

HOPE HOSPICE AND PALLIATIVE CARE
OPEN ACCESS

Fort Myers, Florida

Can statistics tell the story of a hospice? Not completely. But when the statistics are this spectacular, you get the idea. More than 54 percent of deaths (and more than 60 percent for those over 65 years old) in the Fort Myers service area are touched by Hope Hospice services. Compare that figure to the national average — 21 percent — and you begin to appreciate the extent to which Hope Hospice’s services are woven into the fabric of its community. Or, consider these numbers: 90 percent of Hope’s expenses go to direct patient care; and 96 percent of patients admitted to the hospice with pain report no pain within three days — testimony to Hope’s impressive work in pain management.

Clearly, Hope Hospice is getting it right. And one secret to Hope’s success has been a strategy, named Open Access, which makes services available to anyone who needs hospice care, regardless of ability to pay, age or diagnosis.

“It was a new way of thinking for us — a shift in focus,” says Samira Beckwith, president and CEO. “Our mission to provide care was already clear. Open Access helped us turn our attention to how to fit our services to people, rather than the reverse.”

The result has been a continually evolving range of patient- and family-centered initiatives that respond to community needs. Hope Hospice stays connected with the community by maintaining seven offices throughout its three-county area, where it brings services to homes, hospitals, and assisted living and nursing facilities. Hope has two Hospice Houses, and plans are underway for a third.

The Open Access culture has led Hope to create an intriguing variety of innovative services. In 2002, Hope



launched a videophone telehospice service and reached out to the retirement community by opening an on-campus hospice floor in a nursing home. To combat the misconception that hospice care is only for those dying of cancer, Hope developed special programs for people with cardiac disease, congestive heart failure, and COPD. These programs have helped educate health care providers about hospice benefits for their patients, and they have assured optimal care. Since these programs began, Hope’s non-cancer patient population has increased to 53 percent.

Hope Hospice explores new ways to bring comfort at the end of life, with art and music therapy and even specially-trained pets which provide warm and comforting companionship.

Hope also has programs that go beyond the traditional boundaries of hospice. Hope Life Care, for example, assists patients with chronic, life-limiting illnesses, whose conditions do not yet meet the requirements for hospice care. Pathways of Hope Counseling Center evolved in response to community requests for grief and loss counseling for issues not related to hospice.

Schools, businesses, law enforcement, health care professionals and other community organizations often call on the center for support and training.

Through Pathways, Hope also offers the innovative Victims of Crime program. Funded through a grant administered by Florida’s Attorney General, a victim advocate works with law enforcement agencies to provide counseling at accident and disaster scenes, helps deliver bad news to families of victims of crimes or accidents, and debriefs law-enforcement personnel who have been involved in emergencies. The program has assisted in hundreds of cases since its inception.

“These situations are some of the hardest jobs our officers have to face,” says Captain Eddie Johnson, of the Florida Highway Patrol. “We don’t have the training — we’re very uncomfortable when we have to notify next-of-kin or comfort victims at the scene. This service is of tremendous value.”

People often ask Samira Beckwith to explain why Hope Hospice offers such a wide scope of services. “It’s because we look at one person at a time,” she says. “When the person determines the plan, everything is possible.”



INNOVATION HIGHLIGHTS

STRONG CONNECTION AND RESPONSIVENESS TO COMMUNITY NEEDS

SERVICES FOR NON-HOSPICE PATIENTS, INCLUDING VICTIMS OF CRIME

PATIENT- AND FAMILY-DRIVEN PROGRAMS