

COMPLIMENTARY, PLEASE TAKE ONLY ONE

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Hospice Care: Making a Difference for the Terminally Ill



# health watch

# Hospice Care: Making a Difference for the Terminally Ill



The earliest concept of hospice was rooted in the centuries-old idea of offering a place of shelter and rest, or "hospitality" to weary and sick travelers on a long journey. In 1967 Dame Cicely Saunders at St. Christopher's Hospice in London first applied the term "hospice" to specialized care for dying patients. Today, hospice care prohumane compassionate care for those in the last phases of incurable disease so that they may live as fully and comfortably as possi-

The best definition of hospice is that it is a philosophy of care. In this philosophy death is viewed as the final stage of life. The goal of hospice is to enable patients to continue an alert, pain-free life and to manage other symptoms so that their last days may be spent with dignity and quality, surrounded by family and friends. Within the parameters of hospice, life is affirmed and death is neither hastened nor postponed. It is the person that is treated in hospice, not the disease, and the focus is on quality as opposed to the length of life. It provides family-centered care and involves the patient and the family in making decisions. Care is provided for the patient and family 24 hours a day, seven days a week. Hospice care can be given in the patient's home, a hospital, nursing home, or private hospice facility. Most hospice care in the United States is given in the home, with a family member or members serving as the main hands-on caregiver.

When a patient can no longer benefit from care and life expectation is less than six months hospice care is considered suitable. Hospice gives palliative care, which is treatment to help relieve disease-related symptoms, but not cure the disease; its main purpose is to improve your quality of life. The decision to begin hospice lies with the patient, their family and doctor.

Experts in the field have repeatedly reported that one of the biggest problems with hospice is that it is not begun soon enough. Instituting hospice care can be hindered by physicians, family members and patients when they feel that the introduction to the care sends a message to the patient that there is no hope. Nothing could be farther from the truth. If a patient suddenly gets better or goes into remission they can be taken out of the hospice pro-

gram and put back into active treatment. If a patient has to return to hospice care, they never have to worry about the door being open for them to return. Hospice does not strip away hope -- it offers the hope of maintaining the quality of a persons life, making the best of each day during the last stages of advanced illness.

### Hospice care can include:

- •Care directed by a doctor who has training in providing hospice and endof-life care — your loved one's primary physician remains in control, with assistance from the hospice care team
- •Regular visits to the home by nurses who have training in hospice care, as well as 24-hour, on-call nursing support
- Help with daily needs, such as bathing, cooking, cleaning, or other needs
- •If requested, visits from a chaplain •Counseling services, both for the person in hospice and for the family members
- ·Social services support
- Respite care (service provided to relieve caregivers)
- Medical equipment such as hospital beds, bedside commodes, wheelchairs, oxygen — and medical supplies
- Medications to help control pain and symptoms
- Bereavement care for the family following the death
- ·Access to other therapies, such as phys-

ical, occupational, speech and dietary therapies, as needed, depending on the patient's condition

Hospice Care Network (HCN) is a non-profit organization that has served patients and their families in Nassau, Suffolk and Queens counties with care and compassion since 1988. HCN utilizes an approach that cares for the total person, addressing the physical, emotional and spiritual needs of patients and their families. Care is provided by an interdisciplinary team of physicians, nurses, social workers, home health aides, dieticians, pastoral care providers, bereavement counselors and trained volunteers. HCN, a member of the North Shore-LIJ Health System, is committed to the highest quality care and is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHHO),

as meeting the highest

standards expected in the field.

# How Can HCN Help?

Calls can be made at any time (24 hours a day, 7 days a week)

Admissions/Referral Center: 1-800-2-HOSPICE

1-800-2-HOSPIC 1-800-246-7742

Referrals can be made by physicians, family members, friends, clergy, hospital social workers, discharge planners or others. Patients and families are encouraged to call Hospice Care Network—whether or not they have a physician referral—to seek advice and information at any time during the illness.

If it appears hospice care would be beneficial, the Hospice Care Network staff will work closely with all the appropriate people to help facilitate a referral and admission to its program. Meetings to discuss each patient's unique needs will be arranged at a time and place that is convenient for the family.

HCN develops individualized plans of care to accommodate the special needs of newborns, children, adolescents, and adults of all ages, their caregivers and family members.

## Who pays for care?

Payment and Insurance issues will not create additional stress for patients when they enter the Hospice Care Network program. Though everything will be fully explained upon admission to the program, these basic questions are usually asked by patients before entering the program:

Is hospice care covered by insurance?
•What care and services are usually cov-

- •What are the charges for staying at one of the Hospice centers?
- •Is financial assistance available to those who may need it?
- •How are hospice services covered for nursing home patients?

When a patient qualifies medically for hospice care, Medicare, Medicaid and many private insurance policies have hospice benefits. Special funds are put aside for military veterans. People can choose to pay privately, or in some cases, Hospice Care Network bills on an "ability to pay" basis, or pro bono care. Since some pay nothing or very little, contributions are utilized to offset expenses. No patient is refused service based on inability to pay.

As one of the largest hospice organizations in New York State, serving more than 350 patients and their families daily in Queens, Nassau and Suffolk counties, HCN is looking for volunteers in Queens County. Volunteers serve a very important role, working with patients and making sure the patient and their loved ones are as comfortable as possible during a most difficult time.

The volunteers are considered "the heart" of hospice and among its most valuable resources. They help make every day count for the patient. They offer compassion and friendship to the

patient and support to the caregiver and/or family members giving them the reassurance that they are not alone. Volunteers who join HCN can serve in a variety of roles. The "patient care volunteers" provide practical help for overburdened families and offer respite relief to allow caregivers a few hours "off." They can spend their time with the patient by reading their favorite book, writing down their memories, listening to them speak, share a hobby or interest with them or just sit by the patients' side offering their unconditional support. Volunteers can also utilize their multilanguage skills to interpret the needs of those who do not speak English. Those individuals who donate their time can also work as "office volunteers," assisting with clerical assignments and attending special projects while using their interpersonal and computer skills. They can also become a member of HCN's Speakers' Bureau, participate in committees, boards and special events and participate in any fundraising efforts.

The vision of HCN is for patients to have a peaceful and meaningful end-of-life experience—one in which they have the time and physical capacity to get their affairs in order, have meaningful conversations with friends and loved ones and resolve any "unfinished business" in their lives.

The volunteer department at HCN will be holding training sessions. Caring individuals who are interested in working with patients with terminal illness can contact the Office of Volunteer Services at 718-746-6142 ext. 404.

