

Hospice Care:

Improving Quality of Life When You Need it Most



Above: Hugh Henderson,
Odyssey General Manager

If you ask Polly Hunt Neal what it's like to care for someone with dementia, she'll describe it as a "very intense responsibility that goes on and on." Polly lives with her house-bound mother who suffers from dementia and requires round-the-clock care. Fortunately, Polly discovered one of health care's best kept secrets—hospice. She contacted Odyssey Health Care of Georgia and learned about its model for quality compassionate care. She learned how hospice care focuses on pain and symptom management, as well as psychosocial/spiritual support. A team of professionals and volunteers addresses the specific emotional, social, and spiritual needs of the patient and family. In addition, hospice provides ongoing bereavement care and support to families of patients after a patient has died.

"Odyssey has been a lifeline for me," Polly comments, adding, "They're just a phone call away and they always make sure everything is alright." Polly has particularly benefited from hospice's special attention to family caregivers. She says Odyssey's staff members are "the kind of people who give the caregiver a hug." Because her mother suffers from dementia, whenever someone comes to help, it's like she's meeting them for the first time. "Odyssey's caregivers never seem to mind. Maryam, the girl that helps with baths, always gives Mom a kiss when she leaves. I don't think you can fake that."

A SPIRITUAL QUEST

An "odyssey" is defined as a "a spiritual quest or journey." The mission of Odyssey Health Care of Georgia is helping those with life-limiting illnesses complete their life's journey or odyssey on Earth. Hospice is not a place; it's a philosophy. Even when medicine can't provide a cure, it can offer comfort and assistance to maintain the patient's quality of life. "In harmony with the hospice concept, Odyssey provides intensive treatment of symptoms. This care can be provided in the patient's home, a nursing home, or assisted living facility and is available 24 hours a day, seven days a week," says Hugh Henderson, Odyssey's general manager.

WHO DOES HOSPICE SERVE?

According to the National Hospice and Palliative Care Organization (NHPCO), 700,000 patients were admitted to hospice programs in 2000. However, this represented only 30 percent of those eligible to receive this type of specialized care. While hospices now assist over half of all Americans who die from cancer, cancer patients are not the only ones to receive the benefits of this valuable service. At Odyssey Health Care last year, only 25 percent of admitted patients were diagnosed with cancer, while over 16 percent were admitted for Alzheimer's and other neurological diseases. A sizeable

Hospice FAQ's

1. Where does hospice care take place? Most hospice patients are cared for in their own homes or a family member's home. "Home" can also be construed to include nursing homes and assisted living facilities.
2. How does hospice serve patients and families? Hospice takes a patient-centered approach and can include doctors, nurses, counselors, and trained volunteers. They work together to focus on the dying patient's physical, psychological, and spiritual needs. The goal of hospice is to keep the patient as pain-free and comfortable as possible, with loved ones close by until death.
3. How can one afford hospice care? Hospice services are not based on an individual's ability to pay. Eighty percent of people who use hospice are entitled to Medicare Hospice Benefits. Medicare and Medicaid cover hospice services at 100 percent with little or no out-of-pocket expense to the patient or family. Most private health plans also include a hospice benefit as part of their overall coverage.
4. What should family members look for in hospice care? There are several questions to consider. First, ask what services are provided. What type of support is available to family/caregivers? What roles do the attending doctor and hospice play? How will the patient be kept comfortable? How are services provided after hours? How and where does hospice provide short-term inpatient care? Can the hospice be brought into a nursing home or long-term care facility?

number of patients with other chronic, life-threatening illnesses, such as end-stage heart, lung, and kidney disease received care as well.

COMMON MISCONCEPTIONS

Since most people don't like to contemplate death and dying, it's no surprise

that 70 percent of those eligible for services don't get the care they deserve. "Hospice is underutilized. This is a Medicare benefit recipients are entitled to. Unfortunately, the majority either never experience hospice care or either experience the care so late in a person's illness it prohibits the patient and fami-

One should die proudly when it is no longer possible to live proudly.—Friedrich Wilhelm Nietzsche

that misconceptions surround the idea of hospice. "Many people assume hospice care only takes place in an institutional setting. In actuality, 96 percent of the care takes place in patient's homes," explains Hugh Henderson. Another common myth is that hospice care is only appropriate in the last days or weeks of life. The reality, however, is those patients having a life expectancy of six months or less are eligible for hospice care. One of the most surprising and unfortunate realities about hospice is

ly from receiving the full value of our care," Hugh Henderson states. It is his hope that more families will become aware of what hospice has to offer—compassionate care and support tailored to the specific needs of patients and their families.

For more information on hospice services, contact Odyssey Health Care at 770-379-9333.

Nancy Moreland is editor of Cherokee Living and North Fulton Living magazines.

Improving the Quality of Life

...providing quality care in
the security of familiar
comfortable surroundings



For more information call 770-379-9333
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Who: Families facing cancer, heart or lung, or other life-limiting conditions.

What: Full-service hospice care—nursing care, personal care, emotional counseling, related medications and supplies.

Where: Home, long-term care and assisted living facilities.

How: Medicare, Medicaid and private insurance funding