



Community

Hospice & Palliative Care
Of North Central Florida

Understanding Hospice Care & Advanced Illness Care

History of Hospice



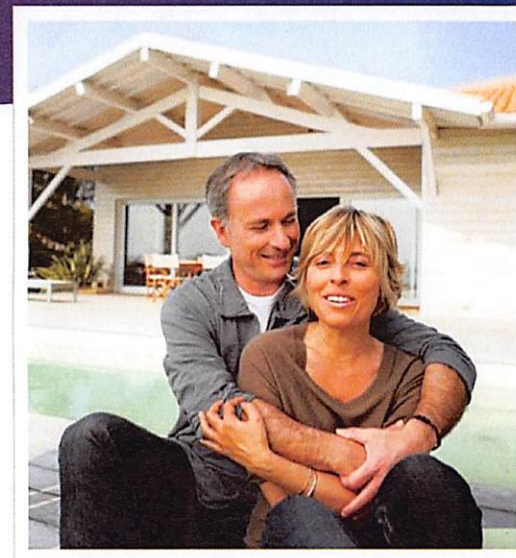
- ▶ 1967: Dr. Cicely Saunders established the first modern hospice program in London, England (St. Christopher's Hospice).
- ▶ 1974: Dr. Elizabeth Kubler-Ross founded the first hospice in the United States, in New Haven, Connecticut.
- ▶ 1986: Congress made the Medicare Hospice Benefit permanent.





About Hospice Care

- ▶ The Hospice focus is on ***caring, not curing.*** Hospice provides ***comfort and dignity*** to patients with advanced illness.
- ▶ Hospice care embraces not just ***patients, but also their families and caregivers.***
- ▶ Hospice care focuses on maximizing ***quality of life.***
- ▶ Hospice is about living life to the fullest for whatever time is left.





About Community Hospice & Palliative Care

- ▶ Founded in 1979. The first community-based, non-profit hospice provider to serve NE and NC Florida.
- ▶ More than 200,000 patients and families served over 42 years; approx. 1,300 patients each day.
- ▶ 950 employees and nearly 1,000 volunteers.
- ▶ Dedicated to serving the needs of our local community:
 - Community-based board & management team
 - 100% of dollars received stay in our community





How We Are Different

- ▶ We are **mission-driven**. **Community Hospice & Palliative Care** is a nonprofit organization with a mission to improve the quality of life for patients and families, and to be the compassionate guide for end-of-life care in all of the communities we serve.





How We Are Different

- ▶ We are **community-focused**: We are solely focused on serving the needs of our 16-county service area in northeast and north-central Florida.
- ▶ We are **community-supported**: We rely on gifts of time and money from community supporters to provide care for patients and families without insurance or other means of payment, and to fund innovative community benefit programs.



Who is Eligible for Hospice Care?

Anyone with...



- Life limiting illness
- Prognosis of 6 months or less
- Physician's order
- Patient/family agree to hospice services

The Key Question:



- ❑ Would you be surprised if a year from now, this person is no longer alive?

**If the answer is no,
it is time to ask
about hospice.**



Hospice is for Any Life-Limiting Illness

- ▶ Alzheimer's disease
- ▶ ALS (Lou Gehrig's disease)
- ▶ Cancer
- ▶ Complications of AIDS
- ▶ Dementia
- ▶ Heart disease
- ▶ Liver disease
- ▶ Lung diseases
- ▶ Multiple Sclerosis
- ▶ Parkinson's disease
- ▶ Stroke



Care Levels: Palliative vs. Hospice

Hospice Care

- Based on a time-limited prognosis as defined by federal and state regulations
- Focuses on life, living, the terminal condition and bereavement issues for individuals and their

Palliative Care

- No time limit
- Palliative care assumes illness is chronic and without cure, but death is not imminent



