

Jefferson Healthcare Hospice

Caring for our community

What is Hospice?

Hospice care is a holistic approach to healthcare that focuses on the quality of life for people and their caregivers who are experiencing an advanced, life-limiting illness.

Hospice care provides compassionate care for people in the last phases of an incurable disease so they may live as fully and comfortably as possible.

Levels of Hospice Care

Routine Home Care:

- •The most common type of hospice services offered in the United States.
- Hospice interdisciplinary team provides core services in the patient's home, wherever that may be.
- •The patient's home may be a private home, an assisted living facility, or a longterm care facility. The patient's home is where they reside

Respite Care:

- Respite care is short-term inpatient care to relieve the family/primary caregiver. Caregivers often schedule respite in order to travel or tend to their own healthcare needs.
- Respite is limited to 5 consecutive days.
- •The hospice agency may provide respite in a variety of contracted settings.

Levels of Hospice Care

General Inpatient Hospice Care:

Care is provided in an acute care/hospital setting where intensive nursing and other support is available outside of the home.

Criteria for this level of care include:

- Uncontrolled distressing physical symptoms (uncontrolled pain, intractable nausea, respiratory distress, severe wounds, etc.).
- Psychosocial problems (unsafe home environment or imminent death where family can no longer cope at home).
- Contract beds, where the facility (hospital/nursing home) staff provides routine care, with supplemental services provided by hospice personnel.





The Role of the Hospice Team

Provides skilled medical assessment of the patient

Evaulates medications and use of medications

RN communicates with MD on patient needs and condition

Hospice aide provides personal care support

Physical therapy may see the patient for evaluation and teaching of safe transfers

Spiritual Care & Bereavement

Comfort Therapy

MSW

There are limitations to hospice.

Hospice does NOT replace the caregiver.

Hospice patients must have a plan in place for a 24/7 Caregiver.

The caregiver may be family, friends, a private caregiver, and/or agency caregiver.

A caregiver provides the hands- on care needs of the patient, such as toileting, turning, nutrition, hygiene, medicating, and companionship.

A patient will need a designated decision maker to make choices for them when they are no longer able to make choices for themselves

A designated decision maker should be in writing via an Advance Care Directive or Durable Power of Attorney

A patient should make decisions about life saving measures, interventions and/or their DNR status (do not resuscitate) with their physician and have completed a POLST outlining those decisions.

Hospice does require that there is a plan in place from the start of care for 24/7 caregiving.

It is the right of the patient and family to choose to follow hospice protocols and make informed medical decisions.

Not all services provided to patients on hospice are covered under the Medicare Hospice Benefit.

Items the benefit will **NOT** cover:

- Treatment intended to cure a patient's terminal illness or unrelated to that terminal illness
- Prescription drugs to cure a patient's illness or unrelated to that terminal illness
- Room and board in a nursing home or other care facility

The Comfort Pack Haloperidol (Haldol) liquid: Hallucinations & agitation

Hyoscyamine (Levsin): managing secretions

Ondansetron (Zofran): nausea and vomiting

Morphine Sulfate (Roxanol) liquid: Pain, air hunger, rapid respirations

Non-Covered Medications

Not every medication a patient takes may be covered (paid for) by hospice.

Covered medications are dispensed by our contracted pharmacy, Jefferson Healthcare Pharmacy in Port Ludlow.

