

Patient & Family Training & Support Guide





Thank you for choosing us for your hospice team! Gulfside Healthcare Services has created this guide for you and your caregivers to provide training, information, and support during your hospice journey.

Your hospice services can include nurse practitioners, physicians, skilled nursing, aide care, medical social work, spiritual care, or other specialized team members designed to support you and maintain your comfort.

Our mission at Gulfside Hospice is to provide individualized and compassionate comfort care to those living with life-limiting illness.

Questions & Concerns

We strive each and every day to serve our patients, caregivers, and families to the best of our ability.

During the course of your care experience with us, we welcome your feedback and opinions should you have any concerns or issues that you would like us to address. In addition, we promise to listen carefully to what you have to say and to respond in a professional and timely manner.

Gulfside's Mission & Values:

Gulfside Healthcare Services provides a specialized continuum of compassionate care through hospice, palliative care and home health by an expert interdisciplinary professional team.

Our values are this organization's most fundamental reason for existence, and the soul of Gulfside Healthcare Services:

Patient-Centered Care
Honoring Our Staff
Community-Supporting Service

Call Gulfside 24/7 at 800-561-4883

We strive to return calls within 30 minutes. If it has been longer, please call again.



CALL US FIRST if you continue to have the following symptoms after rest and/or medications:

- Trouble Breathing
- Pain
- Anxiety/Restlessness
- Agitation
- Vomiting
- Constipation with no bowel movement in three days

CALL US FIRST IF ANY OF THE FOLLOWING OCCUR

- Falls even minor
- Are considering going to the hospital or calling 911
- Changing locations (hospital to home, home to hospital, staying the night at a location other than home)



CALL US FIRST if you have new, increased, or unrelieved discomfort due to:

- Pain
- Nausea/Vomiting
- Trouble Breathing
- Constipation
- Diarrhea
- Anxiety/Restlessness
- Agitation



Gulfside is AVAILABLE 24/7 to answer questions related to:

- Medications
- Oxygen
- Medical Equipment
- Expected Deliveries or Visits
- Plan of Care Questions
- Advanced Care Planning (help with a living will, healthcare surrogate, etc.)
- Additional Caregiving Services (information on volunteer services, private hire, respite care or assisted living/nursing facility)

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A Message from Gulfside's CEO

Hello!

A heartfelt welcome to all our patients and their families. As CEO, I want you to know that you are not alone in this journey. Our dedicated team is here to provide compassionate care, ensuring your comfort and dignity every step of the way. We are honored to be a part of your lives and are committed to supporting you through this meaningful chapter.

Our team of interdisciplinary experts are all top professionals in their field, but more importantly, they also have a heart for caring for others. My hope for you is that after your time with Gulfside, you will feel like another member of the large Gulfside family.

From our early roots in 1988, to the tremendous growth and expansion of services, programs and locations, Gulfside has become the premier Hospice, Palliative Care and Skilled Home Health provider in Pasco County, Pinellas County and beyond. The Tampa Bay communities embrace our organization, recognizing that when it comes to choice, the best option is Gulfside.

Again, thank you for choosing Gulfside Hospice.

President and Chief Executive Officer

Gulfside Healthcare Services

Linda L. Ward



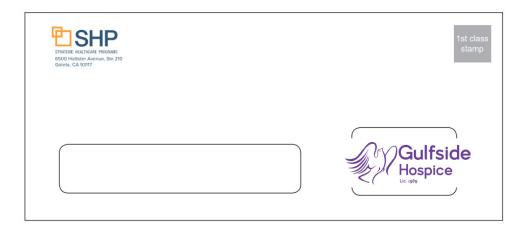
We Value Your Feedback



Ongoing communication and survey response will help us provide the highest quality of care for our patients and families.

Upon discharge you may be receiving a mailed survey known as the CAHPS Survey— Consumer Assessment of Healthcare Providers and Systems. The survey is developed by the Centers for Medicare & Medicaid Services (CMS).

This survey helps healthcare organizations identify strengths and weaknesses, determine where they need to improve and track progress over time.



We also invite you to share your feedback with the Gulfside care team, or call our administrative office at 800-561-4883 with any feedback or concerns.





We strive each and every day to serve our patients, caregivers, and families to the best of our ability.

During the course of your care experience with us, we welcome your feedback and opinions should you have any concerns or issues that you would like us to address. In addition, we promise to listen carefully to what you have to say and respond in a professional and timely manner.

