



November is National Hospice Month

Hospice

It's about living, not dying

Le Sueur blazed the trail of hospice care in this area.

November is National Hospice Month, celebrating the work of English doctor Dame Cicely Saunders. In 1967 Dr. Saunders developed the first modern hospice, dedicated to meeting the physical, social, emotional and spiritual needs of terminal patients, their families and friends. Proof that sometimes big things can come from small cities - Le Sueur has blazed the trail of hospice care in this area - years before other communities.

Retired Le Sueur physician Jo E. Anderson first heard of hospice in the late 1970's and was intrigued by the practice of palliative care. Palliative care (pronounced pal-lee-uh-tiv) is specialized medical care for people with serious illnesses. It focuses on providing patients with relief from the symptoms, pain, and stresses of a serious illness—whatever the diagnosis. The goal is to improve quality of life for both the patient and the family.

“There is a considerable difference in hospice care costs and hospital care costs,” Anderson said. “Hospice care is cost-effective and beneficial to the patient.”

Dr. Anderson traveled to England to meet Dr. Saunders. She felt it was vital to control pain with regular morphine doses rather than use the drug to relieve pain. Anderson also received a Bush Fellowship which funds mid-career opportunities to study specific areas. In 1980 Anderson spent two weeks observing at Bethesda Hospital in St. Paul. Bethesda specializes in a comprehensive range of long-term acute care services for patients who have experienced a life-changing illness or injury.

“I found they were doing quite a good job,” Anderson said. “They would bring in musicians to play or sing for patients. Music therapy plays a big part in hospice.” After his research, Anderson knew there was a place for hospice in Le Sueur. “We had the where-with-all to get started,” he explained.

“We had doctors, a county nurse system, Meals on Wheels to provide nutrition, a strong and active ministerial association, and a local pharmacy.”

The biggest piece in the Le Sueur Hospice puzzle was provided by the U.S. Congress in 1982 when the Tax Equity and Fiscal Responsibility Act was passed. It created the Medicare hospice benefit for eligible beneficiaries under Medicare Part A.

This act made hospice care possible for all - regardless of personal wealth. It was also in 1982 Le Sueur Hospice was born.

“As with all things where the government becomes involved in programs,” Anderson lamented, “there were a number of mandated rules and regulations for hospice care.”

All hospices participating in the Medicare program needed to be certified and meet a certain level of staffing. Medicare requires at least 5 percent of direct patient care to involve volunteers. There is an extensive volunteer training program for new volunteers. It is important that everyone working with hospice clients feel comfortable and knowledgeable in their role.

“Not only do the volunteers help with the social needs of patients,” Anderson explained, “They also provide relief to the care givers. They can wear down real fast.”

When government-mandated record keeping became too burdensome, Le Sueur Hospice joined the hospice program of Immanuel-St. Joseph Hospital in Mankato which is now Mayo Health System Hospice.

“Mankato took over bookkeeping and compliance,” Anderson said, “but they do not dictate patients. Le Sueur patients are being treated very well. Most are being treated at their home, but there is a room available at the (Minnesota Valley Health Center) hospital for respite stays and acute admissions.”

Patients also reside in area nursing homes. Wherever a patient calls home is where hospice is able to see them.

Next week, learn more about Le Sueur Hospice. If you or someone you know might benefit from Hospice services, please contact Mayo Health System Hospice at (507) 385-2618; or toll-free, 1-800-321-2721 (extension 2618).