Medical necessity is determined by the Hospice Medical Director, Physician

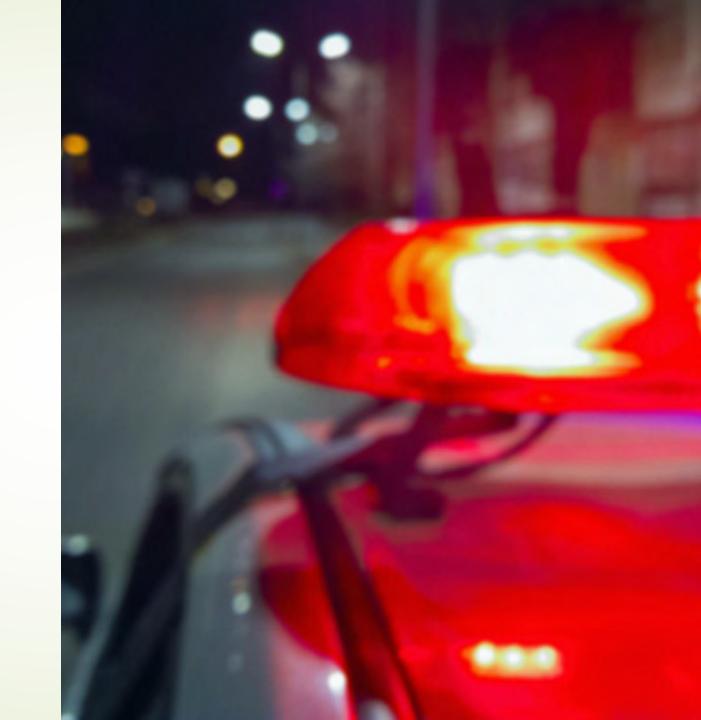


What is a Non-Covered Medication?

- A non-covered medication is any medication that has been determined as unrelated to the terminal illness.
- Related: If a drug is determined to be related to the terminal illness and related conditions by the hospice physician, then hospice will prøvide/ cover it
- Unrelated: If a drug is determined to be NOT related to the terminal illness and related conditions by the hospice physician, then the hospice will not provide/cover it, but other parts of Medicare or other insurance may provide/cover it.
- Related but not medically necessary: If a drug is determined to be related to the terminal illness and related conditions but determined to be not medically necessary by the hospice physician then the hospice will not provide/cover it, but other parts of Medicare or other insurance may provide/cover it.

Always call hospice

Before calling 911



Emergent Care Considerations for a Hospice Patient



CALL HOSPICE 360-385-0610



A patient may go to the ER

However, the decision to seek treatment is multifactorial and involves the patient and family (if they can make choices for themselves) their family and/or DPOA, and Hospice interdisciplinary team which includes MDs.



Palliation Vs. Treatment

If curative treatment is sought, this will involve the patient revoking their hospice benefit.

These can be complex situations and that is why you should always *call hospice*

- Call the Hospice Office
- What happens then?
- RN will come and perform an assessment.
- RN will do the notifications
 - To family
 - MD
 - Funeral Home
 - THEN the funeral home will call the family/caregiver to provide their ETA

When a patient passes

Spiritual Care and Bereavement

Spiritual care, also known as pastoral care, is an important part of hospice care—the interdisciplinary, compassionate care services that support patients and families through the end-of-life and grieving process.

Whatever an individual's belief system or cultural tradition may be—whether they consider themselves to be religious or not—there is potential value to be found in accepting the offer of spiritual counseling.

A hospice chaplain, or spiritual counselor, is trained to assess individual needs and to meet each person they serve wherever they are in their own understanding. Spiritual counselors never proselytize or try to tell someone what to think. Rather, they are trained to be active listeners and to comfort the people they serve by guiding them through their own questions and emotions and offering insight and inspiration when needed. They also can assist patients with conceptualizing and planning a life celebration or memorial service.





■ WHAT IS BEREAVEMENT / BEREAVEMENT SERVICES?

Bereavement services and the bereavement process are an important part of the end-of-life journey and your hospice care experience. Bereavement is essentially the grief process, which can be experienced both prior to and after death.

The bereavement process. We have bereavement services that extend up to 13 months past the loss of your loved one. Throughout this time, there will be bereavement staff reaching out to you through phone calls and mailings, as well as the option attend/schedule counseling sessions (both group and individual).

UNDERSTANDING GRIEF

Each person's experience and methods of grieving are different and unique. Because of this, we provide many techniques to help you through this time.