frequently asked questions



February 2017

End of Life Care and Community Hospice Beds

Working together, Island Health clinical leaders, physician groups and community hospice societies are committed to enhancing the quality of living for patients who are dying and the supports available for their families.

In order to keep residents in our service area informed about current and future planned End of Life services for clients and their families, Island Health has developed this Frequently Asked Questions (FAQ) document. This FAQ is based on inquiries from community members, including patients, families, facility staff, service and social clubs, elected officials and donors. The FAQ is updated as new questions arise and as new information becomes available.

We welcome your questions! Please email your questions to Jill.Gerke@viha.ca

How is care in a community hospice bed different than being in the hospital?

When admitted to hospital, palliative care patients generally have more complex medical and care needs (e.g. requiring investigations, shifting plans of care, and medications administered intravenously). Their needs require daily Physician or Nurse practitioner care and team members such as respiratory, Physical and occupational therapy in addition to 24 nursing care.

Patients admitted to community based hospice beds also need 24 hour nursing care, but their goals of care in their last weeks of life do not require access to the type of services, investigations and interventions provided in hospital.

Is there an age restriction on access to the beds given?

Access to hospice beds will be for those individuals over the age of 19 (exceptions for younger individuals will be made on an individual basis). Access will be determined based on the patient's care needs and the clinical admission profile. Yes, the cost of a community hospice bed is determined provincially. The rate is the equivalent of what would be charged for short-term respite care, which is \$36/per day effective January 1, 2017.

If a family or patient is experiencing financial hardship what happens?

There is a fee waiver/reduction process available for clients who may not be able to afford the full rate. For more information about the fee waiver/reduction process, please talk to your nurse.



What is the difference between the services funded and provided by Island Health in residential care facilities and those funded and delivered by hospice societies?

The funding and delivery of services for residential hospice beds is a partnership between the Government of BC/Island Health, residential care service providers and community hospice societies. Regardless of who funds or delivers a service, the aim of everyone who provides care is to make sure the care, services and supports are seamless to patients and their families. Broadly, Island Health will provide annual ongoing operational funding (including for additional staffing), and the clinical expertise and processes to support palliative patients. Hospice societies will be providing clinical and non-clinical supports and the associated funding for these supports to clients and family members. This includes bereavement support and counselling pre- and post-death, caregiver support and education and training to volunteers to support clients and their families.

Will funding from Island Health help support care for family caregivers?

The funding that Island Health is providing to double the number of hospice beds by 2020 to 64 beds is assigned for operating costs related to providing care for patients accessing these beds. Island Health works in partnership with community agencies such as community hospice societies that provide services that support family caregivers.

Are the new and planned hospice beds in addition to current complex care (or residential care) beds?

Yes, the new and planned community-based hospice beds are in addition to the current number of complex (residential) care beds in each community.

How is Island Health collaborating with community hospice societies in the development of these community- based hospice beds?

Representatives from community hospice societies are active members of working groups and committees designing the processes and services which will support the community-based hospice beds, which will be located in a defined and common space in a residential care facility.

Can End of Life beds be used for more than palliative purposes? (e.g. transition from acute care, dementia respite).

Community- based hospice beds located in residential care settings are intended for hospice care only.

Is Island Health still committed to supporting local community hospices?

Absolutely, we see local hospice societies as integral partners in supporting and delivering the range of services and supports associated with a comprehensive end of life program. It is our expectation that the re-aligned structure in Island Health will further facilitate and support local working relationships.

The Province made a commitment to significantly expand the number of hospice beds in the province. How does that affect Island Health?

Island Health's plan to add new hospice beds in our service area aligns with the Province's plans to expand and enhance hospice care.

