COMMUNITY-BASED HOSPICE & PALLIATIVE MEDICINE FELLOWSHIP (CERTIFICATE)

Overview
The Fellowship in Community Hospice and Palliative Care Certificate is for physicians who have completed at least the first year of the Master of Science Degree in Palliative Care and are on schedule to complete their degree. Physicians that successful complete the MSPC and the Community Hospice and Palliative Medicine Fellowship Certificate will be Board Eligible to take the HPM Certification Exam and become Board Certified in HPM. The aim of the MSPC and the certificate is to ease suffering worldwide through exemplary palliative care education.

This program's purpose is to develop Board Certified Hospice and Palliative Care physician specialists through innovative educational pedagogies designed to facilitate learning for physicians in up-to-date, evidence-based, interdisciplinary palliative care concepts using a hybrid learning environment that offers flexible online and live application-based approaches. The participants will receive educational support through the University of Colorado faculty and do their clinical work at their unique participating sites.

Program courses are delivered in a virtual and live learning environment that enriches and informs the fellows' palliative clinical work. The program focuses on advancing clinical knowledge; developing clinical wisdom; building an evidence-based palliative care practice; enhancing communication skills; and addressing physical, psychological, social, and spiritual suffering.

Admissions Requirements

DOMESTIC APPLICATION DEADLINE: June 15

To apply for admission applicants must submit the following:

- Online Graduate School application
- Personal Statement: A one-page personal statement describing the applicant's career goals and purpose for studying palliative care.
- Resume: The applicant's current resume or curriculum vitae, including professional work/practice since graduating with a bachelor's degree (or equivalent).
- Educational Goals statement.
- Two recommendations: to be completed by people who know your professional, academic and/or personal achievements or qualities well. As such, references must be from professional contacts, such as employers, supervisors, former faculty, preceptors, or professional colleagues. References from clergy, family members, friends or politicians will not be accepted.
- Licenses and Certificates: A notarized copy of the applicant's current professional license and a copy of the photo identification used in the license notary process or online verification of the applicant's current professional license. (Biomedical Track only)
- Driver's License: A copy of the applicant's driver's license or state-issued ID.

- Application Fee: A nonrefundable application fee of $50.00 (U.S. dollars). Checks or money orders should be made out to the University of Colorado.
- Interview: After the application is complete a telephone or video interview will be arranged with the applicant and two faculty members. This interview will afford the program the opportunity to understand the needs of the applicant and for the candidate to ask questions. The interview process is designed to assess the applicant's knowledge of the profession, communication, and ability to perform in a positive, professional manner when working with others. To be considered for admission, applicants must participate in the interview process.
- Transcripts: Unofficial copies of all degree-bearing transcripts from post-secondary colleges and/or universities.

International students are not eligible for this certificate program.

Certificate Requirements

MD or DO degree is required, and at least 5 years of clinical experience preferred.

Fellows in the MSPC/HPM track will spend 30-50% of their time over a minimum of 2 years engaged in the MSPC and meeting the requirements for their clinical practice portfolio. Fellowship rotations will occur on an interrupted and part-time schedule in order to accommodate other professional, academic and personal responsibilities. A part-time schedule will include interrupted weeks, or parts of weeks, of clinical rotations. In accordance with ACGME program requirements, Fellows will complete the equivalent of at least 12 months of training in the subspecialty of HPM.

Required Coursework

**First Year**

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<th>Term</th>
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<th>Course Title</th>
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<td>Fall</td>
<td>CHPM 7001</td>
<td>Comm-Based Hospice and Pall Med Fellowship - A</td>
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<td>Spring</td>
<td>CHPM 7002</td>
<td>Comm-Based Hospice and Pall Med Fellowship - B</td>
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<td>Summer</td>
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**Second Year**

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<td>Fall</td>
<td>CHPM 7004</td>
<td>Comm-Based Hospice and Pall Med Fellowship - D</td>
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Clinical Requirements for Graduation

