

Welcome  
to the  
Silver Summit



*Silver Summit*

*Lori Cooper*

HEALTH



# Hospice and Palliative Care



An elderly couple is shown from behind, sitting on a sandy beach. They are both wearing light blue shirts. The man has his arm around the woman's shoulder. They are looking out at a calm ocean under a soft, golden sunset sky. The water is a mix of light blue and yellow, with a few small, dark shapes that could be rocks or small boats in the distance. The overall mood is peaceful and contemplative.

“The end of life deserves as much beauty, care  
and respect as the beginning.”

— *Anonymous*

# Types of Care



## ***Curative Care:***

Focuses on a cure to an illness and the prolonging of life

## ***Palliative Care:***

Focuses on comfort and quality of life that may be provided with other treatments

## ***Hospice Care:***

Focuses on comfort and quality of life when a cure is not possible with specialized care and services

# Palliative Care



## Palliative Care is:

- Palliative care is *interdisciplinary care* that aims to relieve suffering and improve the quality of life, optimize function, and assist with decision-making for patients with severe and progressive illness and their families.

## Palliative Care is NOT:

- Hospice care
- Comfort care
- Withholding curative care from which patients could benefit

# Palliative Care



## Who needs palliative care?

- Patients experiencing chronic and progressive illness, chronic heart failure, pulmonary disorders, renal disease, liver disease, and neurological conditions
- Oncology patients
- Patients with progressive and recurrent infections, non-healing wounds, history of recurrent hospitalizations and/or frequent ER visits



# Palliative Care



## Who needs palliative care, continued...

- Patients with chronic and progressive illness with psychosocial and emotional and/or spiritual distress in need of an extra layer of support
- Patients with uncontrolled pain or other severe discomforts requiring symptom management
- Uncertainty about treatment options or goals of care



# Palliative Care



## ***Pathways Palliative Care provides:***

- Regular visits as needed by interdisciplinary team including RN, MSW, Care Advocate (Chaplain), and Pre-Bereavement Counselor
- 24/7 nurse advice and visitation as needed for urgent medical needs
- Collaboration by Palliative Nurse Practitioner and Medical Director with patient's current primary care/treatment team for symptom management and consultation

Pathways   
*Palliative Care*

# Palliative Care



## ***Pathways Palliative Care, continued:***

- Coordination with home health agencies and private caregiving agencies in support of patient
- Connection to community resources and treatments/services provided

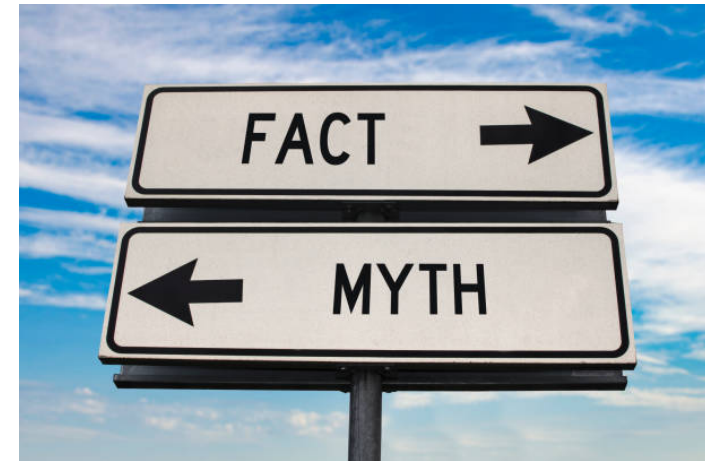
## ***Pathways Palliative Care DOES NOT provide:***

- Durable medical equipment
- Narcotic prescriptions or refills
- Supplies (wound care, incontinence), unless needed during triage visit

# Dispelling Hospice Myths



- Hospice means giving up hope
- Hospice is only for cancer patients
- Hospice is where people go to die
- Hospice is for people whose death is hours or days away
- It is the doctor's responsibility to bring up hospice
- Once the choice is made for hospice care, there is no turning back
- Other medical care is not available to hospice patients
- All hospices are the same
- Hospice hastens death

