

"Some people know they could live longer with radiation or chemotherapy treatments," Curry said. "But many would rather live a shorter time at home than in the hospital. For them, the quality of life is more available for spiritual consultation, Curry said. Many patients already have strong religious beliefs and usually have thought about death quite a bit before they come under hospice care, she said.

In every case, the hospice staff strives to respect and accommodate individual religious beliefs.

"We even had one woman who was a practicing Buddhist," Curry said. "Every day she would have us light her altar. It was just part of the normal routine."

For other counseling needs, a medical social worker is available and visits patient homes regularly. Many times this person proves helpful in facilitating discussions between the patient and other family members, dealing with grief or facing conflicts or other issues that have not been resolved, Curry said. Follow-up counseling for family members after the patient dies is available from the hospice center, she said.

"We have a widow/widower support group and a cancer support group that meet regularly," Curry said. "It seems to help many people to be able to meet with others like them and share their experiences."

"We have a cancer support group that meets every Wednesday from 7 to 9 p.m.," she said. "Anyone who is dealing with cancer in their lives is invited to participate. We welcome students who have lost a friend or relative to drop by. We are always available to talk with people who are having problems with death and dying."

Another advantage of home health care is that it is relatively inexpensive, especially when compared to hospital costs.

"Hospice patients pay \$65 per visit as opposed to \$300 a day in the hospital for just a room," Curry said. "After doctor visits and other details are estimated, the cost is probably closer to \$500 a day in the hospital."

Since the McKenzie-Willamette hospice center receives federal funding, the program is able to pay for patient medicines and equipment that are covered by Medicaid, Curry said. "It's our goal to provide services to the patient and their family as cost effectively as possible," she said.

Howell agreed. "Medicare will pay for nursing visits, and insurance will cover 80 percent of the other costs for most of our patients. There are also other agencies and alternative billing procedures if people are very poor and find it difficult to pay. I want to stress that no one is refused care for lack of money," she said.

What kind of person is apt to choose hospice care?

"The patients are real varied," Curry said. "There is no typical hospice patient."

"Many of our patients are elderly," Howell said. "But cancer is striking more and more of the younger population, too. There has also been a tremendous increase in AIDS patients."

Sacred Heart is currently developing a new program just to deal with AIDS patients in

Signs and Symptoms of Approaching Death

- Respiration may become irregular and shallow with or without long pauses between respirations.
- Change in pulse rate.
- Oral secretions may occur with a "rattle" sound.
- Patient may become incoherent, confused, agitated and possibly comatose (unconscious).
- Lessened response to verbal communication.
- Cool or cold hands and feet.
- Hearing is the last of senses to leave a person. Talking and touching can soothe, reassure and assist patient in making the transition to death.
- Loss of bowel and bladder control may occur.

What To Do After Death Occurs

- Phone a friend, relative, Registered Nurse or volunteer.
- Notify mortician. (Arrangements should be made prior to death — speak with a nurse or volunteer).
- Notify doctor, if desired, otherwise a mortician will.
- Do not call police or sheriff's office.

the home, Howell said.

"These young patients dying have a different impact than the elderly," she said. "We look at caring for AIDS patients as a challenge and something we can do to really contribute to people and society. No matter how frightening a disease may be, you always have to remember that there's a human being there. AIDS patients especially suffer from isolation, and it's our goal to bridge that gap."

In addition to its regular staff, the hospice center trains volunteers to assist caregivers or provide certain patients with more care or time to talk.

"The role of the volunteer is flexible and varied," Curry said. "Often a caregiver will need several hours a week when they can get away to do shopping or run errands. The volunteer would stay with the patient to help with walking, feeding or just offer a listening ear."

Volunteers are an indispensable part of hospice care at Sacred Heart, Howell said.

"We are always looking for

people who are willing to do bereavement follow-up and visit people in their homes," Howell said. "We really depend on volunteers to help us provide those services."

Volunteers receive training in body mechanics, communication and counseling skills as well as information about finances, wills and funeral arrangements.

Continued on Page 14



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