1. What support is available to my loved ones to help with my care?

Gulfside hospice aims to provide your family with targeted support while they help you achieve your care goals. This may include:

- a. Emotional and spiritual support, instrumental help, and training from nurses, chaplains, and social workers
- b. Caregiver Support Services, including therapeutic support groups, caregiver trainings, and other educational offerings
- c. Volunteer services, including companionship, occasional respite, veteran pinning ceremonies and veteran-to-veteran visits, Patient and Caregiver Telephone Support (PACTS), Pet Peace of Mind support, and Gift of Presence
- d. Bereavement services for individuals, families, and groups to help understand and cope with grief and loss

2. Does enrollment in Hospice change my Medicare benefit?

- a. Enrollment in hospice does not change your Medicare or supplemental insurance benefits; any changes to a person's Medicare coverage are driven by the beneficiary Open Enrollment.
- b. However, your election to use the Medicare Hospice Benefit may affect how you access care related to the terminal diagnosis. Talk with your care team about existing or potential medical appointments to ensure your goals are consistent with the hospice plan of care and the care you seek is covered under the Hospice Medicare Benefit.
- c. For more information about your Medicare benefit, contact your insurance carrier or Florida SHINE program at 1-800-963-5337

3. How can I obtain additional assistance at home above what may be provided by Gulfside Hospice?

- a. First, consider exactly what kind of assistance you or your loved one may need. Assistance with tasks like light housekeeping, meal preparation, medication management, or "sitter services" may be provided by a hired caregiver or, in some cases, one's family and friends. Help with hands-on care, such as bathing, feeding, toileting, or mobility/transfers may require a personal care aide or CNA. Hospice volunteers may be able to provide companionship or occasional respite, but they cannot provide any hands-on care.
- b. Talk with your Gulfside social worker about private duty care agencies that serve your area and resources that can assist with the costs of care. Some forms of care may be covered or subsidized by long term care insurance, but traditional Medicare and supplemental plans do not typically cover additional home-based care while a beneficiary is enrolled in hospice care.

4. What if my loved ones are traveling, or simply need a short break to continue caring for me?

- a. The Medicare Hospice benefit includes occasional Respite to ease caregiver strain and prevent burnout. Per the guidelines set by the Center for Medicare and Medicaid Services (CMS), Respite includes care for up to five nights at a contracted Skilled Nursing Facility (SNF) or at the Hospice Inpatient Unit. During this time all routine care, meals, and medications will be provided by facility staff so that your family can rest and recharge with confidence.
- b. Talk with your Gulfside social worker to access Respite care.

5. How can I receive assistance with Advanced Care Planning, such as a living will or Healthcare Power of Attorney?

- a. Understanding the choices available and communicating YOUR choices to loved ones who may act on your behalf is vital, but the process of advanced care planning can be overwhelming. Talk with your Gulfside social worker about developing advance directives for medical decision making.
- b. Legal or financial planning, such as Durable Power of Attorney or directives for assets/ property, should be completed with the assistance of a qualified attorney or legal service. Your Gulfside social worker can help you find resources for these services in the community if needed.
- c. The Florida Department of Elder Affairs provides a statewide Senior Legal Helpline through which adults aged 60 and older may receive civil legal advice or referrals by phone. The toll-free number for the DoEA Senior Legal Helpline is 1-888-895-7873.

6. How does the "Hospice House" work, and when might I go there?

The Hospice Inpatient Unit (IPU) is not truly a residence, but rather a facility in which a higher level of care can be provided for a short period of time to manage symptoms like pain, difficulty breathing, or restlessness that cannot be managed at home. These symptoms are assessed by your Hospice Care Team to determine whether transfer to one of the Gulfside Centers for Hospice Care is necessary, then re-assessed daily to determine whether your symptoms can be effectively treated to keep you comfortable in a less restrictive environment, like your own home.

7. If I can no longer remain at home, what are my options for finding a facility to receive my care?

- a. The decision to seek long term care in a facility can be daunting, and it is often accompanied by feelings of grief, anxiety, and guilt. Your Hospice Care Team can help you consider your most important needs to determine which level of facility care is the best fit for you. Your Gulfside social worker can provide you with information about facility types and their differences as well as benefits that may help with the cost of care.
- b. You can find information about facilities in your area and the care they provide at www.floridahealthfinder.gov.

