

## Staff Training Checklist for Hospice Care

Woodhaven is committed to providing lifelong services to the individuals we support, including end of life services for those with a terminal condition when it is within our ability to safely support them. The individual that you support will begin receiving Hospice services. Hospice recognizes that death is the natural conclusion of life and that their overall goal is to control pain, and allow the person supported to die with dignity in their own home. Hospice staff also help family, roommates and staff of the individual supported work through the grieving process. They are an excellent resource.

However, Woodhaven is funded by the Department of Mental Health and our contract requires us to do things differently than a person might do if they were not living in residential placement. It is important that you understand the requirements and help remind Hospice staff when they are present in the home. These rules were not put in place to create barriers, but as a protection for individuals with disabilities who historically did not always receive adequate care from the medical community.

Please initial each area below:

\_\_\_\_ I understand that Woodhaven's contract with the Department of Mental Health prohibits Woodhaven from withholding or withdrawing food, hydration, **antibiotics**, anti-seizure or psychotropic medications while receiving services in a DMH setting. **If the individual or guardian would request a staff to do this, you would be required to notify your supervisor immediately.**

\_\_\_\_\_ I understand that I cannot give any medication unless I have a written order. I can take a verbal order from a Hospice nurse **if it is documented on a verbal order form**. I must notify the Home Coordinator and the HC will ensure that the agency receives a written order from the physician within seven days.

\_\_\_\_\_ I understand that I cannot implement any order that has a range of dose. (i.e. an order that says 1-2 tabs). I am required to have a specific dose before I administer a medication. Nor can I implement any order that has a range of time (i.e. 4-6 hours).

\_\_\_\_\_ I understand I cannot implement any order where the route of medication has changed (i.e. changed from PO to PR) without a new order.

I understand that I have the authority to inform the Hospice nurse that I may not implement new orders within the required documentation. I understand that I can contact my Home Coordinator, Program Manager or Community RN if I have any questions regarding these issues.

Employee Acknowledgement \_\_\_\_\_

Date