Hospice Care is a Team Approach



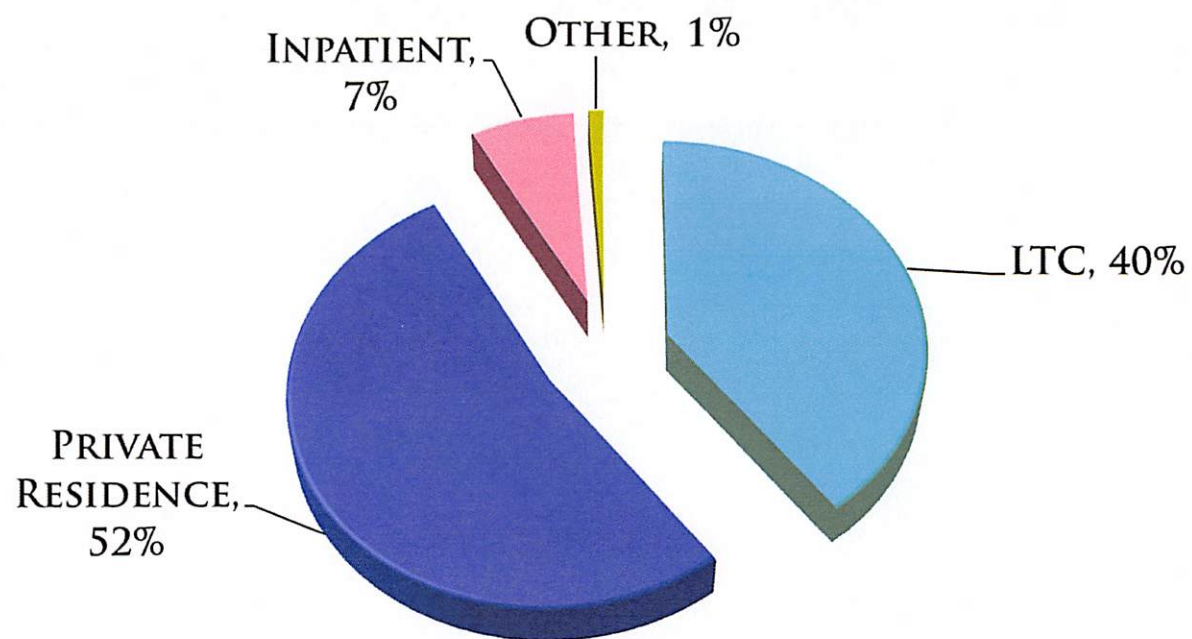


We Work Together to:

- ▶ Help manage pain and other symptoms.
- ▶ Provide needed medications, medical supplies and equipment.
- ▶ Guide family members in caring for a loved one and what to expect.
- ▶ Assist with personal care needs, such as bathing and changing linens.
- ▶ Support the emotional and spiritual aspects of preparing for the end of life.
- ▶ Volunteers can provide companionship and give caregivers a break.
- ▶ Offer individual and family bereavement counseling, grief support groups and educational and memorial events for up to 13 months after a loss.

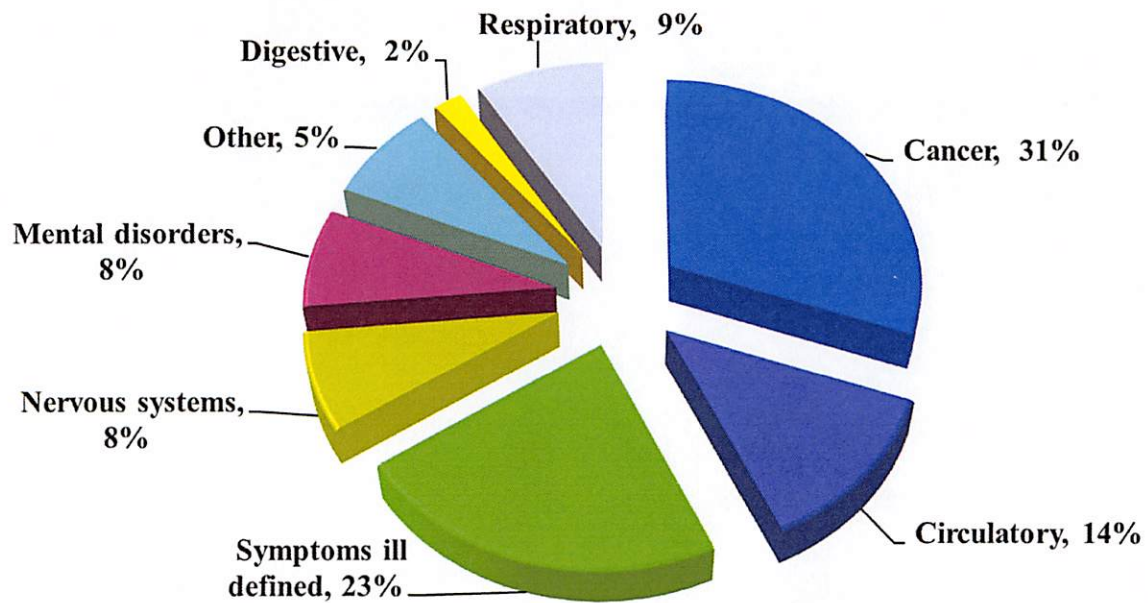


Where is Care Provided?



