

Anna's HOSPICE JOURNEY

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

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.

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.¹

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.²

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 SUPPORT¹

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 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 RESPECT⁴

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.

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.



¹ NHPCO. 2014 NHPCO NATIONAL DATA SET AND/OR NHPCO MEMBER DATABASE. NHPCO'S FACTS AND FIGURES: HOSPICE CARE IN AMERICA. 2015.

² 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.

³ 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.

⁴ NHPCO ANALYSIS OF 2014 FAMILY EVALUATION OF HOSPICE CARE (FEHC) DATA. FOR MORE INFORMATION ABOUT FEHC, VISIT: WWW.NHPCO.ORG/FEHC.