

A Division of Agape Healthcare

A DENVER COMPANY

Personalized care in a spirit of unconditional love



AGAPE |ä-'gä-pā|

Unselfish love of one person for another. Unconditional love.



HERE FOR YOU AND YOUR FAMILY

At Agape, we provide a special kind of care for people with life-limiting illness . . .

Care that alleviates pain and discomfort.

Care that respects each patient's wishes and values.

Family-centered care that allows people to focus on what's most important: friends, family and the gifts of life.

"The care is such complete care. Here at the house, it's not an atmosphere of illness. I don't feel like I'm dying. Life is going on."

AGAPE PATIENT

HOSPICE: FROM THE LATIN HOSPITUM, MEANING "GUESTHOUSE."

The word hospice can be intimidating. People may equate hospice with giving up, turning away from medical care, or even hastening death.

Enrolling in hospice care does mean acknowledging that most diseases in their advanced stages cannot be cured. It does not, however, mean the end of quality medical care or giving up hope.

Hospice is not a place, but a philosophy of care. At its center is the belief that every person has the right to live the last phase of life free of pain and distress on his or her own terms.

The goal of hospice isn't to lengthen or shorten life, but to improve each patient's quality of life. To put more life in a patient's days.







HOW AGAPE HELPS

The Agape hospice team is made up of physicians who are board certified in hospice and palliative medicine, registered nurses, certified nursing assistants, social workers, chaplains and volunteers. They provide care and support through:

PAIN & SYMPTOM MANAGEMENT

Living with pain or distressing symptoms prevents people from fully participating in their lives. At Agape, our specially trained medical team takes a person's pain and symptoms very seriously.

Agape physicians and nurses are expert at knowing how to address pain, discomfort and conditions (such as anxiety, sleeplessness, depression and nausea) so patients can feel better as quickly as possible.

The goal? Helping patients feel comfortable and alert every hour of every day.

EMOTIONAL & SPIRITUAL SUPPORT

People nearing the end of life often experience enormous emotional and spiritual distress. They may fear suffering, dying or how their families will manage without them. Agape social workers, chaplains and volunteers support patients and families through counseling, practical help and spiritual support. Remember, the goal of the hospice care team is never to intrude, direct or convert any patient or family to a specific faith.

Instead, hospice social workers, chaplains and volunteers are specially trained and experienced at providing support, encouragement and help with respect for each family's values and wishes.

WHO CAN BENEFIT FROM HOSPICE CARE?

Hospice care is for anyone with a potentially limited life expectancy. A patient's eligibility for hospice is determined by a consultation between the patient and his or her physician.

Hospice care isn't just for cancer patients. It's for anyone, of any age, with a life-limiting illness (such as heart disease, kidney disease, dementia, lung disease and other chronic conditions).

"If a person is in pain, nothing else can really be accomplished. That is, they can't interact effectively with their families. They can't accomplish important goals to them. Very often they can't even get out of bed in the morning, because the pain is draining all their strength and energy."

DR. DIANE MEIR
DIRECTOR OF THE CENTER TO ADVANCE
PALLIATIVE CARE*

WHAT CAN I EXPECT?

The first step is a meeting between the patient, family and the Agape admissions nurse and social worker. The admissions team takes time to ask questions, provide information and to listen. They help families understand the hospice benefit and complete paperwork.

Agape will also get in touch with the patient's physician to establish communication and request any needed paperwork or information.

PLAN OF CARE: The hospice care team, along with the patient, family and the patient's physician, work together to create a detailed individual care plan. This plan addresses pain management, symptom control and other key issues. Once the plan is established, the hospice team begins providing medical care as well as social, emotional and spiritual support. The team meets regularly and adjusts medication, equipment and care as needed.

Different levels of care are available as patients' needs change:

ROUTINE HOME CARE: Can be provided at home, a care center or setting of your choice through regular visits from members of the hospice care team.

GENERAL INPATIENT CARE: When a person enrolled in hospice receives care in a hospital or other facility which cannot be managed at home.

RESPITE CARE: When family caregivers need a rest from their caregiving responsibilities, patients can stay in a hospital or other inpatient care center for up to five days.

CONTINUOUS CARE: Sometimes a patient has a medical crisis that needs close attention. When this happens, our staff can provide care at a patient's home or arrange for inpatient care. When the crisis is over, the patient can return to routine care in the home.

HOW OFTEN IS CARE PROVIDED?

