



OTAGO COMMUNITY HOSPICE

PROGRAMME OF CARE



OTAGO COMMUNITY HOSPICE

293 North Road
PO Box 8002
Gardens
DUNEDIN

Telephone: (03) 473 6005

Facsimile : (03) 473 6015

E-mail: otagohospice@xtra.co.nz

www.otagohospice.co.nz

“In Comfort and With Dignity”



Otago Community Hospice is a Quality Health
Accredited Organisation

WELCOME TO



OTAGO COMMUNITY HOSPICE

Mission Statement

The Otago Community Hospice is a centre of excellence, providing high quality specialist hospice palliative care, at no cost to the patient and family, to the communities of Otago, through a highly trained, multi-disciplinary team of dedicated personnel.



All Hospice services are provided Free of Charge

Hospice Funding

The Hospice was founded in 1990 and is owned by the Otago Community Hospice Trust on behalf of the people of Otago. Funding comes partly from the Government, with the remainder being raised through donors, trusts and bequests, community groups.

All Hospice care and services are provided "Free of Charge" to all patients and families.

The Otago Community Hospice Trust is very grateful for any assistance given. This may be a bequest made through your Will, or donations, which are acceptable at any time and may be left at Hospice Reception.

Donations for "Butterflies" (the Hospice Op Shop) are also welcome. These may include good used clothing, jewellery, magazines and nic-nacs.

SBS Memorial Walkway—In September 2003, the Southland Building Society Memorial Walkway was officially opened. Memorial pavers are available to anyone who wishes to acknowledge loved ones who have passed away. To purchase an engraved paver an application form is available at Reception or telephoning the Hospice for an application form. Relatives or friends will need to fill in the form.



Acknowledgement and thanks to
Michele Newman (Photographer) for Hospice photographs

Otago Community Hospice has unfenced boundaries onto Lindsay Creek and North Road. Please be aware of associated hazards



HOSPICE SERVICES

Funny how you will plan every aspect of every trip except the most important one you'll ever take. When you embark on your end-of-life journey, how will you spend your precious time? Where will you stay along the way? Who will provide you with care and comfort? The goal of Hospice is to make sure your final journey is what you want it to be. As with all trips, information is the starting point.

Hospice Services

- Community Care Coordination
- Telephone consultation
- Outpatient clinics
- Family support
- Day respite
- Inpatient care
- Night nursing at home
- Rural outreach
- Education

Hospice Team

There may be many people from the Hospice team involved in your care, including palliative care specialists, doctors, nurses, family support staff, (including counselling, social work and spiritual care workers), physiotherapists, diversional therapists and support staff. The Hospice is also well supported by a fantastic team of volunteers who assist with cooking, cleaning, gardening and flowers, and driving to and from day respite.

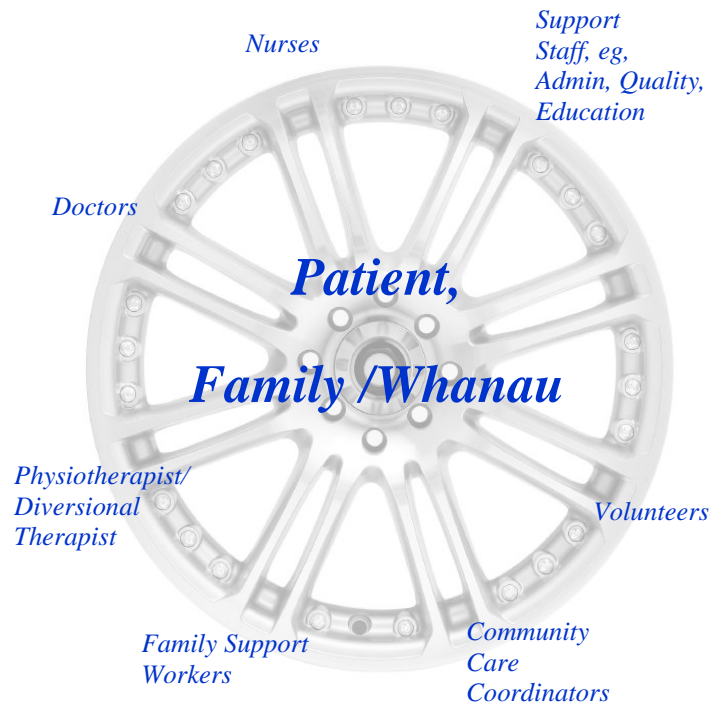
Close links are maintained with your GP, specialists and District Nurse involved in your care. They are welcome to visit at any time.

