HOPE HOSPICE & PALLIATIVE CARE

Fort Myers, Florida



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he butterfly, as a universal symbol of transformation and the life cycle, has been part of the image of Hope Hospice in southwest Florida for a long time. But its meaning went even deeper for hospice CEO Samira Beckwith after she heard the story of the yellow butterfly.

Two daughters brought their mother to the hospice for her final days, but were afraid to let her go. The mother's severe pain was quickly controlled and the daughters were able to make the most of her last week, which included watching the show of color and movement in the butterfly garden outside her hospice room. The mother promised them she would come back as a yellow butterfly to let them know everything was OK after she died. Soon after her death, the daughters attended a butterflyrelease memorial service in the garden and, as Beckwith watched, a yellow butterfly landed on one of the daughter's shoulders.

The moment was a reminder of how deeply a hospice can touch people's lives, something Hope Hospice seeks to do as widely and creatively as possible. Even though the organization already touches more than half of people who die in its service area, new programs are always under development.

For instance, the organization recently opened a hospice wing in the Shell Point Retirement Community. Its long-term care diversion program offers palliative home care services to elderly people not ready for hospice, and a new PACE program will help frail elderly to live in the community. Meanwhile, the Pathways of Hope program offers counseling to people who need help dealing with a diagnosis or families who need bereavement services.

"We need to be able to care for people in all settings," says Samira Beckwith, president and CEO of the Fort Myers-based organization. "The success in being able to meet the needs of people in our community is collaboration with other providers."

The hospice maintains many partnerships. One long-term partner has been Lee Memorial Hospital, which chose to maintain a close relationship with Hope Hospice rather than open its own hospice. Additionally, Hope Hospice offers care to a total of 3,800 patients each year through its own care centers as well as collaborations with 10 hospitals, 20 nursing homes, and 46 assisted living facilities.

Hope Hospice also reaches out to physicians with a team of four professional relations staff, each of whom speaks regularly with doctors in their offices, nursing homes, and hospitals, educating them about the modern concept of hospice and finding ways to help serve their patients. "Our constant reminder to physicians is that hospice is not about giving up, it's about going on," explains Julie Shera, community development officer. "There's an understanding that we may not be able to extend life for this patient, but we can enhance the quality of life." The professional relations staffers are so effective in keeping end-of-life care in the minds of local physicians that there's actually a small drop in referrals when one of the staff goes on vacation.

Another unique aspect of the hospice is a medication management system that relies both on collaborative practice and on an electronic database with evidencebased protocols. The system has been well received by physicians because it saves them time when patients' symptoms are better controlled. A study of the system by Hope Hospice and its partner, medication management company excelleRx of Philadelphia, found that 94 percent of physicians referring to Hope Hospice elect to use the collaborative practice system. It relies on evidence-based medication There's an understanding that we may not be able to extend life for this patient, but we can enhance the quality of life.

> management algorithms, carried out by a team of hospice nurses, pharmacists and the patient's doctor. "When the physician signs off, the nurse assesses the patient, passes that information to the pharmacist who documents the assessment and prepares a recommended care plan," explains Cal Knowlton, CEO and chairman of excelleRx. "We then do follow-up outcomes tracking. The physician receives a fax that delineates the care plan, and we tell them if they want to change anything to give us a call."

Overall, the hospice maintains an arms-wide-open philosophy both in terms of whom it serves and how they are treated. An "open access" policy offers care to people of all ages in southwest Florida who are touched by serious, life-limiting illness, regardless of their ability to pay. And the Collage of Comfort philosophy encompasses every aspect of the individual — body, mind, and spirit. "We just say 'yes' to taking care of the person," says Beckwith.

There's also an effort to extend that "yes" to patients earlier in the disease process. Hope Hospice's average length of stay in 2002 was 74 days as compared with Florida's 63 days and a national average of 25 days. That reflects an aggressive effort to begin end-of-life care for patients as early as possible. Hope Hospice's team of care coordinators works in area hospitals to help transition patients into hospice care.

The hospice also innovates internally with a host of ideas to improve care from the inside out. A process improvement team meets monthly to benchmark the organization with national and internal goals. Among their achievements has been a switch to an electronic system for charts that has freed care coordinators and professional relations staff from having to go into an office or hospital and manually copy patient information. The process also led to the introduction of laptop computers to clinical staff, allowing portability of the medical record to the bedside and immediate access to information about previous care.

The organization has established a world-class standards initiative to rank among the best in the entire service industry, benchmarking in customer service against such companies as Southwest Airlines. Hope Hospice also administers a college student residency and internship program in collaboration with Florida Gulf Coast University that results in a 12-unit end-of-life and palliative care certificate.

Ultimately, all the innovation in managing end-of-life care comes down to caring for individuals one-by-one. Hope Hospice nurses, Beckwith says, look at the patient and family and ask, "What can we do today to make a difference?" One day, for instance, a nurse brought in a cake to help a patient celebrate her birthday. The patient's daughter preserved on videotape the lovely, small celebration. When the patient died a few weeks later, the out-of-town family who hadn't been able to attend the birthday party all sat down and watched the tape, and were able to see her celebrate one last birthday. "It became such a healing focus for them," Beckwith says. "And all just because a nurse thought she would take a little cake out. You never know how a small thing will ripple out and affect people." •



INNOVATION HIGHLIGHTS

OPEN ACCESS FOR PALLIATIVE CARE

CREATIVE REACH OUT TO LONG-TERM CARE

EFFECTIVE PHYSICIAN RELATIONS STRATEGIES