

Hospice Care



The Goal of Hospice

- + Provides support and care for those in the last phases of life-limiting illness.
- + Recognizes dying as part of the normal process of living.
- + Affirms life and neither hastens nor postpones death.
- + Focuses on quality of life for individuals and their family caregivers.

Eligibility for Hospice

- + Two doctors must certify patient meets the criteria for the disease and has a prognosis of 6 months or less if the disease were to take its normal course (Attending and Hospice Physician)
- + Re-certified by the Hospice Physician 90-90-60 days
- + To be re-certified, should still meet criteria or show a decline
- + Benefit is unlimited and 100% covered

Eligibility Symptoms

- + Weight loss or excessive weight gain
- + Repeat visits or readmissions to the hospital/ER or frequent doctor visits
- + Decline despite all interventions
- + Frequent infections and/or wounds (stage 3 or 4)
- + Family or Patient does not want aggressive medical treatment
- + Difficulty swallowing and/or difficulty breathing
- + Withdrawal or wanting to die

Some of the Services Provided by Hospice

- + Comprehensive care provided by: Nurses, Home Health Aides, Social Workers, Spiritual Counselors, Hospice Physician (hospice medical director), Patient's personal physician
- + Volunteers, We Honor Veterans, Pet Therapy, Phoenix Center, VNA Hospice Center
- + Bereavement Services for 13 months after death
- + Medications (prescription and over the counter) related to the hospice prognosis
- + Supplies related to the hospice prognosis
- + Medical equipment
- + Palliative Therapy
- + Dietician

The time is right for hospice care as soon as the focus of care changes from cure to comfort. VNA Hospice care is provided by a team of trained individuals who focus on the special physical, psychological, social, emotional, and spiritual needs of the patient and family.

Submit a referral:

**Fax (219) 548-0945, call (219) 462-5195
or email hospicereferral@vnanwi.org**

1450 E. Joliet St.
Crown Point, IN 46307

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making best days possible.

Serving Jasper, Lake, LaPorte, Newton, Porter, & Starke counties

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Palliative Care



The Goal of Palliative Care

- + Supportive and collaborative care for people living with a serious life-limiting illness
- + Enhance the patient and family's quality of life.
- + Help people age in place.
- + Reduce hospital/office visits.
- + Focus on reducing symptoms and stress related to serious life-limiting illness.

Eligibility for Palliative Care

- + Diagnosis of a serious life-limiting illness, or injury with poor prognosis, such as: Cancer, COPD, Heart Failure, HIV/AIDS, Dementia, Parkinson's disease
- + Uncontrolled emotional, spiritual, or physical symptom need related to illness.
- + Need for continued education about disease, and/or prognosis and treatment options.
- + Need for Advanced directive discussion/education.

Some of the Services Provided by Palliative Care

- + In home face to face visits or virtual visits
- + Collaboration with primary care and/or specialist doctors
- + Ongoing discussion of quality-of-life goals and care
- + Holistic approach of care to identify the needs of the patient and family.
- + Assistance with resources in the community based on needs (DME, facility placement, medications, etc.)
- + Provide referrals for collaborative care (traditional home health, PT/OT, ST)
- + Continued education: dietary, disease process, etc.
- + Advanced Directives (POST forms, health care forms, disability plates/paperwork)
- + Counseling and spiritual support

Palliative care relieves suffering and enhances quality of life. The VNA Hospice NWI Palliative Care team can start providing comfort as early as your initial diagnosis and continue throughout your treatment.



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or email palliativereferral@vnanwi.org

Hospice Care vs Palliative Care



	Hospice Care	Palliative Care
Eligibility	+ Terminal illness with prognosis of 6 months or less	+ Diagnosed with a serious or chronic illness at any stage
Eligibility Symptoms	+ End stages of their disease and is declining despite all interventions. + Requires pain control and/or symptom management + No longer seeking aggressive treatments or curative measures	+ Uncontrolled emotional, spiritual, or physical symptom related to illness. + Need for continued education on disease and treatment options + Need for Advanced Directive discussions and/or education
Seek treatment?	+ No – once receiving hospice services, the focus shifts to comfort care and symptom management (no aggressive treatment or curative measures)	+ Yes - can continue to seek aggressive treatment and curative measures. Palliative care helps to optimize response to treatment and focuses on achieving quality of life goals
Where is care received?	+ Wherever you call home including skilled nursing or assisted living facilities	+ Wherever you call home including skilled nursing or assisted living facilities
24/7 Coverage	+ Yes – on call staff is available 7 days a week, 24 hours a day, 365 days a year	+ Visits are scheduled Monday–Friday between the hours of 8a–430pm. There is a nurse available 24/7, 365 days a year to answer questions.
Customized Care Team	+ Includes a Physician, Registered Nurse, Social Worker, Chaplain, and Aide.	+ Includes a Physician, Nurse Practitioner, Registered Nurse, Social Worker, and Chaplain
Primary Care Physician Involved	+ Yes	+ Yes – palliative care is an additional layer of care that collaborates with primary care and/or specialists
Volunteer Services Available	+ Yes	+ COMING SOON
Pain & Symptom Management	+ Yes	+ Yes
Payment	+ Medicare, Medicaid and most commercial insurance plans pay all charges related to the hospice diagnosis including durable medical equipment, supplies, and medications	+ Covered by Medicare, Medicaid and most Commercial Insurance. Patient will likely be responsible for 20% copayment, usually covered by supplemental insurance