

Hospice with Heart Newsletter

Volunteers: Helping Others Live Through Life's Final Journey

Hospices aim to give people the best possible care when they are faced with a terminal illness, and to support their families and friends through the most difficult of times. The help of many thousands of volunteers is crucial in enabling them to do this.

Volunteering in a hospice can be extremely rewarding. Hospice needs volunteers with a huge range of talents and abilities, from hairdressers to gardeners, fundraisers to musicians or people to simply offer companionship to patients. If you have a little time to spare, Hospice with Heart can make good use of it.

Hospice volunteers come from a wide range of backgrounds from students to retired people. Being a hospice volunteer isn't a one-way street. Volunteers gain as well as give. It's a chance to make new friends, face new challenges and learn new skills.

Most hospices have volunteers in a variety of roles, making an enormously valuable contribution. The skills, time, commitment and experience which volunteers have to offer allows hospices to give so much more to patients and their families.

If you are interested in becoming a hospice volunteer, you probably have been touched by

the experience of hospice care—either within your own family or through a friend, neighbor or co-worker. Our volunteers report that they are motivated by a desire to give something back, but soon find that the spiritual and emotional rewards they receive far outweigh the time and care they contribute.

If you are interested in becoming a Hospice with Heart Volunteer, please contact our office at (712) 325-6802 and we will be happy to send you an application. A general overview training class will be scheduled, usually lasting four hours. A more extensive training class for professional vol-



Being a Hospice Volunteer can be the most rewarding experience you may ever have.

ing class will be held for professional volunteers, taking an additional four hours.

Hospice with Heart 2007 Memorial Service

We held our annual memorial service on May 6, 2007 at the Council Bluffs Senior Center. Honored, were those Hospice with Heart served in 2006. We had a wonderful turnout and we hope everyone found peace and joy with the service. The rain even held off until our families could release a balloon with a personal message to their loved ones attached. Thank you to all who attended.





Golfing for a cause...

Golf Tournament

We will be having our first big fundraising event on Saturday, July 28th at Fox Run Golf Course in Council Bluffs starting at 8:00 a.m.

All proceeds will go to care for patients with no means or insurance. Hospice with Heart will not turn anyone away who does not have the ability to pay.

It will be a lot of fun! We will have 18 holes of golf along with door prizes donated by local businesses in the area. We will have silent auction baskets and Lake Manawa Nissan/Kia has donated a car that everyone will be able to bid on. Lunch will be served after the event.

You still have time to get a team together and golf

for a good cause. The cost is \$65.00 per person or \$200.00 per team of four. Every team will get a golf cart to drive. There is a registration form you can download and print off of our website at www.hospicewithheart.org. All entries must be received no later than July 26th to be guaranteed a spot. You can also call our office at (712) 325-6802 with any questions you might have regarding the event.

If you are unable to attend the event but would still like to give a donation to help patients get hospice care, simply cut out the donation form on the back of this newsletter and send it to our office.

Grieving by Frank Fast, Hospice with Heart Chaplain

"Grieving is natural in two ways, the response and the process."

As you deal with your grief, do you ever question if your feelings are normal? There may not really be a "normal" in the grieving experience, because every single person deals with a different situation in a different way.

But, Doug Manning, in his Special Care Series book says that grieving is natural in two ways, the response and the process.

First we need to understand that grieving is the natural response to a loss. Your personal response will be seen in the same way that you react to other issues. For some, they will stay busy, others will want to sleep more, some will turn to their faith while some will do anything to avoid the past. Then there are those who will

busy their pain in social activities or relationships. You see, all these are natural responses to the loss.

Then there is the process of grief that is also natural. The question here is, "How will I know the peace that I so desire?" Sometimes the process has been defined as stages with clearly defined lines.

The best thing to do with grief is to grieve in your own way, for as long as necessary. All this means is that you walk your journey of grief in your own way and on your own schedule. You will find that the process will be natural and that what you are feeling is normal.

Men's Coffee Support Group



Our social worker, Leslie Halligan, BSW has been holding a support group for men who have lost their spouse. This is held at the Amelia House 57 W Ferndale Drive, Council Bluffs, IA on the last Tuesday of every month at 9:30 a.m. We would like to invite you or if you know someone who has lost their wife or significant other to join this group. If you would like more information, please do not hesitate to contact Leslie at our office at (712) 325-6802 or toll free at (877) 325-6802.

