

# What is hospice?

When a hospice nurse walks into the home of a person facing life's most intimate passage, one of the more crucial questions she will ask is: What are your hopes and fears? A question that reveals the core of the hospice mission.

Hospice nurses are the doorway to an end-of-life care system that includes doctors, social workers, chaplains, home health care aides and trained volunteers. They work together to answer any and all of their dying patients' needs, be they physical, psychological or spiritual. The goal is to help keep patients as pain-free — and lucid — as possible, with loved ones nearby, until death arrives.

“The most common concerns people express are fear of becoming a burden to others, loss of control, loss of dignity and choice, finding meaning in their lives, spiritual concerns — in short, not necessarily the physical component of dying but the psychosocial component.”

That's why hospice care serves both patients and families. Workers concentrate on providing pain medication and relief for nausea and other symptoms, all the while working to help the patient deal with the impact their dying will have on their loved ones. Team members provide spiritual counseling, help work out arrangements for dependents, answer caregivers' questions, and make themselves available 24 hours a day, seven days a week

Jan Ragland, bereavement Coordinator at Area Community Hospice, discovered her calling after her mother Frieda was diagnosed with ALS (Lou Gerigs Disease) and was enlisted in a hospice program. “We were blessed to have been able to keep my mom at home with the help of the entire hospice staff. I experienced the value of hospice in transforming the end-of-life journey for my mother and for our family. As patients and families come together, sharing this bittersweet chapter of life, hospice offers hope. After my mom died I felt the need to give back and went to training to become a certified nurse aide, so I could help others as hospice had helped my family.” After 6 months of working as a certified nurse aide, Jan took the Bereavement position at Area Community Hospice. Nancy Kernell states that Jan was offered the position because she could relate with families and knows first hand the emotions that one goes through after losing a loved one. One of the special aspects of hospice is that the family continues to receive Bereavement support after the death.

Jan Ragland and Crystal Bowen, Licensed Social Worker at Area Community Hospice have hosted several bereavement support groups. Bereavement counseling, is a service provided by hospices for each family member for at least a year after a patient's death. This is to let the family know that although the patient is no longer here, we are still here for them, says Crystal.



Considered a radical alternative in the 1970s when the first American hospices were established, hospice has become the most recognizable care offered specifically at the end of life. It became part of the American medical mainstream when the hospice Medicare benefit was enacted in 1982. Last year, 700,000 Americans moved through hospice, most cared for at home, though also in nursing facilities and hospitals.

**“Yet hospice remains widely misunderstood and under-used. Some doctors — reluctant to admit defeat against illness — may put off referrals to hospice care until their patient is very close to death”** states Dr. Balzer, Medical Director for Area Community Hospice.

The typical hospice patient is served less than one month — usually not long enough to put affairs in order, say goodbyes to family and friends, create memory tapes or books for loved ones, or simply enjoy a favorite view out the back window while free from pain, tubes, aggressive drugs and tests. People should not be afraid to ask their doctors for hospice care sooner.

Another factor is a basic misapprehension about what hospice is. A National Hospice Foundation survey shows that 75 percent of Americans don't know that hospice care can be provided at home or that you do not have to have a cancer diagnosis to be eligible for hospice, and 90 percent don't realize that Medicare pays for it. Yet, the same national research results show that Americans want the kind of end-of-life care hospice provides. Hospice can provide trained volunteers, who relieve primary caregivers, do household chores and help bathe patients. Perhaps most important, says Grace Alexander, an 83-year-old volunteer “is to be a good listener,” whether it is to the dying person or their worried family.

If you would like additional information about Hospice Services, please call the staff at Area Community Hospice at (806) 293-2732 or toll free at 1-866-317-2732.