Have another question that was not answered above? Talk to your your Gulfside care team, or call our administrative office at 800-561-4883.





All Medicare-certified hospices are required to offer 4 levels of hospice care depending on patient and caregiver needs. (Source: Medicare.gov)

Hospice Level of Care	Level of Care Description
Routine home care	 Most common level of care in hospice. Patient is generally stable and the patient's symptoms, like pain or nausea and vomiting, are adequately controlled. Routine home care is usually provided in the home or wherever the patient resides, which could be a facility.
General inpatient care	 Crisis-like level of care for short-term management of out-of-control patient pain and/or symptoms Usually provided outside the home, in an inpatient setting at a medical facility like a hospital but may also be provided in a skilled nursing facility meeting certain requirements.
Continuous home care	 Crisis-like level of care for short-term management of out-of-control patient pain and/or symptoms Usually provided in the home.
Respite care	 A level of temporary care provided in nursing home, hospice inpatient facility, or hospital so that a family member or friend who's the patient's caregiver can take some time off. This level of care is tied to caregiver needs, not patient symptoms.



Gulfside Hospice services are provided by our interdisciplinary care team. Because illness affects much more than physical health alone, our care team is made up of experts with a variety of backgrounds, training and skills.

Together, you and your team will decide who visits and how often. All the members of your team share responsibility for providing you with the highest quality care.

If you would like to add any services listed here to your plan of care, please call 800-561-4883 or speak to one of your care team members.

Nurse Practitioners & Physicians

Nurse practitioners and physicians are valued members of your hospice care team. The Gulfside medical staff meet regularly to discuss each care plan and provide updates on each patient. They can also collaborate with your community physician to individualize your plan of care.

They will work closely with the rest of your hospice care team to:

- Provide treatment options
- Prevent complications
- Manage pain and symptoms
- Monitor changes related to the illness

Nursing Support

Your nurse is an excellent source of information about medications, treatments, disease processes, equipment used, hands-on-care, and other topics of concern.

The Gulfside Hospice nurse will:

- Provide skilled care and support related to your physical condition, level of comfort and learning needs
- Perform physical assessments and manage pain and symptoms
- Ask for your input to develop and manage your plan of care
- Provide training on safely moving and caring for your loved one when warranted
- Provide training on medications and side effects
- Provide training on disease progression and what to expect

Hospice Aides (Certified Nursing Assistants)

The hospice aides make your personal care and comfort their highest priority. Their focus is on maintaining patient dignity.

The care provided by the aide may include:

- Grooming
- Bathing
- Dressing
- Mouth Care
- Skin Care
- Repositioning

Visits with your hospice aide may also be a good time for a walk, wheelchair ride, going outside or other activities that are difficult without assistance.

Emotional Support

Gulfside Hospice's social workers are dedicated to helping you deal with the many ways illness can affect your life. Our social workers are available for emotional support and can provide counseling to individuals and families during a time of need.

Additional types of support can include:

- Helping you deal with feelings of sadness or being overwhelmed
- Discussing options for caregiving needs
- Linking you to community resources
- Providing support in coping with changes and loss
- Assisting with Advanced Directives

Spiritual & Religious Support

Our chaplains can provide interfaith support at the end of life in a way that is comfortable to you, whether you practice any particular faith or religion.

The religious or spiritual support may include:

- Facilitating religious rites or rituals
- Offering hymns, prayers or blessings
- Collaborating with your pastor or faith community to ensure support
- Assisting with final arrangements (funeral homes/cremation, funerals/memorial service planning)
- Explore your personal beliefs and spiritual supports

Spiritual support services are available at any time. If you would like to speak with a chaplain or schedule services, please call 1-800-561-4883 or speak with a member of your care team.

Caregiver Support

The Caregiver Support Services Program acknowledges the inherent difficulties of caring for others, especially at the end-of-life. The program's primary purpose is to identify and address the challenging tasks and psychosocial needs that caregivers face during this crucial time and provide essential support to all caregivers. The program's various components are accessible to every caregiver and ensure that any training, education, or support needed is provided to caregivers to assist in their caregiving journey.