Based on fiscal 2020 care days

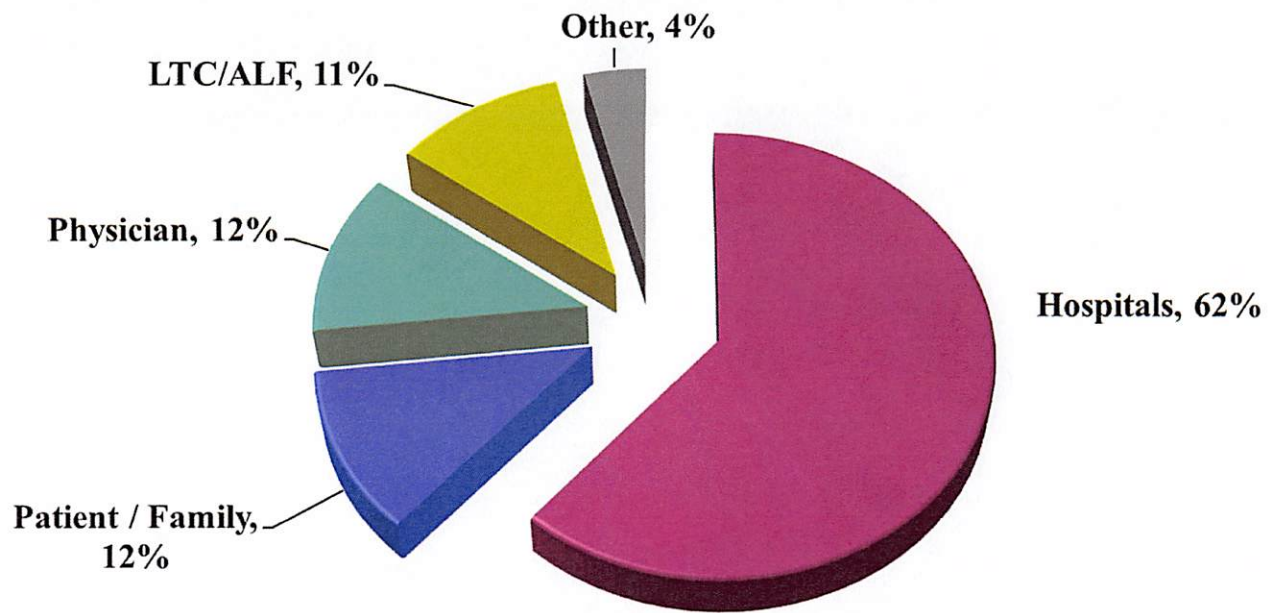
Community Hospice Patients Served



Community Hospice
September Fiscal 2020
data



Sources of Referrals & Admissions

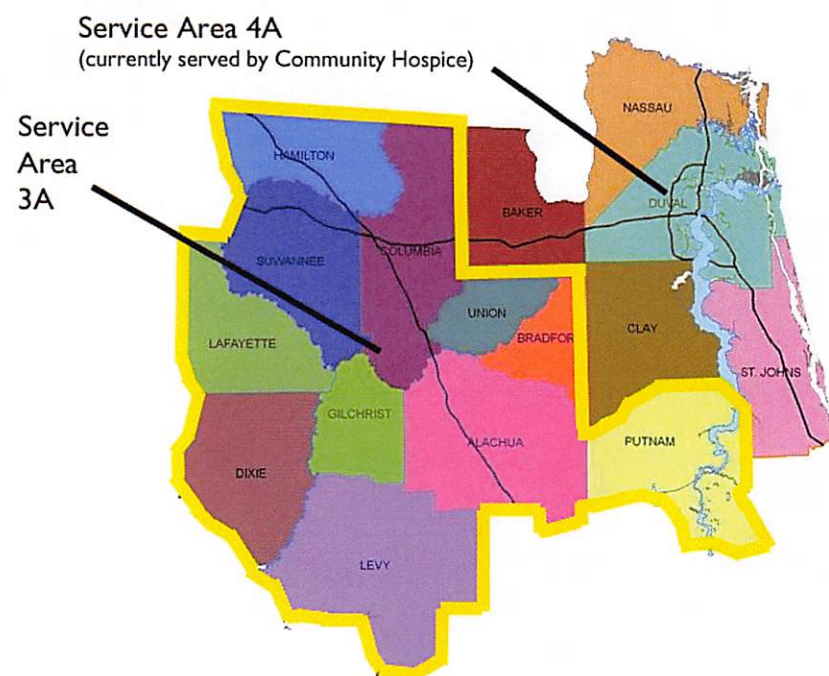


2020 ACTUAL DATA



Who Can Receive Our Hospice Care?