- Palliative Medicine New Patient Consultations: a minimum of at least 100 initial consultations which are submitted and reviewed by faculty.
- Continuity of Care patient: see 60 patients across a variety of settings including LTC, ICU, Acute Care, Outpatient, Home Hospice, telehealth visits.
- Hospice Care: This requirement includes Home Hospice visits, Inpatient Hospice Experience and Long-term Care.
  - Inpatient Hospice/Palliative Care Unit 80 hours (Hours to be tracked in your log)
  - 25 Home Hospice Visits (Medicare Certified Hospice Program)
  - 50 IDT meetings (meetings with people from other disciplines about your patients, one-on-one count, could be IDT in the hospital, LTC or home hospice or you can start your own, these can also be duplicated from new inpatient or continuity if other disciplines present)
- Pediatric Palliative Care (See Pediatric Palliative Care Tab in Patient Log)
  - 5 Pediatric cases
  - Observation of a Pediatric Palliative Care program for 1 week
- During the course, you will participate in every other week 2-hour nightly seminar with oral presentation of cases in at least ½ of these sessions. Attendance in 90% of seminars is mandatory.
- Other scholarly course work including a mixture of reading, asynchronous video role plays, journal clubs and professional development reflections due every other week.
- 2 360 Evaluations from both Colleagues per course (12 total over 2 years).
- 2 Patient/Family satisfaction surveys from patients (12 total over 2 years).
- At least 1 elective is strongly encouraged. This includes observation of and reflection on at least one experience that adds to fellow’s portfolio and supports palliative care practice.

Learning Objectives

Communication Skills
The PC CHPM physician demonstrates expertise in relationship centered communication theory and skills to gather and share information, negotiate shared decision making and plans of care, and sustain relationships with palliative care patients/families and healthcare providers.

Expert Symptom Management Skills (Pain and Non-pain)
The PC CHPM physician demonstrates expert clinical judgment in performing a comprehensive patient assessment, leading to diagnosis development, implementation, and ongoing reassessment with modification of effective, evidence-based care plans utilizing the skills and expertise of the interdisciplinary team (IDT), for all distressing pain and non-pain symptoms experienced by patients with any serious illness.

Ethics, Advocacy, and Legal Aspects of Care
The PC CHPM physician incorporates knowledge of ethical and legal aspects of palliative care into practice by exhibiting the highest professional standards and by advocating for the rights of patients/families to access optimal palliative care.

Spiritual, Religious and Existential Aspects of Care
As part of the IDT, the PC CHPM physician Specialist demonstrates and promotes spiritually sensitive care, respecting diversity in all forms, for patients/families and other health care professionals.

Social and Cultural Aspects of Care
As part of the IDT, the PC CHPM physician demonstrates respect for diverse communities through culturally sensitive skills, recognizing how social and economic barriers and challenges impact the delivery of health care services.

Psychological Aspects of Care
As part of the IDT, the PC CHPM physician effectively addresses psychological concerns, and promotes access to expanded resources for all patients/families living with any serious illness.

Integration of Palliative Care for patients throughout the course of any serious illness in all venues
The PC CHPM physician effectively advocates to provide evidence-based palliative care for patients/families and supports and develops expanded resources for all patients/families living with any serious illness.

Effective Palliative Care Educator
The PC CHPM physician demonstrates knowledge, skills, and applies adult learning principles when providing palliative care education to patients, families, healthcare professionals, and the community.

Systems Thinking
The PC CHPM physician Specialist demonstrates understanding of the healthcare system to effectively manage and utilize resources to support patients/families living with any serious illness and advocates for the reform of healthcare systems to provide optimal palliative care.

Courses

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Policies
Please refer to the Graduate School Policies page (http://catalog.ucdenver.edu/cu-anschutz/schools-colleges-programs/graduate-school/#policiestext).

Contact Us
Katherine Morrison, MD, FAAHPM
Associate Program Director
Katherine.2.morrison@cuanschutz.edu
303 594-5932

Maurice Scott, MD
Associate Program Director
Maurice.scott@cuanschutz.edu (Maurice.Scott@cuanschutz.edu)
720 318-6123
Krystle Wetherbee
Program Administrator
Krystle.wetherbee@cuanschutz.edu
303-724-9593

Ashley Ertmer
MSPC Manager
Ashley.ertmer@cuanschutz.edu (Krystle.wetherbee@cuanschutz.edu)
303-724-5394