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817.870.2795 • 800.226.0373
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312 S. Hwy 14, Suite B, Mexia, TX 76667

Waco:

254.399.9099 • 800.625.9328
6700 Sanger Ave, Waco, TX 76710

INPATIENT UNIT

Community Healthcare of Texas at Texas Health Huguley (on Huguley Hospital Campus):

817.615.2150 • 877.689.6889
301 Medpark Cir, Burleson, TX 76028

Providence Hospice Place (in Ascension Living Providence Village):

254.537.4699
300 Highway 6, Waco, TX 76712



CHOT.org

Adapted from the American Cancer Society brochure "Hospice:
A Special Kind of Caring."



14 What is hospice's success rate in battling pain?

We have a high success rate. Using some combinations of medications, counseling and therapies, most can attain a level of comfort that is acceptable to them.

15 Will medications prevent the patient from being able to talk or know what's happening?

Usually not. It is the goal of hospice to help patients be as comfortable and alert as they desire by constantly consulting with the patient. Hospices have been very successful in reaching this goal.

16 Is hospice affiliated with any religious organizations?

Hospice care is not an offshoot of any religion. While some religious organizations have started hospices, these hospices serve a broad community and do not require patients to adhere to any particular set of beliefs.

17 Is hospice care covered by insurance?

Hospice coverage is widely available. It is provided by Medicare, Medicaid and by most private health insurance.

18 If the patient is not covered by Medicare or any other health insurance, will hospice still provide care?

The first thing hospice will do is assist families in identifying their eligibility for coverage they may not be aware of.

19 Does hospice provide help to the family after the patient dies?

Hospice provides continuing contact and support for family and friends for at least one year following the death of a loved one. Most hospices also sponsor bereavement and support groups for anyone in the community who has experienced the death of a family member, friend or loved one.

20 If the patient is eligible for Medicare, will there be any additional expenses?

Medicare and insurance companies cover all services and supplies related to the terminal illness of the patient.



20 Questions About Hospice

*Proudly serving our
patients and their
families for 26 years*



These 20 commonly asked questions will help you navigate hospice, so that your family is equipped to make the best decisions.

1 When should a decision about entering a hospice program be made, and who should make it?

The earlier you call, the more we can do to help you. At any time during a life-limiting illness, it's appropriate to discuss all of the patient's care options, including hospice. As with all medical issues, the patient has complete control regarding the decision for his or her healthcare. Hospice staff members are always available to discuss decisions with the patient, family and physician.

2 Should I wait for our physician to raise the possibility of hospice or should I raise it first?

The patient and family should feel free to discuss hospice care at any time with their physician, other health care professionals, clergy or friends. A family member can ask their physician for a referral to hospice.

3 What if our physician doesn't know about hospice?

Most physicians know about hospice. If your physician wants more information, it is available from the American Academy of Hospice and Palliative Medicine, medical societies, state hospice organizations, local hospices or the National Hospice Helpline, 1-800-658-8898.

4 Can a hospice patient who shows signs of recovery be returned to regular treatment?

Certainly, if improvements in the patient's condition occurs and the disease seems to be in remission, the patient can be discharged from hospice and return to aggressive therapy or go on about his or her daily life.

5 What does the hospice admission process involve?

Once hospice is requested they will contact the patient's physician to make sure he/she is in agreement that hospice care is appropriate for the patient. Once the physician approves a referral, the paperwork process is simple. Community Healthcare of Texas staff will meet with you to complete admission forms. The hospice election form reads that the patient understands that the care is palliative (aimed at pain relief and symptom control) rather than curative and outlines the services available.

6 Is there any special equipment or changes I have to make in my home before hospice care begins?

Your hospice provider will assess your needs, recommend any necessary equipment and help make arrangements for delivery. Often the need for equipment is minimal at first and increases as the disease increases. When the patient no longer needs the equipment the hospice team will arrange for a return and pick up from their vendor.

7 How many family members or friends does it take to care for patients at home?

There's no set number. The hospice team will prepare an individual care plan. The plan will outline the amount of caregiving a patient needs. Hospice staff visits regularly and are always available to answer questions and provide support.

8 Should someone be with the patient at all times?

This depends on the physical limitations of the patient. Your hospice nurse will assess the needs and offer recommendations for specific levels of care.

9 How difficult is caring for a dying loved one at home?

It's never easy and sometimes can be quite difficult. At the end of a long, progressive illness, nights especially can be very long, lonely and scary. Hospice staff is available around the clock to consult with family and to make night visits if requested.

10 What specific assistance does hospice provide for home-based patients?

A team of physicians, nurses, social workers, counselors home health aides, clergy, therapists and volunteers make up the hospice team to care for patients and families. Hospice will also provide medications, supplies and equipment related to the diagnosis. Providence Hospice also provides inpatient care and respite care for the caregiver.

11 Does hospice do anything to make death come sooner?

No, hospice provides its presence and specialized knowledge during the dying process. Hospice's role is to provide comfort care and symptom management to support quality of life-not to hasten the end of life.

12 Is the home the only place hospice care can be delivered?

No. Although most hospice services are delivered in a personal residence, some patients live in assisted living facilities, nursing homes or hospice centers.

13 How does hospice manage pain?

Hospice doctors and nurses are up-to-date on the latest medications and devices for pain and symptom relief. Hospice believes that emotional and spiritual pain are just as real and in need of attention as physical pain, so it addresses these as well. Counselors (including clergy) are available to assist family members as well as patients.

