	<p>Communication and marketing strategies</p> <p>Materials</p> <p>Support for fundraising</p> <p>Media liaison</p> <p>Adverse situations</p>

## Square of Organization: A Conceptual Framework

The application of an organization’s principal functions to the management of its resources can be illustrated by the conceptual framework: the “**Square of Organization.**” Like the “Square of Care,” this framework can be used as a tool to guide the development, function and review of the organization’s infrastructure, and each of its principal activities.

The “Square of Organization” can also be used to guide the development, function and review of any group with a task (e.g., careteams, regional teams, committees, workgroups).

**Figure #15: The Square of Organization**

<b>Principal Activities</b>					<b>Governance &amp; Administration</b>	<b>Principal Functions</b>
					<b>Planning</b>	
					<b>Operations</b>	
					<b>Quality Management</b>	
					<b>Communications, Marketing</b>	
<b>Financial</b>	<b>Human</b>	<b>Informational</b>	<b>Physical</b>	<b>Community</b>	<b>Resources</b>	

See figure #39 on page C3 at the center of this guide for the detailed “Square of Organization.”

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## Principles and Norms of Practice

For each of the principal and basic functions of an organization, the CHPCA has developed principles and norms of practice. (The numbering continues from the principles and norms of practice in the previous section.)

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## 7. Governance and Administration

### Principles

- P7.1 Governance and administration are essential to the development, implementation, operations and accountability of hospice palliative care organizations.
- P7.2 Governance includes senior leadership and representatives of the host organization(s), community, formal and informal caregivers, patients and families.

### Norms

- N7.1 The board and senior management guide the organization's development and function.
- N7.2 The organizational structure supports all of the organization's activities and defines internal accountability.

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## 8. Planning

### Principles

- P8.1 The strategic planning process defines the organization's mission, vision, values, purpose/activities and developmental directions.
- P8.2 The business planning process defines the resources and functions that will be needed to implement the strategic plan.

### Norms

- N8.1 The organization has a strategic plan to guide the development of the organization's infrastructure and principal activities. The strategic plan includes:
- a needs assessment
  - mission and vision statements
  - the values, principles, principal activities and service delivery models of the organization
  - the developmental goals, objectives, strategies and tactics for developing the organization
  - the timelines and strategic decision-points during development.
- N8.2 The organization has a business plan to guide the development of the resources and functions it will need to support its infrastructure and principal activities. The business plan includes:
- the governance and administrative structure
  - the plan(s) to acquire/manage each of the needed resources
  - a plan to implement each of the principal activities and the infrastructure
  - a quality management plan
  - a communications/marketing plan.
- N8.3 The business development plan is congruent with the overall strategic plan for the organization.

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## 9. Operations

### Principles

- P9.1 Standards of practice, policies and procedures, and data collection/documentation guidelines guide all of the organization's activities.
- P9.2 Individuals within the organization are also guided by the standards of professional conduct for their discipline.
- P9.3 Data and documentation record all of the activities of the organization.
- P9.4 Adequate financial resources are essential to support the organization's activities and ensure its long-term viability.
- P9.5 Adequate staff, who are appropriately trained and receive continuing hospice palliative care education and evaluation are essential for the organization to develop its infrastructure and principal activities.
- P9.6 Ongoing support to ensure the staff's physical, psychological and spiritual well-being is integral to the provision of hospice palliative care.
- P9.7 Readily accessible records and information resources are integral to the provision of hospice palliative care.
- P9.8 Adequate physical resources are integral to the provision of hospice palliative care.
- P9.9 Safety, security and emergency systems are essential to ensure the integrity of the organization.

### Norms of Practice

- N9.1 The organization uses the CHPCA norms of practice to guide the development of its standards of practice.
- N9.2 The organization uses the best available preferred practice guidelines, which are ideally based on evidence or expert opinion, to guide the development of its policies and procedures.
- N9.3 The organization uses validated or the best available measurement tools to guide the development of its data collection/documentation guidelines.
- N9.4 The organization has sufficient financial resources to support its activities and meet its strategic and business goals.



