Understanding the Role of Clergy in the Referral Process

Common understanding is that the family physician will initiate a referral for hospice care. However, the family physician may be the last one to want to give a referral. Like all human beings, physicians hold a wide variety of beliefs. While some believe that a person should fight for every moment of life, others believe that quality of life may outweigh the length of life. He or she may hold deep attachments to the patient and not be able or willing to see the extent of the physical decline.

At times, the person you care for may not have a family physician or be reluctant to be treated by a physician. In such circumstances, clergy may bring a compassionate voice to those in their charge.

Referring a person in a skilled nursing facility or hospital

**Skilled Facility**
The social worker in a skilled facility is an important contact for starting the referral process. They will be able to assist family members with understanding their insurance options and possible billing changes. They may also be instrumental in speaking with the physician regarding the family’s wishes regarding end-of-life care. The social worker will also be able to provide information on which hospice program(s) are available at the facility. Hospice services are provided by contract with outside programs. As such, not all programs in an area may be available within a particular skilled nursing facility.

**Hospital**
Each hospital patient is assigned a social worker or case manager at the time of admission. This is the key contact person for initiating a hospice referral. This person will have information regarding skilled nursing care, home care and hospice programs. They will also work with the chosen hospice program to arrange continuity of care if the individual is being discharged and returning to a private residence. They may also be able to provide information on living wills, power of attorney documents and out-of-hospital Do Not Resuscitate/Do Not Intubate orders.

Referring a person at home

**Private Home**
It is those in their private residence who may need the assistance of clergy the most. These individuals may not have family in the area, be uncertain as to their rights, be afraid of physicians or placement in a
long-term care facility, or not have a regular family physician. To these individuals, clergy may offer the greatest aid by listening to their fears and concerns, offering sound advice on end-of-life issues and providing accurate information regarding hospice services.

Clergy support is vital for those who may learn of inoperable cancers or have decided to discontinue life-sustaining treatments such as dialysis, chemotherapy and radiation therapy. Referrals in these instances may begin by contacting the family physician with the family to request a referral. A referral may also be called directly to a hospice agency which will in turn contact the family physician to ask if a referral is appropriate.

When is it Time to Refer?

- Frequent hospitalizations in the past six months
- Repeat or multiple infections
- Increased or uncontrollable pain
- Progressive or profound weakness and/or fatigue
- Shortness of breath
- Difficulty swallowing
- Unplanned or continued weight loss
- Change in mental status
- Uncontrolled nausea and/or vomiting
- Other uncontrollable symptoms
- Progressive decline in health despite undergoing treatment
- Life expectancy of six months or less

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