



# Understanding Hospice, Palliative Care and End-of-life Issues



**25% of deaths occur at home -  
more than 70% of Americans would  
prefer to die at home**

**(Robert Wood Johnson Foundation)**

# Hospice

- ▶ Provides support and care for those in the last phases of life-limiting illness
- ▶ Recognizes dying as part of the normal process of living
- ▶ Affirms life and neither hastens nor postpones death
- ▶ Focuses on quality of life for individuals and their family caregivers

# Core Aspects of Hospice

- ▶ Patient/family focused
- ▶ Interdisciplinary
- ▶ Provides a range of services:
  - Interdisciplinary case management
  - Pharmaceuticals
  - Durable medical equipment
  - Supplies
  - Volunteers
  - Grief support

# Additional Services

- ▶ Hospices offer additional services, including:
  - Hospice residential care (nursing home facility)
  - Inpatient hospice care (General Inpatient contract)
  - Palliative care (We do not have a palliative care program currently)
  - Complementary therapies (Speech, Occupation, Physical, Respiratory Therapies)
  - Specialized pediatric team (I am checking to see if we will do pediatric patients)
  - Caregiver training classes

# Hospice Team Members

- ▶ The patient's personal physician
- ▶ Hospice physician (medical director)
- ▶ Nurses
- ▶ Home health aides
- ▶ Social workers
- ▶ Clergy or other counselors
- ▶ Trained volunteers
- ▶ Speech, physical, and occupational therapists (We have a respiratory therapist too!)

# The Hospice Team

- ▶ Develops the plan of care
- ▶ Manages pain and symptoms
- ▶ Attends to the emotional, psychosocial and spiritual aspects of dying and caregiving
- ▶ Teaches the family how to provide care
- ▶ Advocates for the patient and family
- ▶ Provides bereavement care and counseling

# Where Hospice is Provided

- ▶ Home
- ▶ Nursing Facility
- ▶ Assisted Living Facility
- ▶ Hospital (with GIP contract only)
- ▶ Hospice residence or unit
- ▶ Wherever the patient calls home...



# Who Pays?

- ▶ Medicare – reimbursement is about \$150 a day in our counties.
- ▶ Medicaid
- ▶ Insurance (We work with specific companies, I will get a list from our Business Office Manager) We can also negotiate a contract on a case by case basis.
- ▶ Private pay
- ▶ Sometimes a combination of these...

# Admission Criteria

## ▶ General

- Life-limiting illness, prognosis is 6 months or less if disease takes normal course
- Live in our service area
- Consent to accept services

# Palliative Care

- ▶ Treatment that enhances comfort and improves the quality of an individual's life during the last phase of life
- ▶ The expected outcome is relief from distressing symptoms, the easing of pain, and/or enhancing the quality of life