A member of the hospice team will visit the patient as often as needed to ensure comfort. The care team is available to support families, providing tools, resources, and education. They will care for the patient's medical needs, answer questions the family and caregivers might have and recommend additional services as needed.

Additionally, hospice provides:

Medications
Medical Equipment
Supplies needed to promote comfort.

WHERE IS CARE PROVIDED?

Care is provided wherever a patient calls home: a personal residence, in-patient facility, assisted living or skilled nursing home. Care provided in an in-patient facility is in addition to the patient's standard nursing care.





ONE OF THE MOST
FREQUENT THINGS
WE HEAR FROM
PATIENTS AND
FAMILIES AFTER
THEY HAVE SETTLED
INTO HOSPICE IS
THAT THEY WISH
THEY HAD BECOME
INVOLVED SOONER.

WHO PAYS FOR HOSPICE CARE?

Almost all hospice benefits are paid by Medicare/Medicaid, while private insurance typically picks up the rest. Also, the hospice benefit isn't tied to a six-month time period. Medicare and most other insurers will continue to pay for hospice care as long as a physician certifies that the patient continues to have a limited life expectancy. Please know: Agape refuses no patient based on inability to pay.

WHAT IF MY CONDITION IMPROVES?

There is no penalty for getting better! When symptoms are well managed and patients are receiving help and support, their overall condition may improve.

In this case, a patient can be transferred to Agape palliative care. This medical specialty helps anyone with a chronic or serious illness achieve

"The nurses were excellent. They felt like family to us and I thank God for them every day."

FAMILY MEMBER

the highest possible quality of life. If patients become eligible for hospice in the future, they can re-enroll.

HOPE IN THE LAST SEASON

At Agape, we acknowledge that facing the last chapter of life is fundamentally difficult. It is our goal to help people live whatever time they have as well as possible on their own terms.

Accessing hospice care doesn't mean giving up control or hope. When patients are well caredfor, they have the opportunity to invest their hope in different goals other than cure.

With support provided by the hospice team, family members have time to focus on their lives with one another.

When the time comes, don't be afraid to use the hospice benefit. Every person deserves the best possible care and support as they live out their days, for whatever time remains.

AGAPE BEREAVEMENT

COMPASSIONATE SUPPORT FOR FAMILIES

Our relationship with the family continues after a patient's death through Agape's bereavement services. During this period of grief, bereavement staff provides counseling, support groups and resources when needed. These services are part of the hospice benefit and provided at no additional cost.



WHY AGAPE?

Agape has provided care and support to many thousands of families in our Front Range community. We provide the highest level of expertise and care for patients and families as they navigate this complex time of life. Our staff is not only expert in their field, but they are passionate about the work they do.

We care for people from all backgrounds and walks of life with equal respect and compassion.

Agape serves all areas of the Denver Front Range. We are here when you need us, wherever you call home.

To make a referral or talk with an Agape professional, call:

877.771.1231 Toll Free 720.482.1988 Denver 720.482.1990 Fax



WHEN IS THE RIGHT TIME FOR HOSPICE CARE?

This checklist can help determine if a person may be eligible for the hospice benefit.

HAVE YOU OR YOUR LOVED ONE . . .

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Been hospitalized or to the ER room several times in the past six months?		
Been making more frequent phone calls to your physicians?		
Started taking medication to lessen physical pain?		
Started spending most of the day in a chair or bed?		
Fallen several times over the past six months?		
Started needing help from others with:		
Bathing		
Dressing		
Eating		
Cooking		
Getting out of bed		
Walking		
Started feeling weaker or more tired?		
Experienced weight loss so that clothes are noticeably looser?		
Noticed a shortness of breath, even while resting?		
Been told by a doctor that life expectancy is limited?		

If you answered "yes" to four or more of these questions, then you or your loved one could be eligible for hospice. Anyone with a life-limiting illness may be eligible for this benefit—and it's a benefit that can bring comfort, support, and relief to the patient and the entire household.

CARING FOR OUR COMMUNITY, BECAUSE EVERY DAY COUNTS.



At Agape, we will always:

Provide superior hospice and palliative care to guarantee that our patients experience the greatest level of comfort possible.

Help patients and families review all choices for comfort and define their own goals for care.

Admit patients as quickly as possible based on physician's orders and patient and family permission – usually within two hours.

Provide ongoing support and education for patients and families, caregivers and other healthcare professionals.

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