- ▶ Residents of 16 counties in NE and NC Florida
- ▶ People with a limited life expectancy of 12 months or less (6 months or less for Medicare eligibility)
- ▶ Physician's order
- ▶ Patient/family agree to hospice services





Care in the Home

- ▶ A majority of individuals receive care at home, and this is the most desired setting.
- ▶ In the home, Medicare guidelines require a hospice to provide:
 - ▶ 24/7 on-call professional team support
 - ▶ Medications needed to address pain and symptoms of the terminal illness or related conditions
 - ▶ DME (durable medical equipment) and related supplies
 - ▶ Lab studies, X-rays and other treatments such as oxygen for symptom management



Long Term Care Facilities (LTC)

- ▶ Supplements in-house care provided by LTC staff.
- ▶ Hospice provides medications for pain and symptom management related to hospice diagnosis, and supplies not included in LTC facility room and board.
- ▶ Medicare requires professional services be available 24/7.
- ▶ Some hospices employ nursing team dedicated to LTC residents.
- ▶ Respite care is available in some facilities.



Assisted Living Facilities (ALF)

- ▶ Family/loved ones are the primary caregivers.
- ▶ Residents may remain in facility with hospice care.
- ▶ In this setting, residents receive:
 - ▶ Meds needed to address pain and symptoms of the terminal illness or related conditions
 - ▶ DME (durable medical equipment) and related supplies
- ▶ At some hospices, special care team dedicated to ALF resident needs.



Community PedsCare®

- ▶ Pediatric palliative and hospice care for children ages 0-21 years with life-limiting and life-threatening conditions
- ▶ A program of Community Hospice & Palliative Care, in collaboration with Wolfson Children's Hospital, Nemours Children's Specialty Care and University of Florida – Jacksonville
- ▶ Individualized support, comfort and care for children and their families
- ▶ Funded in part by Community Hospice & Palliative Care Foundation





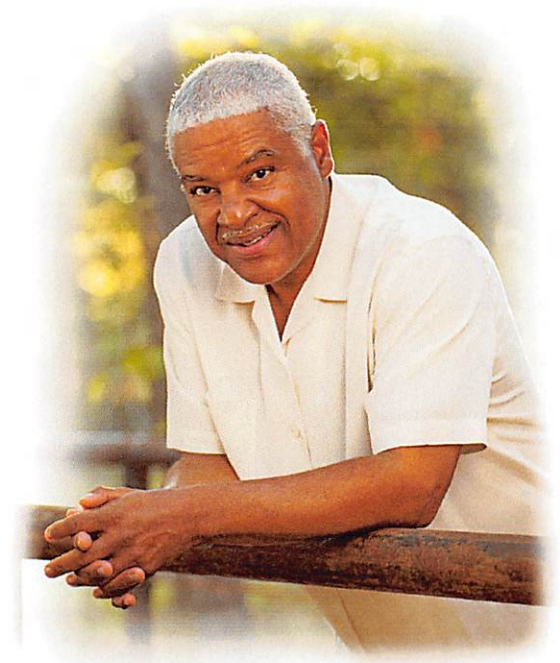
Grief & Bereavement Services

- ▶ Psychosocial specialists offer support to individuals and their families before and following a loss.
- ▶ These specialists assess and monitor for:
 - ▶ anticipated, actual losses
 - ▶ emotional responses
 - ▶ coping strategies
- ▶ They are an integral part of the interdisciplinary care team.



Grief & Bereavement Services

- ▶ After the death, support may include:
 - ▶ Memorial services
 - ▶ Individual and group counseling with a bereavement specialist
 - ▶ Seminars at family/resident council meetings in long term care settings





Camp Healing Powers®

- ▶ Weekend-long grief camp for children ages 7-21 held at Marywood Retreat and Conference Center in NW St. John's County
- ▶ Mental health professionals who specialize in grief and bereavement lead camp activities that help children identify and express their feelings.
- ▶ Learn skills to help them navigate the grief journey in a safe and supportive environment.



Volunteers: “The Heart & Soul” of Community Hospice & Palliative Care



**Our volunteers play
very important roles!**

- Patient companionship
- Pet therapy / Pet Peace of Mind®
- Ambassadors
- Clerical support
- Thrift Shops
- Events
- Spiritual Care





Anyone Can Request Care

If you think you or a loved one might be ready
for Community Hospice & Palliative Care:

Call 866.253.6681

Request a free information visit. A staff member
will meet with you and your family/caregiver to
discuss hospice services.



A Patient's Special Request





THERE FOR YOU...



WE CHOOSE
compassion.

YOU HAVE A CHOICE WHEN YOUR LOVED ONE IS FACING ADVANCED ILLNESS.
CHOOSE COMMUNITY HOSPICE & PALLIATIVE CARE.



FOR MORE INFORMATION

CALL 904.407.7777
OR VISIT CHOOSECOMMUNITYHOSPICE.COM

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