

CARE FOR U PLUS

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Hospice

The word "hospice" comes from a Latin word that means "guesthouse". However, in today's world, hospice is not a location. It's a special way of caring for terminally ill clients and their families.

Modern hospices began in England in the 1940's. The first hospice in the U.S. opened in 1974. Today, hospices combine the comforting power of modern medicine with the "old fashioned" support of caring hospice workers and loving families.

Most hospice clients are dying from some form of cancer. Heart disease is the second most common diagnosis.

But the focus of hospice is not the disease -- it's the client and family. Hospice care is provided by a team of people who have chosen hospice as their specialty and who have been trained to work with dying clients. That doesn't mean that hospice is all about grief and sadness! The main goal of hospice is to help clients live meaningful lives -- with comfort and dignity -- for the time that's left them.

The hospice team includes nursing assistants (usually called home health aides or hospice aides). In fact, aides are very important to the team, especially since they spend so much time with clients and their families.

Where can Clients Receive Hospice:

Hospice services are available to people wherever they choose to spend their final days. This includes:

- *Private Homes.* A hospice client may live at home or a friend or family member's home.
- *Freestanding Hospice Facilities.* Many large hospices have their own facilities where clients come for care. These facilities tend to be located in cities.
- *Hospitals.* Some hospitals provide hospice care. They may devote a special floor or wing to hospice clients-and have a specially trained hospice team.
- *Nursing & Assistant Living Homes.* Hospice care is also provided at some skilled nursing and assisted living facilities. (The facility is considered the client's home.) There may be an "in house" hospice team or a visiting team.



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Who Receives Hospice Care:

Before a client receives hospice care, nurses and physicians review the client's disease history, current symptoms and life expectancy. Then, they meet with the client and the family to discuss hospice philosophy and services, pain management and equipment need.

People who receive hospice care:

- Are usually in the last six months of their lives.
- Can be any age...from a child to a senior citizen.
- Can be of any religion...or of no religion.
- Have terminal illnesses such as cancer, AIDS, lung diseases, heart disease, nerve disorders and Alzheimer's Disease.
- Often have a friend or family member who helps care for them.
- Can be wealthy, or poor or in between!

Remember...it is possible for doctors to be wrong about how long a person has to live. There have been cases of people "graduating" from the hospice program by getting better! There are also cases of people who live longer than six months while receiving hospice care. Their care doesn't stop just because they've survived longer than expected!

People have the right to change their minds. If they begin hospice care and don't like it or want to try some new "cure" for their disease, they can be discharged from hospice. Most insurance plans allow people to start hospice again at a later time.

What makes Hospice Care Different:

When people are admitted to hospice, the staff comes and goes as needed. (However, they are

- available 24 hours a day, 7 days a week.) If a client feels better, the staff visits less often -- but the client is not discharged.
- Hospice care provides palliative care rather than trying to "cure" a disease. Palliative care focuses on making people comfortable by reducing or taking away unpleasant symptoms such as shortness of breath or pain.
- The hospice team has special training that helps them deal with a client's emotional pain, too.
- Hospice care provides services to clients and their families.
- Hospice care is less expensive than most other types of care...costing under \$150.00 per day.
- Most hospice clients remain at home with their friends and family. Hospice clients have already decided not to be kept alive by machines.
- Hospice care for the family continues for up to one year after the client dies. This is known as bereavement care.
- Many home care clients are required to be homebound. Hospice clients are not! They may leave their homes as much as they like.
- If a hospice client lives in a facility, hospice provides grief counseling for the staff of the facility -- just like they do for the family.