- N9.5 Fundraising activities and stewardship are consistent with the mission, vision and values of the organization.
- N9.6 The organization has policies and procedures to guide fundraising, stewardship, budgeting, billing, accounting, banking, and disbursement of funds (including expenses, salaries/benefits, and taxes).
- N9.7 The organization has sufficient human resources <sup>i</sup> to support its activities.
- N9.8 The organization has policies and procedures to guide staff recruitment and retention, credentialing, orientation and education, staff support, staffing, incentive/recognition programs, and employment termination/outplacement.
- N9.9 The organization's staff and volunteers reflect the cultural diversity of the community it serves.
- N9.10 There are ongoing programs to orient, train, support and ensure the competency of the formal caregivers, including volunteers, and other employees.
- N9.11 Formal caregivers' understanding of the appropriate use of medications, therapies, equipment and supplies is checked and reinforced regularly.
- N9.12 Formal caregivers have the knowledge and support they need to be able to respect the personal boundaries that are an integral part of effective therapeutic relationships.
- N9.13 The employees and volunteers are satisfied with the support they receive from the program.
- N9.14 There are ongoing programs to address employee issues and improve satisfaction with their work lives.
- N9.15 There are incentive/recognition programs in place that support the activities of the program and reward exceptional service.
- N9.16 There are continuous efforts to identify and minimize occupational risks and stresses.
- N9.17 The organization has sufficient information resources to support its activities.
- N9.18 The organization has policies and procedures to guide purchasing, storage, maintenance and disposal of information resources and resource directories.
- N9.19 The organization has policies and procedures to guide the collection, storage, reporting and destruction of its health, financial, human resource and asset records.

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<sup>i</sup> Human resources include formal caregivers (including caregiving volunteers), consultants, management and support staff, and non-caregiving volunteers

- N9.20 The health records needed to support care delivery and quality management are readily accessible.
- N9.21 The library and other information resources needed to support orientation, education, training and other activities are readily accessible.
- N9.22 New knowledge is disseminated in a timely manner to the appropriate individuals within the organization, and where appropriate, it is integrated into day-to-day activities.
- N9.23 The organization has sufficient physical resources to support its activities.
- N9.24 The organization has policies and procedures to guide purchasing, stock control, maintenance and disposal of its physical resources.
- N9.25 The organization has sufficient community resources to support its activities.
- N9.26 The organization has policies and procedures to guide the development and maintenance of its formal relationship with community resources.
- N9.27 The safety, security and emergency systems support all aspects of the organization's activities.

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## 10. Quality Management (Evaluation)

### Principles

- P10.1 Ongoing evaluation improves the quality of the organization's activities.
- P10.2 The quality management process regularly reviews all aspects of the organization's activities, resources and functions to assess their effectiveness, and revise them.
- P10.3 Compliance with all legislation, regulations and policies governing hospice palliative care is essential.

### Norms of Practice

- N10.1 The organization has an ongoing program to improve its performance using routine measures of outcomes, resource utilization, adverse events (e.g., medication and other therapeutic errors, complaints), and stakeholder satisfaction.
- N10.2 The organization:
- regularly reviews the outcome and resource utilization data for its patients and families, its careteams, its regional teams, the organization, and the population it serves
  - has a risk management program, and a process to review and respond to complaints
  - has a compliance review program to ensure that it is in compliance with legislative and regulatory mandates
  - has an ongoing program to evaluate and improve caregiver and employee satisfaction with their work lives
  - regularly assesses its customers and community to see if their expectations and needs for hospice palliative care are being met, and whether they are satisfied
  - audits its financial records annually
  - participates in intermittent accreditation reviews to assess its effectiveness compared to other similar organizations, and the CHPCA norms of practice.
- N10.3 The organization has a process to regularly review and update its strategic and business plans.
- N10.4 The organization has a process to regularly review and update its standards of practice, policies and procedures, and data/documentation guidelines.

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## 11. Communications/Marketing

### Principles

- P11.1 Communications and marketing increases awareness of the organization, and facilitates access to its activities.

### Norms

- N11.1 The organization has both internal and external communication and marketing initiatives to disseminate information about its clinical services and other activities, raise awareness of them, and increase use of its services.
- N11.2 Materials are written and presented in a manner appropriate to their intended audiences.
- N11.3 Information about the organization, its activities, and how to access its services is readily available to patients, families, caregivers, and the public.
- N11.4 The organization has a communication strategy to support its fundraising.
- N11.5 The organization has a plan for media liaison.
- N11.6 The organization has a plan for communication in the event of an adverse situation.