Hospice care is a partnership between you, your family and the Otago Community Hospice

THE SPECIALISED HOSPICE TEAM

HOSPICE CARE

IS A TEAM EFFORT



“Affirming life by offering specialist care for the terminally ill person and their family”

COPING WITH A TERMINAL ILLNESS

Compliments and Complaints

We welcome feedback about our services. Your comments enable us to identify what we do well and where we need to improve. If you wish to comment you may write to us or complete a comments brochure.

If you would like to access a copy of the Code of Health and Disability Services Consumers' Rights Regulations 1996, it is available at Reception.

Advocacy

Your local advocacy service and Health and Disability Commissioner can be reached by telephoning:

Auckland (09) 373 6060
Wellington (04) 494 7900
Dunedin 0800 1122 33 (TTY)



COPING WITH A TERMINAL ILLNESS

Organising Things at Home

Use a bed and/or chair of convenient height to enable the carer to manage from both sides, especially when a person is immobile. It should be placed for the best view and have adequate lighting, shade and ventilation. Put a bedside table within easy reach of the person with perhaps a bell, radio, telephone. Arrange for a commode and urinal in the room if necessary. Fresh flowers give a lot of pleasure to everyone. In homes of more than one level, it is more practical to nurse the person completely on one level.

The carer should also have a comfortable bed/chair in the room to use and an extra chair(s) for visitors should be available.

Equipment available for loan in the home includes: - equipment for the toilet and bathroom, special mattresses, sheepskins, chairs, syringe drivers, nebulisers, electric bed, wheelchairs and a mobility scooter. Ask the district nurse if required.

Food

At this stage, food is often not as important as we think it is. If food is not wanted, don't insist or make a fuss, but offer small portions of food on a small plate. Sometimes, a glass of dry white wine or sherry before a meal will help the appetite. Drinks can be made more nourishing with enriched milkshakes like "Complan". ("Ensure" or "Fortisip" may be available from your local Cancer Society at a reduced price). Eggs and fruit, eg, bananas, ice cream may also be added to drinks, giving added flavour and calories. The Cancer Society can loan a food blender if necessary. Be guided by the wishes of the person as to what and how much food to provide.

High-fibre foods, such as kiwifruit, can help with constipation. If diarrhoea is a problem, avoid fruit juices and bran; grated raw apple can be helpful. For those who have difficulty swallowing, suitable foods include purees, yoghurt, sweet or savoury custards (with eggs added for extra nourishment) and jellies made with fruit and gelatine. If friends and family want to help – providing a meal for the rest of the family can be very useful.

Please feel free to ask for advice.

HOSPICE CARE

Hospice Care

Hospice / Palliative Care is concerned with caring for the whole person, ie, physical, social, emotional and spiritual needs and their family / whanau.

Just because a disease is incurable, it doesn't mean there is no treatment. Each person is different, and because their needs may change with time, we consider it important to spend time discussing choices with you and discovering which option will suit you best.

Our main goal is to work with you and your family/whanau to help attain the best quality of life. Awareness that you or someone close to you has a terminal illness usually evokes strong emotions and it can be confusing at times. With the hospice team, there is time and assistance to help you and your family work through any problems you may have so you can make the most of precious time.

Admission to the hospice programme does not necessarily mean you will be admitted to the Inpatient Unit. Wherever possible, care is provided in your home within your local community. However, sometimes it is better to come in for a few days to sort out troublesome symptoms, or to give you and your family/whanau a break.

“We consider it important to spend time discussing choices with you and discovering which option will suit you best”

HOSPICE CARE

Community Care Coordination

The Community Care Coordinators provide an assessment, monitoring, support and advisory service for people, their family/whanau and health professionals. This occurs in the person's home and residential care settings. They are then the first point of contact following a referral and will arrange to meet with you, and your family, to discuss your needs and advise on the range of services available. Regular contact and follow-up is maintained and close working relationships exist with all these services involved in your care, including hospital specialists and general practitioners.

Telephone Consultation

Telephone advice is available from registered nurses 24 hours per day and medical staff during office hours.

Outpatient Clinics

Available for follow up appointments and to see new referrals as required.

Family Support

Trained support workers, (who are counsellors, social workers or chaplains) are available and on-call. They can help with advice, counselling, grief support and financial assistance.

