

Commonly Asked Questions about Hospice Care

1. Who is eligible?

Hospice care becomes appropriate to anyone with a limited life expectancy of six months or less and the focus of curing is no longer supporting the patient's quality of life.



2. How do you start hospice care?

While patients must have a doctor's referral to receive hospice care, the patient, family and friends can initiate the process by calling Hospice of the Upstate at 864-224-3358.

3. Who pays?

Medicare and most private insurance plans provide hospice coverage. If coverage is not available, hospice will help investigate other resources the family may not be aware of.

4. How does Hospice manage pain?

Hospice staffs are up-to-date on the latest medications and approaches for pain management and symptom relief; they also recognize emotional and spiritual pain is just as real. With hospice care, many patients can be as alert and comfortable as they desire.

5. What happens when a patient improves or lives longer than six months?

It is not unusual for a patient to improve after admission to hospice. If the patient's overall condition stabilizes, they may be discharged and readmitted at a later date if needed. If a patient continues to be eligible for hospice, services may continue longer than six months.

6. Does hospice mean I have to sign a DNR?

Having a Do Not Resuscitate order (DNR) in place is not a requirement to receive hospice care.

7. Who will be caring for my loved ones?

An experienced team of Doctors, Nurses, Nursing Assistants, Social Workers, Chaplains and Counselors create a plan of care according to the individual needs and wishes of each patient.

8. Is there Caregiver support?

A variety of grief groups as well as caregiver support are offered to hospice families and community members.

9. Why Hospice of the Upstate?

Hospice care is not the same everywhere. Hospice of the Upstate is committed to offering exceptional care that is distinctively different:

- ~ *An experienced team of Doctors, Nurses, Nursing Assistants, Social Workers, Chaplains and Counselors create a plan of care according to the individual needs and wishes of each patient*
- ~ *Situated among beautiful landscaped gardens, the Callie & John Rainey Hospice House is a choice when remaining home is not the best option*
- ~ *A variety of grief groups as well as caregiver support are offered to hospice families and community members*
- ~ *Our children's counselor creatively uses art, music and outdoor experiences to provide grief support for children before and after a loss*
- ~ *As a non-profit agency, we have been supported by community donors and volunteers since 1988*

10. How do I begin a conversation about hospice with my loved ones?

Talking to your loved one about end-of-life care can be difficult. Here are some ideas to assist with starting the conversation. This discussion takes the burdens of decision making off the family and ensures that the patient's wishes are being followed.

- **Find An Example from Your Family**
Think of a relative who died long enough ago that the emotion has passed, but the memories are still there.
"Does anyone know how Great Aunt Dorothy died? No one ever talked about it then. I wonder if she died at home."
- **Find an Example from the News**
These examples are, sadly, plentiful and much less personal.
"Did you hear about the woman who has been in a coma for 3 years? Please make sure that never happens to me!"
- **Use a Conversation Prop**
Discuss a book or movie with your loved ones (whomever will make decisions for you) that deals with end of life situations. After, use the story to springboard your own discussion about end of life wishes.
Examples: *Tuesdays With Morrie* , *The Notebook* , *The Five People You Meet in Heaven*
- **Credit Someone Else for the Conversation**
Sometimes it's easier just to offset the blame.
"Pastor Jones raised the question about what choices we would make at the ends of our lives, and I realized I don't know what your choices would be.... any thoughts?"