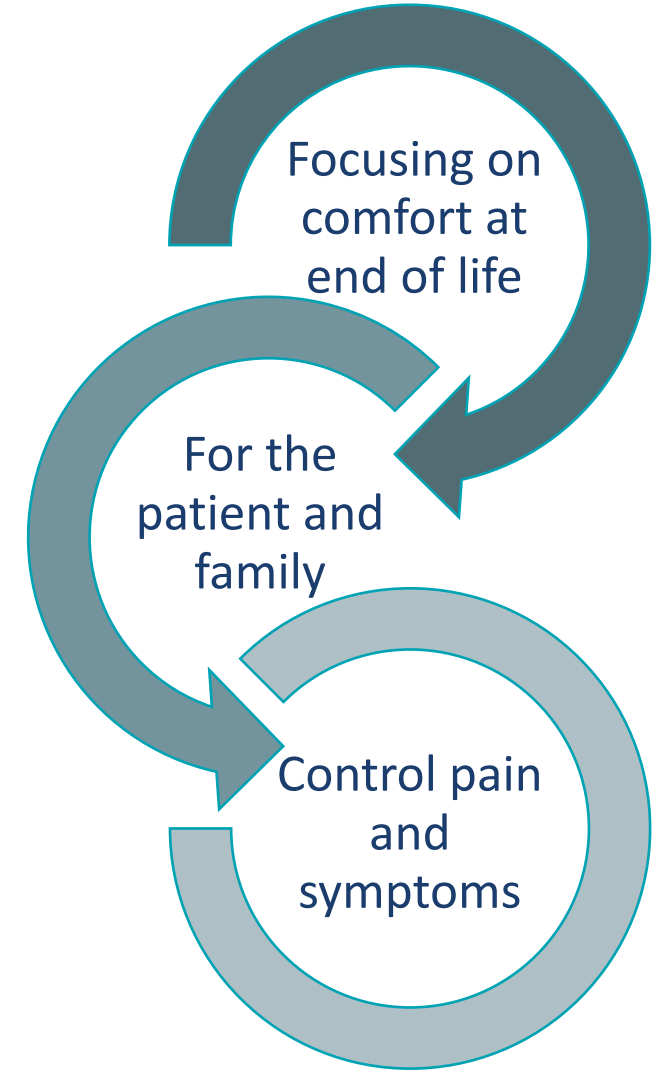


# Hospice Care



## What is hospice care?

- 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 Care



## Holistic, Interdisciplinary, and Individualized Care:

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



# Additional Services - HNC



We support our patients and their caregivers in a variety of ways:

- ✓ Care wherever the patient calls *home*
- ✓ Inpatient hospice care
- ✓ *Pathways* Palliative Care
- ✓ Caregiver training
- ✓ Complementary therapies
- ✓ Community bereavement services
- ✓ Community Education
- ✓ We Honor Veterans Program – Level 5



# Hospice Team Members



## Who makes up the interdisciplinary team?

- The patient's personal physician
- Hospice physician (Medical Director)
- Nurses
- Home health aides
- Social workers
- Spiritual counselors
- Trained volunteers
- Speech, physical, and occupational therapists
- Dietician



# Work of the Hospice Team



## What does the interdisciplinary team do?

- 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 is Hospice Provided?



## Hospice care is provided at:

- Home – the patient's or loved one's home
- Nursing Facility
- Assisted Living Facility including Board & Care's
- A Hospice Inpatient Unit such as HNC's:

*Pacifica House*

<https://hospicenorthcoast.org/services/pacifica-house/>



# Admission Criteria



**To qualify for hospice care, these are the general requirements:**

- Life-limiting illness, prognosis is 6 months or less if the disease takes normal course
- Live within the service area
- Consent to accept services
- Forgo other medical interventions for the terminal illness

# Who Pays?



## How is hospice care paid?

- Medicare Part A
- Medi-Cal
- Insurance and HMOs
- Private pay
- Sometimes a combination of these...
- As a non-profit we serve the underserved ,  
providing pro-bono services. Everyone deserves to die with dignity!



# Psychosocial Aspects of Chronic Illness



Chronic illness can impact a person's ability to engage in activities that bring a sense of meaning and purpose to life.

There may be a sense of personal failure.

There may be an increase in depression and/or anxiety.

Interpersonal relationships may suffer.

The "Sandwich Generation" can experience conflicting priorities as the need for time and financial resources for both aging parents and children increases.



