**Section 280.2000 Hospice Service Plan**

a) Each hospice program shall develop an annual hospice service plan detailing the specific hospice services offered, and the administrative and direct care personnel responsible for those services. The hospice service plan shall include, but not be limited to:

1) *Identification of the person or persons administratively responsible for the program*.

2) *The estimated average monthly patient census*.

3) *The proposed geographic area the hospice will serve*.

4) *A listing of those hospice services provided directly by the hospice, and those hospice services provided indirectly through a contractual agreement*.

5) *The names and qualifications of those persons or entities under contract to provide indirect hospice services*.

6) *The name and qualifications of those persons providing direct hospice services, with the exception of volunteers*.

7) *A description of how the hospice plans to utilize volunteers in the provision of hospice services*.

8) *A description of the program's* clinical *record-keeping system* for the licensed hospice program location and any multiple hospice locations. (Section 3(j) of the Act)

b) Comprehensive hospices that operate from multiple hospice locations shall comply with the following:

1) The hospice must be able to exert the supervision and control necessary at each location to assure that all hospice care and services continue to be responsive to the needs of the patient/family at all times and in all settings;

2) Each location must provide the same full range of services that is required of the hospice to which the license was issued;

3) Each patient must be assigned to a specific hospice care team responsible for ongoing assessment, planning, monitoring, coordination and provision of care;

4) The hospice medical director must assume overall responsibility for the medical component of the hospice's patient care program at all locations;

5) Each location must be responsible to the same governing body and central administration that governs the hospice to which the license was issued, and the governing body and central administration must be able to manage the location adequately and to assure quality of care at the location; and

6) All hospice patients' clinical records requested by the surveyor must be available at the hospice site to which the license was issued.

(Source: Amended at 32 Ill. Reg. 2330, effective January 23, 2008)