



HEMLOCK SOCIETY OF SAN DIEGO

Questions to Ask when Selecting a Hospice

You have the right to choose the hospice you want; you do not have to accept referrals from hospitals.

Listen for concern, kindness and thoughtful responses.

Patient care

How will the hospice staff work with my loved ones and myself, and honor my wishes?

How are family caregivers provided the information and training they need to care for me at home?

If I decide to voluntarily stop eating and drinking as I near death, will hospice support family and I in that process?

-If yes, under what circumstances and how – will medications be provided to alleviate discomfort?

In the event that the usual doses of oral pain medications are not sufficient to relieve acute distress, is palliative sedation, or total sedation, an option to keep me comfortable until I die?

-If I elect palliative sedation, will that be done at home?

What will happen if care cannot be managed at home?

If I live in an authorized state for medical aid in dying, will hospice support me and my family in that process?

-Will the doctor for this hospice write a prescription for medical aid in dying?

-Will the hospice doctor act as a consulting doctor for the purpose of medical aid in dying?

-Will hospice staff mix the drugs if necessary?

-Will hospice staff be present with me when I ingest the medical aid in dying drug?

Will I be able to keep my own primary care doctor?

Primary care doctors may be difficult to get a hold of while they are seeing patients during the day and they may not be on call at night. This can potentially cause delays in care while nurses are waiting to get orders from your primary care doctor.

How will the hospice physician oversee my care and work with my doctor?

Do you have hospice volunteers? What services do they provide?

How quickly does your hospice respond to after-hours emergencies?

What is your weekend and night coverage? (There should be a nurse available by phone 24 hours a day, seven days a week.)

Are other resources, such as a chaplain or social worker, available after hours?

Family

Is relief for the caregiver (respite care) readily available?

Are loved ones told what to expect in the dying process and what happens after I die?

What bereavement and grief services are available for my family after I die?

How will you meet the spiritual and emotional needs of my family and I?

Health Care Settings Outside the Home

How does the hospice provide services for residents in different care settings?

Financial

What services/products will we have to pay for out of pocket?

Once you have selected a hospice:

You should receive a visit from a nurse and/or social worker for an intake interview. Friends or family who will be involved in your care should be present at this meeting.

If you become too weak or tired to pay attention, ask to have them return the next day. Remember, you are in charge of your care.

If you have a preference for a male or female nurse, let them know.

Try to let your caregivers know what you want. The better informed your hospice providers are about your unique concerns, the better able they will be able to meet your needs.

- Do you like to be kept informed?
- Are you uncomfortable discussing your feelings?
- Do you have any specific fears about pain or memories of difficult deaths that others have experienced?
- Are there family issues that are contributing to your stress?
- Ask questions to clarify anything that is unclear.
- If you are uncomfortable with any of the hospice staff, raise your concerns with the hospice director; ask if someone else can be assigned.

Discuss with your hospice nurse what should be done in the event of a medical problem like a fall or a suspected broken bone.

While under hospice care, make sure that everyone in the home knows not to call 911; always call hospice first. Hospice teams often provide sealed comfort care kits to be used on instruction from hospice should a patient's condition change suddenly.

You can always change to another hospice if you are not satisfied with your current hospice, but there will be paperwork to do.

Hospice will provide you with an out-of-hospital do-not-resuscitate order form (DNR and/or POLST/MOST). If emergency services are accidentally called to your home, these documents will inform them that they are not legally bound to perform CPR or resuscitation efforts.