

HEALTH IN OUR HANDS!

The Arkansas State University Wellness Program Newsletter
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Hospice

This month's issue of *Health in Our Hands* recognizes Hospice month.

Overview

The term hospice was coined by physician Dame Cicely Saunders beginning work with the terminally ill in 1948. Hospice is a team oriented approach to compassionate care for people with incurable diseases and their families. Hospice is a philosophy of how end of life care should be given to patients. The team provides pain control, symptom management, and emotional and spiritual support. The goal is that patients will live their last days as alert as possible with dignity and pain-free. Hospice focuses on quality of care, not curing patients. Hospice is most often given in the home but can also be provided at a hospice center, hospital or in a skilled nursing facility. Most often, a family member is the primary caregiver. The hospice staff makes regular visits and is on-call 24 hours a day, seven days a week. The hospice team usually includes:

- Personal physician
- Hospice physician
- Nurses

- Home health aids
- Social workers
- Clergy or other counselors
- Trained volunteers
- Speech, physical, and occupational therapists

Services

- Management of symptoms and pain control – The goal is that patients be relieved of symptoms and free of pain but still be alert enough to enjoy people around them and make decisions. Hospice provides drugs, medical supplies and equipment.
- Instruction – If the primary caregiver is a family member the team will coach them on how to care for the patient.
- Spiritual care – Spiritual care is tailored to meet the needs of a specific patient. This can include saying goodbyes, religious ceremonies, or finding out what death means to the patient.
- Respite care – Family and caregivers are offered a break of up to 5-days while the hospice team takes over the role of primary caregiver.

- Inpatient care – If symptoms or pain become too difficult to manage at home the patient can be moved to an inpatient facility.
- Bereavement care – The hospice team works with the family after the patient has passed to help with grief. These services are offered for one year after the patient's death.

Palliative Care

Palliative care extends the principles of hospice by encompassing a broader population earlier in the illness and no specific therapy is excluded from plan of care. Treatment options are still being considered and evaluated based on the patient's values and symptoms. As the illness progresses, palliative care develops into hospice care.

How to Find Hospice Care

It's a good idea to research different hospice programs in the area to find one that meets the patient's and

family's needs. Items to consider include:

- Quality of care
- Availability of needed services
- Types of services
- Personnel training and expertise
- Insurance coverage

There are a several questions you might ask when deciding on a hospice program.

- Accreditation – Is the program accredited by the Joint Commission of Accreditation of Healthcare Organizations or another accrediting body?
- Licenser – Is the program licensed by the state?
- Certification – Is the program certified by Medicare? In order to be certified by Medicare, the program must meet the federal minimum requirements for patient care and management.
- Consumer information – Does the program have written documentation outlining services, eligibility criteria, costs, and payment procedures, employee job descriptions, malpractice, and liability insurance.
- References – Look for information about how long the agency has been serving the community. Can they provide references from professionals or from members of the community with personal experience with their program?
- Admissions – Will the hospice team negotiate over differences in policies with patients? If not, will the agency do an assessment?
- Plan of Care – Does the agency develop an individualized plan of care for each patient? Does a professional develop a plan with the help of the patient/family and provide copies for everyone? Is the plan of care updated as needed?
- Family caregiver – Is it required to have a designated family primary caregiver? How much responsibility is given to the caregiver? How much help does hospice provide to the family with scheduling, travel, and other responsibilities?
- Preliminary evaluation – Who conducts a preliminary evaluation? Does it include a consultation with family physician or other professionals already providing the patient with health and social services? Is the family consulted?
- Personnel – Does the agency train, supervise and monitor the caregivers and team members? How often does a supervisor assess the care of the patient? Are the caregivers licensed?
- Questions – Who can you call with questions?
- Responses and Services – Does the agency have a 24-hour telephone number? How quickly can the hospice initiate services? Do they offer specialized services and/or medical equipment?
- Inpatient care – Where is inpatient care provided? What are the requirements for inpatient stay and how long can a patient stay? Who do you have contracts with regarding inpatient?

Being a Supportive Caregiver

- Work and communicate effectively with the patient
- Support the patient's spiritual and emotional concerns
- Help the patient with unfinished business
- Work with the health professionals
- Work with family and friends
- Take care of your own needs and feelings.

There are many resources out there with philosophies about being an effective caregiver. Remember to communicate with the patient and the family about your needs and listen to their needs.

References

- www.hospicenet.org
- www.cancer.org
- www.nhpco.org

Other News:

**If you have any suggestions for newsletter topics, please contact Dean Susan Hanrahan at hanrahan@astate.edu.

The Arkansas State University Employee Wellness Newsletter is published monthly during the academic year by the College of Nursing and Health Professions. Health questions can be addressed to Dean Susan Hanrahan, Ph.D., ext. 3112 or hanrahan@astate.edu. Produced by Michelle Williams, graduate student in the College of Nursing and Health Professions, Physical Therapy Program.