# Be Alert to Changes as Your Loved One Ages



- Aging can be a difficult process for family and the elderly to accept. Many older adults associate illness with loss of independence or becoming a burden on loved ones. As such they may not share how they are really feeling.
- It is important for family to recognize the signs of declining health and the need for a different type of care. Understanding potential signs that the end may be near helps reduce anxiety and allows for a person's wishes to be honored.
- Many families wait to call hospice until the final days and weeks of their loved one's life. However, if the patient is eligible, they can receive specialized care, medications, medical equipment and supplies related to the terminal illness months earlier.

# Signs Your Aging Parent or Loved One Needs Hospice



1. Treatment is no longer working and/or they no longer desire aggressive intervention.
2. Their symptoms are getting harder to manage.
3. They are having a decline in their ability to perform daily tasks including eating, getting dressed, walking, or using the bathroom.
4. They're visiting the doctor or hospital more often.
5. They often seem confused or restless.
6. They're less able to communicate.
7. They don't have much appetite or are losing weight for no apparent reason.
8. They sleep much of the time.
9. They have multiple recurrent infections.
10. They are having skin tears, infections, and other signs of deteriorating health.
11. Recurrent Re-hospitalizations



# How Hospice Care Helps



Hospice care helps with end-of-life care by providing:

1. 24/7 on-call medical director and nurses available to meet patients in their home
2. Medical equipment and supplies
3. Symptom management
4. Spiritual support with a chaplain
5. Assistance with daily living activities like bathing from a hospice aide, which allows family members to focus on quality time with their loved one
6. Emotional support and community resources from a social worker
7. Help with household tasks from hospice volunteers
8. Bereavement counseling to help loved one's process grief

# Starting the Hospice Conversation



**Understand the options.** Learn as much as you can about end-of-life care options such as hospice so that you can answer questions and offer reassurance to your aging parents or loved one.

**Start talking early on.** Talk to your aging parents about their preferences for end-of-life care, ideally before their health is failing.

**Offer a listening ear.** It can take time to understand the benefits of hospice care. Listen to your aging parents' or loved one's concerns and empathize with the difficult decisions they are facing.

**Ask to attend a doctor's appointment.** If your parent or loved one agrees to have you join them at the appointment, share your concerns with their doctor and ask to have a conversation about hospice.



# What Can Hospice Do For My Loved One?



Hospice care is an additional layer of support for your loved one in their home or care facility, working in partnership with your family and your loved one's physicians. When a patient begins hospice care, they receive a team of support for their physical, emotional, and spiritual needs. In addition to this team of care, all medication related to the patient's terminal illness and all medical equipment and supplies related to this diagnosis are provided at no cost to the patient or family.



# What Can Hospice Do For My Loved One?



HNC provides nurses and aides to assist with clinical and personal care needs. Our social workers can help your family access additional resources and assist in end-of-life planning. Care advocates provide spiritual support. Volunteers step in to provide companionship visits to your loved one and give family members a chance to take a break. Bereavement counselors are available for those who need additional support.

# Who chooses the hospice agency ?



There are over 200 hospice agencies in San Diego County alone. All but two are for profit. Hence, the reason for so many. It's lucrative business because Medicare generously pays for this service. You have choice! Do your research , ask questions like: *What areas do you serve? Where is your office? How many patients does your nurse manage? Do you offer palliative care? Do you have a hospice house in case I need extra support or do I need to go to a hospital? How long have you been serving SD? Who is your medical director?* All hospices get reimbursed the same way but only some provide things above what medicare reimburses ask what they offer ie. Pet therapy, music therapy, pre and post bereavement ....

# When Should I Contact Hospice?



Many families wait to call hospice until the final days and weeks of their loved one's life, not knowing they could have started receiving additional specialized nursing care and medications, medical equipment and supplies related to their loved one's terminal illness at no cost much earlier. Hospice care improves the patient's quality of life by managing pain and other symptoms of their illness and improves the family/caregiver's lives by having someone that they can lean on, seek guidance from and receive much needed support during this difficult time.

## A final note...

**“You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die peacefully, but also to live until you die.”**

***-Dame Cicely Saunders  
(Pioneer of the hospice movement)***





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