



Choosing a Hospice: 18 Questions to Ask

While death is not an option for us, we have choices about the services we use at the end of life. Hospice is undoubtedly the best option in the last months of life because it offers a whole variety of benefits, not only to those of us who are dying but also to those we leave behind. **How do you find the most appropriate hospice?** Here are tips for choosing, and answers to these questions will give you clues about the hospice's quality of care to help you make an informed assessment.

1. **What do others say about this hospice?** Get references from people you know and from people in the field – e.g., local hospitals, nursing homes, and clinicians. Ask anyone that you have connections to if they have had experience with the hospice and what their impressions are. Geriatric care managers can be an excellent resource, as they often make referrals to hospices and hear from families about the care provided. Anecdotes and word of mouth won't paint a complete picture, but they are still valuable data points.
2. **How long has the hospice been in operation?** If it has been around for a while, that's an indication of stability.
3. **Is the hospice Medicare-certified?** Medicare certification is essential if the patient is a Medicare beneficiary to permit reimbursement.
4. **Is the hospice accredited and, if required, state-licensed?** Accreditation (JCAHO or CHAP) is not required, and not having it doesn't mean a hospice isn't good, but if the hospice has it, then you know a third party has looked at the hospice's operations and determined they come up to a reasonable standard of care.
5. **What is the expectation about the family's role in caregiving?** See if what the hospice expects from family members is consistent with what the family is able to do.
6. **Are there limits on treatment currently being received?** Is there anything now being done for the patient that a hospice under consideration would not be able to do?
7. **Can the hospice meet your specific needs?** Mention any concerns the family or patient has about care and ask the hospice staff how they will address them.
8. **Does the hospice offer extra services beyond those required?** Some services fall in a gray area. Medicare does not require them but may help improve a patient's comfort. An example is radiation and chemotherapy for a cancer patient to reduce the size of a tumor and ameliorate pain. Some hospices would not be able to afford to do this, but others with deeper pockets could.
9. **How many patients can you handle at one time?**
10. **How do you determine which cases you won't accept?**

11. **How rapid is the crisis response?** If the family needs someone to come to the home at 3 AM on a Saturday, where would that person come from? How long would a nurse take to get there? What is their average response time?
12. **What are the options for inpatient care?** Patients being cared for at home may need to go to an inpatient unit to manage complicated symptoms or to give their family respite. Facilities can vary from the hospice having its own private inpatient unit to leased beds in a hospital or nursing home. Visit the facilities to ensure they are conveniently located, and you are comfortable with what they offer.
13. **If the family caregiver gets exhausted, can we get respite care?** Caring for someone with a serious illness can be exhausting and sometimes challenging. In addition to home hospice care and inpatient care when symptoms prove unmanageable at home, hospices also offer “respite” care (periodic breaks for the caregiver of up to 5 days during which the patient is moved to an inpatient bed) and “continuous” nursing care at home for brief periods at the patient’s home when family caregivers are unable to manage on their own. Ask the hospice under what conditions the hospice provides these types of care.
14. **Are their MDs/RNs certified in palliative care?** Not having it doesn’t mean the staff is not competent, as experience counts for a lot, but having this credential indicates specialized study in palliative medicine/nursing.
15. **How are patient/family concerns handled?** Is there a straightforward process for sharing concerns with appropriate hospice staff and ensuring they are addressed, including a method for escalation if the concern is not adequately addressed at lower levels?
16. **How does the hospice measure and track quality?** You are not looking for a lot of technical detail, just a response that indicates the hospice evaluates its own performance to improve it.
17. **What are your general impressions at initial contact?** What is your reaction to the people you talk to?
18. **What kind of bereavement services does the hospice offer?** Types of grief support can vary widely and may include individual counseling, support groups, educational materials, and outreach letters.

An important tool in selecting a hospice is Medicare’s COMPARE:

<https://www.medicare.gov/hospicecompare/>

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