



## Philippine Board of Pain Medicine PAIN MANAGEMENT UNIT EVALUATION SHEET

Name of PMU \_\_\_\_\_

Date of PBPM Accreditation Team Visit \_\_\_\_\_ Time started: \_\_\_\_\_ Time ended: \_\_\_\_\_

Mode of accreditation visit: \_\_\_\_\_ Physical \_\_\_\_\_ Virtual

Members of PBPM Accreditation team:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Rate the PMU according to:**

**Met** = 90 to 100% fully met compliance

**Partially Met** = 50 to 89% partial compliance

**Unmet** = No measurable element seen or < 49% compliance

Accreditation Criteria	Mode of Assessment	Met	Partially Met	Unmet
<b>I. Human Resources</b>				
a) Must have at least the following certified specialists:				
1) Head / Chair / Director of Pain unit must be a: - Diplomate of PBPM - board certified in primary specialty - current member of PSP and IASP - updated certification in GCP	Datasheet w/ supporting documents			
2) Certified Physiatrist				
3) Certified Psychiatrist or Clin Psychologist (MS/PhD)				
4) Other Certified Specialist/s, specify: _____				
5) Dedicated Pain Nurse				
6) Hospital Pharmacist with S3 license				
7) Office Secretary				
b) Medical staff are members of the PSP and IASP				
c) Medical staff are Diplomates of PBPM				
d) Medical staff have updated GCP certification (required for classification as pain management center)				
e) Medical staff must have attended at least 3 of any of the following in the past 3 years: PSP conventions, IASP Congresses, any local/ national/ international pain-related CME activities	Supporting documents			
f) Daily scheduled clinical medical specialist sessions are provided in the Unit each week, and must be conducted by a Diplomate of the PBPM.	Supporting document – Staff roster of schedule/ duties			

II. Facilities and Clinical Services	Mode of Assessment	Met	Partially Met	Unmet
<b>a) Dedicated space for the multidisciplinary pain center consisting of:</b>	Accreditation Review/ Visit			
1) At least 2 Consultation rooms				
2) Examination room				
3) Reception/ Waiting area				
4) Staff meeting room/ Family Conference room				
5) Restrooms				
6) Staff pantry				
7) Storage room				
8) Medical records/file room				
9) Minor procedure room (optional)				
<b>b) Utilities:</b>	Accreditation Review			
1) Telephone				
2) Internet access with technological capabilities				
3) Office supplies, including printer and copier				
<b>c) Equipment and materials:</b>	Accreditation Review			
1) Consulting rooms: Computers				
2) Examination tools/ Monitoring devices: Weighing scale, BP app, thermoscan, pulse oximeter, stethoscope, tuning fork, reflex hammer, etc				
3) Procedural equipment/materials: PCA pumps, PCA tubings, Ultrasound machine, spinal needles, OR bed, monitors, IV stand, oxygen source, sterile packs, etc.				
4) Ancillary diagnostic and supportive services : Imaging, neurophysiology laboratory, physical rehabilitation, pharmacy, nutrition and dietetics				
5) Library facilities: - Computer with internet or wi-fi connectivity, updated journal subscription (electronic or print), available e-books				
- PBPM OBE Curriculum				
6) Hospital Pharmacy with store and dispense opioids				
7) Within tertiary medical center and research institution				
<b>d) Clinical services:</b>	Accreditation Review			
1) Triage of referrals				
2) Assessment by different disciplines, including psychological assessment, functional assessment and risk assessment				
3) Collaboration with referring doctors and other specialists in developing a multidisciplinary pain management plan				
4) Development of a pain management plan				

III. Facilities and Clinical Services	Mode of Assessment	Met	Partially Met	Unmet
5) Implementation and monitoring of physical therapy/ psychotherapy, interventional and medical / pharmacological management	Accreditation Review			
6) Outcome assessment with recommendations for each patient				
<b>IV. Pain Conditions treated</b>				
1) Acute pain	Datasheet, Accreditation Review			
2) Chronic non-cancer pain				
3) Cancer-related pain				
4) Palliative/Hospice				
<b>V. Education and Training</b>				
1) CME/ CPD activities organized by PMU – journal club, webinars, lay fora, workshops	Supporting documents, Accreditation Review			
2) Inpatient rounds				
3) Case conferences				
4) Audit				
<b>VI. Research</b>				
1) Institutional Review Board / Ethics Review Board is available in the hospital	Accreditation Review			
2) All staff in the PMU who are engaged in research are GCP or GRP certified.	Supporting document			
3) At least 1 Research output / presentation per year				
<b>VII. Quality patient care</b>				
a) Practice of Pain Medicine clearly defined with adherence to biopsychosocial model of pain	PMU Policy/ Operational Manual			
b) There is an organizational statement of patient rights and responsibilities				
c) There are pain policies to guide all staff in the:				
1) assessment of patients from different age groups and with different comorbidities				
2) initial management of pain				
3) safe prescribing, use and monitoring of opioids				
4) opioid use in non-cancer patients				
5) opioid use in patients with substance abuse disorder				
6) Use of PCA pumps, troubleshooting				

**INTERPRETATION OF THE RATING:**

- Met** = \_\_\_\_\_ years of accreditation
- Partially Met** = \_\_\_\_\_ years of accreditation
- Unmet** = No accreditation

**CLASSIFICATION OF PAIN UNIT:**

- \_\_\_ Multimodal pain clinic
- \_\_\_ Multidisciplinary pain clinic
- \_\_\_ Multidisciplinary pain center

\_\_\_\_\_  
Signature above name of Evaluator

\_\_\_\_\_  
Date Signed