THA Group Celebrates National Home Care and Hospice Month

Traditionally, November is the month when we set aside time to give thanks for our many blessings. In this month of Thanksgiving, I want to pay special tribute to all of you – Independent Life At Home, Island Hospice, Island Healthcare, Ideal Aging and THA Services employees – you all do your part to provide health and well being to our patients and their families.

The National Association for Home Care and Hospice (NAHC) has designated November as National Home Care and Hospice Month to honor home health care workers across the country. I want to join NAHC in recognizing each and every one of you for all that you do to enrich the lives of our clients and their families. Your commitment, talent and dedication enable our clients to live life to the fullest while remaining where they want to be – at home.

As the baby boomer generation ages, we are witnessing dramatic changes in the way people choose to manage their health. In increasing numbers, individuals are opting for strategies that allow them to remain in their own homes. As Val Halamandaris, President of NAHC, said, “Home care nurses, therapists and aides are the troops in the last great civil rights battle of our time, to guarantee people the right to get the care they need at home. The present health care system is geared toward acute care when what is needed is more coverage of chronic disease. What home care and hospice offers patients is great care that preserves their dignity in the comfort of their own homes.”

In spite of the fact that home health is a proven, effective solution for long-term care, not only for this country’s growing elderly population but also for others with chronic health conditions, home care and hospice continue to face challenges due to health care reform and the economic climate. As always, our strategy for success involves a combination of Innovation in Health Delivery Models, Intelligent Application of Leading-edge Technology, and Assembly of the Best Patient-Centered Teams.

The last part of this equation is the most important: Our people. The most advanced health delivery models combined with the latest and greatest in technology amount to nothing without committed, dedicated health care professionals like you. Through your efforts, we will continue to offer quality in-home services to our region’s most vulnerable citizens. And, while we will continue to face great challenges in the next few years, I am confident that we will continue to grow. Why? Because I believe in the Value of what we provide: Health and Well Being, For Life. At Home.

I am thankful for you. May God bless and keep you always.

Happy Thanksgiving.

Ellen
Private Duty Home Care Plays Essential Role—Washington, D.C.

There is never a good time to get sick and need help, but when you do there is an entire industry ready to help patients get back on their feet again—all in the comfort of their own homes. During National Home Care & Hospice month this November, the National Association for Home Care & Hospice (NAHC) and its affiliate Private Duty Home Care Association (PDHCA) are shining a light on the benefits of home care and hospice and the golden opportunity ahead to increase access to in-home care.

The theme for this year is “The Right Care at the Right Place at the Right Time.” There is a critical missing link in national health care policy since Medicare is designed to cover acute-care costs—not long term-care costs. So whether the patient is discharged from a hospital or just needs support to stay home, private duty home care is there with skilled care and personal care support. The cost for private duty care ends up being paid by the family, unless the patient qualifies for veteran’s benefits or Medicaid.

Research conducted by AARP shows that nearly 90 percent of seniors wish to remain in their own homes as they age, otherwise known as “aging in place.” Living independently, under their own rules, is seniors’ key reason for staying at home. And even as they need day-to-day assistance or ongoing health care, close to 90 percent would prefer to receive that care at home. This is where private duty care can step in and provide non-skilled services such as aid in bathing, dressing and grooming; medication compliance; nutrition and dietary compliance management; exercise and therapy reinforcement; light housekeeping and laundry.

“Private duty home care can give patients that extra set of hands to cope with the tolls of aging and chronic disease,” said Shelle Womble, PDHCA Chairman. “Health consumerism will lead to a greater demand for these services in the future.”

For more information on November as National Home Care and Hospice Month, and Home Care Aide Week (November 11-17, 2012), visit www.nahc.org.

Industrial News

Interested in $500 FREE Money?

Talent Management has an Employee Referral Program! You can earn cash when someone you refer joins THA Group. We’re always looking for highly skilled, customer-focused people to join our team. If you know a friend, a former colleague or even a family member who has what it takes, contact Talent Management and start getting cash for your connections!

All active employees are eligible to receive the referral. We have two different programs:

Caregiver or PRN Employee: $50 gift card awarded after your referral works 90 days

Regular Full or Part-Time Employee: $500 reward awarded in 2 payments. $250 after referral works 90 days $250 after referral works 180 days.

Guidelines:

- You may submit more than one candidate for an open position. You may also submit the same candidate for multiple positions. A separate referral form and resume/application must be submitted for each open position and candidate.
- Candidates already under consideration for an open position are ineligible for the program at that time.
- You may not refer a regular or temporary employee as a candidate for an open position.
- Talent Management will make the final determination on your eligibility for a referral award.

Access the easy to complete form on the THA Group server: G:\Approved Forms\Talent Management\employee_referral_form.doc.
TALENT MANAGEMENT

Open Enrollment Updates
Open enrollment meetings are actively occurring in both Georgia and South Carolina. A lot of information is being reviewed and Talent Management asks you to remember this is your one chance a year to make changes to your current insurance coverage without a family status change.

