

# Anna's HOSPICE JOURNEY



As **Anna's** condition continues to decline, the hospice IDT helps Anna's family prepare for her death, according to her wishes and the plan of care.

**DID YOU KNOW?** LESS AGGRESSIVE CARE AND EARLIER HOSPICE REFERRAL IS ASSOCIATED WITH BETTER PATIENT QUALITY OF LIFE NEAR DEATH.<sup>1</sup>



**Anna** dies peacefully in her home, surrounded by her family, just like she wanted. She spent 68 days under hospice care.

**DID YOU KNOW?** OVER 90% OF FAMILIES OF HOSPICE PATIENTS REPORT THAT THE CARE THEIR LOVED ONE RECEIVED WAS VERY GOOD OR EXCELLENT. 96% OF FAMILIES REPORTED THAT THEIR PATIENT WAS ALWAYS TREATED WITH RESPECT<sup>4</sup>



With the assistance of the IDT, **Anna** is able to attend her grandson's wedding.

**Anna's** health begins to deteriorate, causing her family emotional distress. The hospice social worker and chaplain are able to counsel and comfort them.



One night, **Anna** falls in her home. Anna calls the hospice, and a hospice nurse quickly arrives to examine Anna, avoiding an unnecessary trip to the hospital.

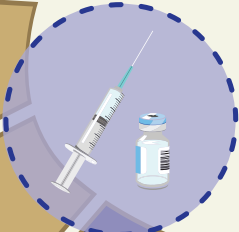
**DID YOU KNOW?** HOSPICE ENROLLMENT IS ASSOCIATED WITH SIGNIFICANTLY FEWER HOSPITAL AND ICU DAYS.<sup>2</sup>



**Finish**

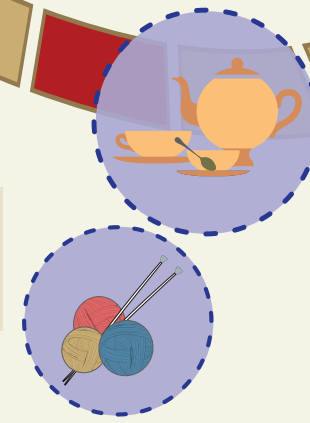
**Anna** is able to remain on insulin to keep her diabetes stable.

**DID YOU KNOW?** PATIENT'S CHRONIC MEDICAL NEEDS ARE STILL MET, TO MAINTAIN A HIGH QUALITY OF LIFE.



A hospice volunteer visits **Anna's** home once a week. Anna's family appreciates the support and companionship Anna receives.

**DID YOU KNOW?** IN 2014, 60.8% OF HOSPICE VOLUNTEERS ASSISTED WITH DIRECT PATIENT SUPPORT<sup>1</sup>



**Anna's** family continues to receive bereavement care from the hospice for one year after Anna's death.

**DID YOU KNOW?** HOSPICES PROVIDE SURVIVING FAMILIES GRIEF SUPPORT FOR AT LEAST ONE YEAR.

**Start**



**Anna**, 78 and suffering from heart failure and diabetes, has been given a prognosis of 5 months to live.

While initially skeptical about hospice, **Anna** learns she can stay at home, be supported by a care team, and maintain a high quality of life.

**DID YOU KNOW?** HOSPICE CARE IS PROVIDED WHEREVER THE PATIENT LIVES.



**Anna** elects the Medicare Hospice Benefit, and members of her interdisciplinary team (IDT) visit Anna regularly in accordance with her care plan. The IDT includes a physician, nurse, social worker, chaplain, hospice aide, and volunteers.

**DID YOU KNOW?** HOSPICE STAFF IS ON CALL 24 HOURS A DAY, 7 DAYS A WEEK

**DID YOU KNOW?** A PATIENT IS ELIGIBLE FOR HOSPICE IF 2 PHYSICIANS DETERMINE THAT THE PATIENT HAS A PROGNOSIS OF 6 MONTHS OR LESS TO LIVE.



<sup>1</sup> NHPCO. 2014 NHPCO NATIONAL DATA SET AND/OR NHPCO MEMBER DATABASE. NHPCO'S FACTS AND FIGURES: HOSPICE CARE IN AMERICA. 2015.  
<sup>2</sup> KELLEY AS, DEB P, ET AL., "HOSPICE ENROLLMENT SAVES MONEY FOR MEDICARE AND IMPROVES CARE QUALITY ACROSS A NUMBER OF DIFFERENT LENGTHS-OF-STAY." HEALTH AFFAIRS 2013; 32(3): 552-561.  
<sup>3</sup> WRIGHT AA, ZHANG B, RAY A, ET AL. ASSOCIATIONS BETWEEN END-OF-LIFE DISCUSSIONS, PATIENT MENTAL HEALTH, MEDICAL CARE NEAR DEATH, AND CAREGIVER BEREAVEMENT ADJUSTMENT. JAMA : THE JOURNAL OF THE AMERICAN MEDICAL ASSOCIATION. 2008; 300(14):1665-1673. DOI:10.1001/JAMA.300.14.1665.  
<sup>4</sup> NHPCO ANALYSIS OF 2014 FAMILY EVALUATION OF HOSPICE CARE (FEHC) DATA. FOR MORE INFORMATION ABOUT FEHC, VISIT: WWW.NHPCO.ORG/FEHC.