

Hospice Illinois

On 30 July 2010 , I visited Hospice of Southern Illinois by the contaction of Dr.Dhawesukt and Mrs.Lada Tang.

Mrs. Bobbie Baldwin is a nurse who works at the Hospice and she introduced me to the staff and explained to me about the hospice system in Illinois .

We started the day with planning which patients we would visited .The history of every patient is kept online in the computer program. This has a complete history of the signs and symptoms and management plans for each patient. A nurse makes home visits home(remove) 5 times a week to dying patients; once a week in stable cases. A nurse is on call for consult for situations such as pain. When nurses visit patient, they have to record vital signs, distressing symptoms, ESAS, Karnofsky score in using note sheet. Every 2 weeks, they summarize every case in the Initial and Comprehensive Assessment.

If patients have health insurance,bills are sent to the insurance companies. If patients don't have insurance, they can use money from a foundation. Hospices never send bills to patients. The Medicare program for the elderly, who are 65 year old or more, is an important financial support.

I visited 2 patients in community with the nurse.

The first case was a woman with dementia and an allergy to gluten protein. A nurse visits twice a week and PRN. Counselor visits twice a month if needed. Distressing symptoms: Appetite loss, confusion, weakness, fatigue.

The second case was a woman with congestive heart failure. Nurse visits frequency 3 times a week and PRN. Counselor visits twice a month if needed. Pain frequency decrease. Pain level

decrease. Distressing symptoms :Anxiety ,appetite loss ,diarrhea ,dyspnea,edema,memory loss,pain,weakness,fatigue. Karnofsky score 30%, severely disabled, regular close monitoring given. NYHA functional class3; class III: Symptoms on exertion. Palliative Performance Scale activity(C) 40%.Ambulation: Mainly in bed /unable to do most activity. Extensive disease Self care: Mainly assistance. Intake: Normal or reduced. Conscious level: full or drowsy, confusion.

The Hospice is located 20 min outside the city by car. The Hospice is decorated like a luxury home. It's separated to 2 areas with one area for private groups. There is a chapel with 60 seats, and 2 family meeting rooms. There is a corner for people who want to read books or use a computer.

There is an area for a patient ward, 16 private rooms, a family room, a dining room, a laundry room, and a nurse's office. Medications are managed by the computer system link program. This contains complete lists of all medication for the patient and link to the pharmacy used by the Hospice.

Patient rooms don't have bells, but patients are able to call a nurse anywhere in the hospice because they have the bells on their wrists or around the neck. The signal from a bell is sent to the computer in the nurse's office and shows the location of the patient. The computer records how long it takes for a nurse to go to help the patient. Usually it takes a nurse less than 3 minutes to answer a call.

Patients pay \$160 a day includes food and all service.

Patients want to have a good quality of life in the last stages of life. They decide to stop aggressive treatment and continue with only supportive treatment to alleviate pain and discomfort.

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