The following are some commonly asked questions to review:

- What changes can you make?
  - Health, vision, and dental plan changes
  - Enroll or delete dependents from your health, vision, or dental plan
  - Enroll adult dependents, consistent with the Patient Protection and Affordable Care Act
  - Cancel your coverage for health plan with proof of other coverage or cancel dental or vision plan
  - Enroll in a Flexible Spending Account
  - Change your short-term disability and voluntary life insurance coverage

Remember that you MUST turn in your paperwork to Talent Management by December 14TH!
Thank you for your cooperation!

BIRTHDAYS

November
4th Minnie Smalls
8th Tamika Bigham
10th Kathy Johnson
11th Carolyn Bigelow / Zinobia Clark
12th Subundi Moultrie
14th SandiGriffin
15th Allana Jones
16th Francine Robin
17th Vicki Mohr / Mary Richards
20th Elizabeth Horton / Delores Myers
23rd Stuart Fife
24th Monica Hatcher / Ashley Arkwright
25th Sally Pike

December
Jennie Murphy
2nd Charlene Davis
3rd George Hiers / Brittany Johnson
4th Latoyia Neal
5th Laurie Rodgers
6th Lisa Holmes
12th Latrina Smalls
13th Angelena Rhett
15th Marilyn Hitt / Teresa Hargrow
16th Lavern Young
17th Alison Berkeyheiser
19th Cynthia Heywood
22nd Wanda Edwards
26th Lisa Covino
28th Betsy Kane / Lonnie Johnson
30th Owen Tucker
31st Lisa Mavromichalis

HOLIDAYS & EVENTS

If you have a news item you would like to see in a future issue contact Amy Fraser at afraser@thagroup.org

November:
Thanksgiving (office closed): November 22nd
National Home Care & Hospice Month
National Family Caregivers Month

December:
World Aids Day: December 1st
Hanukkah Begins: December 8th
Christmas Day (office closed): December 25th
New Year’s Eve: December 31st
Why People Are Afraid of Hospice

THA Group prides itself on providing an exceptional hospice experience for patients and their families in the area. While our patients understand and value what we are able to offer, we often need to educate society about the worthy benefits hospice can bring to loved ones.

Sadly, many who qualify for hospice care do not understand how to obtain the service or even what it can truly offer. THA Group thinks of hospice as a different type of care, not a place, which is why we are proud to provide our hospice services in our patients’ homes and not in a hospice building.

We explain it as comfort care for people who are expected to die within six months or less. This prognosis is determined by a physician and a specialized team of social workers, nurses, doctors, spiritual care providers, and holistic therapists work together to help the patient and family determine the best plan of care. Many benefits can be found for people who need end-of-life care through hospice. Most people would like to die at home and hospice professionals work hard to honor their requests.

Mary Fessenden, a hospice professional, shares her experience working with many patients and families who have fears about hospice and what it entails. She shares that after their loved one had passed, family members realize what a blessing hospice would have been had they enrolled in it sooner. Mary also shares some of the reasons people are afraid of hospice:

Lack of communication with their doctor: Some physicians still have a hard time talking to patients about the end of life. Alexander Smith, a palliative care physician at the University of California, San Francisco states in Scientific American, "Many clinicians are afraid to talk about prognosis—how long a patient may have to live. Talking about death in America is forbidden, a taboo topic" (Fessenden, 2012). "Therefore, when the doctor writes a referral to hospice, some patients and family members are shocked. As a hospice nurse, I sometimes get told by patients and families that I am the first person who has brought up the topic of hospice with them. It is my job as a hospice professional to answer all of their questions and alleviate any concerns they have."

Fear of being given too much pain medication: Patients and families sometimes worry that while under hospice care, the patient will be given too much pain medication and will become sedated. Patients and their families want to be able to communicate with each other for as long as possible. As hospice professionals, we educate patients and families on the use of pain and other comfort medications. When a patient is having pain, we ask them if they would like some pain medication. If they say yes, we ask them to state their level of pain on a scale of 1-10 (10 being the worst) and treat accordingly. We titrate the medication based on the patient’s needs and desires. When a patient has less pain, they are able to enjoy the time they have left with their loved ones.

Concerns about their loved ones not getting enough nutrition: When a patient is alert and requests food and drink, they can have whatever they want. We encourage patients to eat their favorite foods and enjoy life. When a patient is imminently dying, they lose their ability to swallow. They also lose their appetite and their body is not able to absorb nutrients or tolerate fluids. This is a natural part of the dying process. It is hard for some families to understand this. Some wonder why we discourage feeding tubes at this stage. Letting the families know that a feeding tube would cause their loved one more discomfort (increased swelling, increased congestion, shortness of breath) is crucial to alleviating fears regarding the issue of nutrition.

Hospice is about having quality of life for however long or short that is. Many people don’t take advantage of all the benefits hospice has to offer. Increased education and communication between patients and healthcare professionals is necessary to lessen the anxiety on death and dying.

Resource