Day Respite

Day Respite offers an activities-based programme and provides support and companionship for people on the Hospice programme on Wednesdays and Fridays. You can choose to participate in activities or sit and relax. A home-visiting activity programme is available on Mondays. Assistance with transport is available, if required. You can be collected and returned home by one of our volunteer drivers, take part in varied entertainment, have a relaxing day and enjoy an appetising midday meal.

COPING WITH A TERMINAL ILLNESS

Other Sources of Information

- General Practitioner
- Pharmacist
- Support organisations, eg, Cancer Society, Multiple Sclerosis Society, Heart Foundation
- Hospital Outpatients
- Hospital Doctors
- Work and Income New Zealand
- Your own Spiritual / Cultural Leader

Help at Home

- General Practitioner and Practice Nurse
- District Nurse
- Hospice Team
- Community Physiotherapists and Occupational Therapists.
- Support Organisations
- Home Help
- Meals On Wheels
- Nursing Care—Agency Nurse
- Friends, Neighbours
- Work and Income New Zealand

If you are not sure, please ask us.



“Working with you and your family towards shared goals ”

COPING WITH A TERMINAL ILLNESS

Time Management

- Pace yourself and organise your day.
- Reserve some private time.
- Reorganise telephone, ie, tell people when it is convenient to ring.
- Be open to changing your plans, depending on how you feel.
- Remember those who love and care for you will want to help.
- Do not feel you have to be able to do everything.

Therefore, work out what suits you and make it clear to others.

Visitors

- Visitors can be a joy and a strain. Do not be afraid to limit visitors, both in numbers and time.
- You may not feel like seeing everyone who wants to visit. Most people find they tire easily.
- Make sure there is some time in the day when you can rely on being undisturbed, eg, from 1.00-3.00pm. Ask people not to call or ring during that time or put a sign on your door.
- Ask people to ring before they come and check with you before they visit. Needs and energy vary from day to day.
- Use friends to share the load, eg, cook, wash, answer the telephone, shop, be at home so you can go out.

HOSPICE CARE

Inpatient Care

We recognise that most people prefer to stay at home as long as possible and we will do all we can to support you. Many people can be cared for entirely at home as outpatients, but sometimes, it is better to come in for a few days to sort out any problems or to give you and your family / whanau a break. Some people are admitted and go home many times.

The idea of being referred to or coming into the Hospice may be frightening and people sometimes put it off. Usually, when they do come, they wish they had come sooner. Problems like pain, nausea, constipation or anxiety are often relieved more quickly and easily when people are here, and usually only takes a few days.

We have twelve spacious single rooms which look out on to the gardens, with a sliding door to the patio. Each room has its own ensuite bathroom as well as a television, CD and DVD player and clock radio.

Night Nursing at Home

If you wish to stay at home during the final stages of your life, nurses are available to care for you in your home during the night.

Biography Service

A confidential service in which a volunteer biographer records your life story / memories to provide you and your family with a memorial transcript of your life. Please see any member of staff if you would like to use this service and they will organise it for you.

Rural Outreach

Otago Community Hospice Palliative care services are based in North, South and Central Otago.

SUGGESTIONS ...

Coping With a Terminal Illness

Everybody responds differently to a terminal illness. There is no 'best' way to cope—each person is unique and will manage in their own way.

Common responses include: -

- Finding your situation hard to believe
- Questioning
- Feeling angry
- Turning inwards away from family / friends
- Feeling low or hopeless
- Avoiding what is happening
- Accepting the situation at times but not at others
- Coming to terms with what is happening
- Tie up loose ends, eg, finalising your Will, communicating with friends and family – feeling there are things to be done.

You and your family / whanau may experience all or some of these feelings at various times. There may be times when you want someone to talk to about your feelings - please let us know if we can help.

Helpful Suggestions for Family and Friends

Listen attentively, without feeling you have to "fix" everything.

- Don't be surprised at needing to say things again and again.
- Be open—everyone copes in their own way. If you need to, don't be afraid to show your own feelings.

Tell the truth—try to be real and honest, answer questions if you can. If you don't know the answer, say so, and feel free to ask for help.

SUGGESTIONS ...

Ways For Family and Friends to Help

- Ask the person or family / whanau / carers what you can do to help
- Offer to do specific tasks, eg, washing, gardening, shopping, driving.
- Reading may be appreciated.
- Maybe, just quietly, be there.

Remember, independence is precious.