Hospice Care and the Medicare Hospice Benefit National Hospice and Palliative Care Organization

Coping with a life-limiting illness can be a daunting experience — not only for the dying person, but also for his or her family and friends. Experts agree that planning for end-of-life care before it is needed is vital to ensuring that one’s values, beliefs and desires are honored. This is true for persons who are facing the end of their lives, as well as their family members. Questions that need to be asked include:

“What kind of end-of-life care and support will my family and I need or want?” “Where do I want to receive this care?” “How will I pay for my medications and supplies?”

Many people do not realize that there is an all-inclusive hospice benefit available to Americans through the Medicare program. Since 1983, the Medicare Hospice Benefit has enabled millions of Americans and their families to receive quality end-of-life care that provides comfort, compassion, and dignity.

What is hospice? Considered to be the model for quality compassionate care at the end of life, hospice provides a team approach to expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient and family’s needs and wishes. Hospice focuses on the belief that each of us has the right to die pain-free and with dignity, and the hope that our loved ones will receive the support to allow us to do so. The focus is on caring, not curing and, in many cases, care is provided in the person’s home. Hospice is also provided in hospice facilities, hospitals and nursing homes and other long term care facilities. Hospice services are available to everyone. A loved one is the patient’s primary caregiver and, when appropriate, helps make decisions for the individual who is receiving hospice care. Hospice staff make regular visits to assess patient and family needs and provide care or services. Hospice is available 24 hours a day, seven days a week. The hospice team, along with the person and family receiving hospice services, develops a care plan that focuses on the individual and family’s needs and desires, including the need for pain management and symptom control. The plan outlines the care and support services needed such as medical care, personal care (dressing, bathing, etc.), social work services, spiritual support, counseling, or other services. It also identifies the medical equipment, tests, procedures, medication and treatment necessary to provide high-quality comfort care for the patient.

What is the Medicare Hospice Benefit? As you may know, the Medicare program consists primarily of two parts: Part A — often described as “Hospital Insurance;” and Part B — known as “Supplementary Medical Insurance.” Hospice is available as a benefit under Medicare Part A. The Medicare Hospice Benefit is designed to meet the unique needs of those who have a life-limiting illness, providing them and their loved ones with services and support not otherwise covered by Medicare. Under the Medicare Hospice Benefit, beneficiaries elect to receive aggressive pain and symptom management for their hospice diagnosis by waiving the standard Medicare benefits for treatment of conditions related to the hospice diagnosis. Hospice benefits are available to Medicare beneficiaries who are certified by two doctors, typically the personal physician and the hospice medical director, as having a life-limiting diagnosis with a life expectancy of six months or less, sign a statement choosing hospice care using the Medicare Hospice Benefit, rather than curative treatment and standard Medicare covered benefits for their hospice diagnosis and enroll in a Medicare-certified hospice program. It is important to note that Medicare will continue to pay for covered benefits for any health problems that are not related to the hospice diagnosis.

What services are covered under the Medicare Hospice Benefit? The Medicare Hospice Benefit covers the following services as long as they relate to the hospice diagnosis and are detailed in the patient’s care plan: Physician services for the medical oversight of the patient’s care, provided by either the patient’s personal physician or a hospice physician ■ Home care visits by registered nurses and licensed practical nurses to monitor the patient’s condition and to provide appropriate care to maintain patient comfort ■ Home health aide and homemaker services such as dressing and bathing that address the patient’s personal needs ■ Spiritual support for the patient and/or loved ones, if desired ■ Social work or counseling services ■ Medical equipment (i.e., hospital beds) ■ Medical supplies (i.e., bandages or catheters) ■ Drugs for symptom control and pain relief ■ Volunteer support to assist the patient and loved ones ■ Physical, speech, and occupational therapy; dietary counseling ■ and Bereavement counseling and support services for 13 months after the patient’s death.

What if the patient is enrolled in a Medicare managed care (HMO) plan? A hospice-eligible individual who is enrolled in a Medicare managed care plan may choose any Medicare-certified hospice provider. Authorization from the managed care plan is not required.

Why would someone stop receiving hospice? An individual has the right to stop receiving hospice at any time, for any reason. If the person chooses to stop hospice care, the standard Medicare benefits are restored. On occasion, the health of an individual receiving hospice may improve or the person’s disease may go into remission while receiving hospice. A person’s condition may change so that the hospice team and physician(s) believe the person no longer has a life expectancy of six months or less, and, therefore, is no longer eligible for hospice care under Medicare Hospice Benefit. At any point in time, a person can return to hospice care, as long as the eligibility criteria are met and the certification by physician(s) are received.

To learn more about end of life care services or issues, please call NHPCO’s Helpline at 800-658-8898 or Hospice with Heart at 712-325-6802.



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