# Curative and Palliative Care

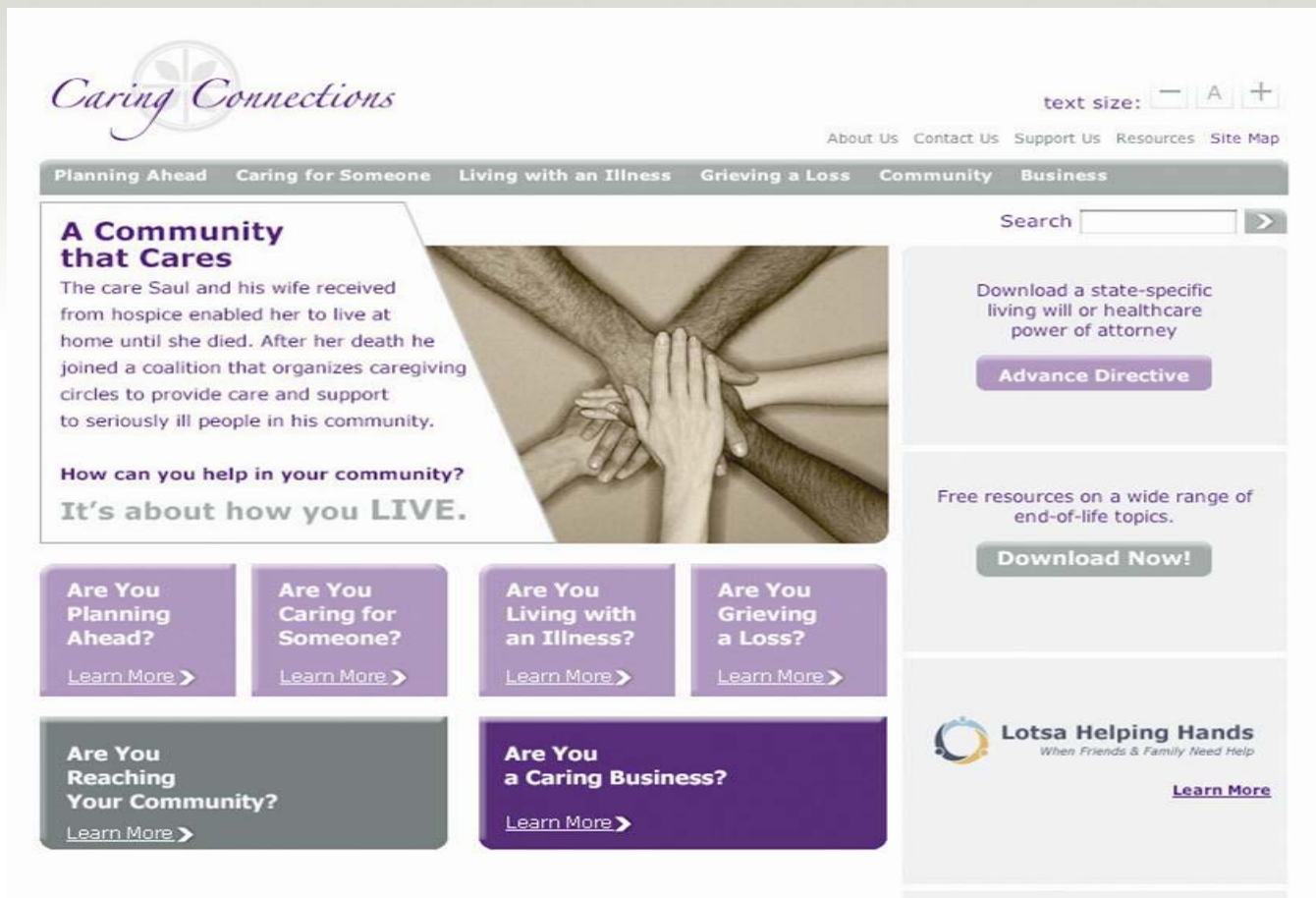
## ▶ Curative care

- Focuses on quantity of life and prolonging of life

## ▶ Palliative care

- Focuses on quality of life and death, and views death as a natural part of life – Is still pursuing aggressive treatment to attempt at curing their illness

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### A Community that Cares

The care Saul and his wife received from hospice enabled her to live at home until she died. After her death he joined a coalition that organizes caregiving circles to provide care and support to seriously ill people in his community.



**How can you help in your community?**  
**It's about how you LIVE.**

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# FREE Resources Available from *Caring Connections*

- ▶ More information about Hospice and Palliative Care
  
- ▶ State-specific advance directives
  
- ▶ Brochures to download or order:
  - *What is Palliative Care?*
  - *Ask Tough Questions*
  - *Conversations Before the Crisis*
  - *Question and Answers: Artificial Nutrition*
  - *Question and Answers: Cardiopulmonary*
  - *Question and Answers: Dying at Home*

# ***It's About How You LIVE!***

**Learn** about your options, choices and decisions

**Implement** your advance directive plans

**Voice** your decisions about hospice and palliative care

**Engage** others to learn more about hospice and palliative care