Therapeutic Group Support

The Therapeutic Group Support component, facilitated by members of the Gulfside Clinical Social Work Team, is designed to target the emotional and social strain of caregiving. In a group setting, caregivers learn to effectively deal with the more troublesome thoughts, feelings, and challenges of caregiving to achieve mastery over their role and realize a better life balance. Areas explored include:

- Emotional/psychological strain of caregiving
- Role changes
- Caregiver guilt and resentment
- Building a support system
- Coping with loneliness or a lack of privacy
- Knowing when it is time for facility placement
- Negotiating family conflict around care decisions
- Life balance for caregivers

Clinical Education and Support

In addition to emotional support and resilience training, many caregivers also benefit from practical help as they adjust to the hands-on needs of their loved ones. This component aims to tackle those elements of caregiving that can pose difficulties for both new and seasoned caregivers and offers an opportunity for more intensive training and education through targeted visits by a skilled nurse and/ or CNA with hands-on training when suitable. Training topics includes:

- Bathing and Grooming
- Creating a Safe Care Environment
- Mobility and Transfers
- Nutrition and Feeding

Socialization and Outreach

Caregivers can feel isolated and alone when surrounded by people who do not understand the challenges of caregiving. The Caregiver Telephone Support component matches specially trained volunteers with caregivers for regular telephone support to provide socialization and a friendly ear and allows caregivers to vent without fear of retaliation from family or others who may become angry or upset.

If you are interested in receiving support through our Caregiver Support Services Program, talk with your Gulfside social worker who will make a referral on your behalf. Additionally, our Caregiver Support Services Program Coordinator will be in touch with you a few weeks after your loved one's admission to inquire about your well-being and assess the suitability of the program to meet your caregiving needs.

Volunteer Services

Hospice Care, focused on enhancing quality of life for individuals with terminal illnesses, is a deeply compassionate field that relies heavily on the dedication and kindness of volunteers. These selfless individuals play an essential role in providing emotional support, companionship, and practical assistance to hospice patients during their final journey and contribute to enhancing the quality of life for patients and their loved ones. By contributing their time, skills, and empathy, volunteers can make a meaningful difference in the lives of our patients and families in several ways:

• Emotional Support: A volunteer's presence can offer a shoulder to lean on, a sympathetic ear, and a friendly face. Hospice patients and their families experience a range of emotions and volunteers provide a safe space for them to share their fears, joys, regrets, and hopes. These conversations provide immense comfort and alleviate feelings of loneliness and isolation.

- Companionship and Meaningful Interaction: Volunteers can bridge the gap of isolation by spending time with patients, engaging in conversations, visiting with one of our pet volunteers, playing games, or simply being there to listen. These interactions offer patients a sense of normalcy and human connection while promoting a positive atmosphere and reducing feelings of anxiety or despair.
- Respite for Caregivers: Hospice caregivers, often family members, dedicate themselves to the well-being of their loved ones. Volunteers offer much needed respite and relief by staying with patients to allow caregivers to take a break, attend to personal matters, or simply to recharge. This support is essential for maintaining the physical and emotional health of caregivers.
- Creative Expression and Legacy Building: Many volunteers engage patients in creative activities such as painting, music, writing, or crafting. These activities provide an outlet for patients to express their emotions, leave behind a legacy, or explore newfound talents. The tangible creations also serve as cherished mementos for families, reminding them of their loved one's creativity and spirit.
- Enhancing Quality of Life: Volunteers help patients find joy and comfort in their final moments. Reading a favorite book, sharing memories, watching a beloved movie, or just being a comforting presence contributes to an improved quality of life amid challenging circumstances.

The bonds formed between volunteers, hospice patients, and their caregivers often leave a lasting impact on both parties. Patients find comfort and solace in the companionship while volunteers gain a deeper satisfaction for life, empathy, and the power of human connection. The choice to contribute time and care to those in need is a gift that transcends medical boundaries and touches the heart.

Volunteers truly are the heart and soul of hospice care. If you are interested in receiving volunteer support, talk with your Team Social Worker. They will gather essential information to understand your needs and assist the Volunteer Department in identifying an ideal volunteer-patient match tailored just for you.





Your comfort is our top priority. The following pages offer practical tips for dealing with some common ailments.

We encourage you to talk openly with your hospice care team and let them know what's bothering you. This will ensure you are receiving the best and most appropriate treatments.

If any of your symptoms become overwhelming, your care team is always available to help around the clock. You can call for assistance any time at 800-561-4883.

Pain

One of the biggest concerns for patients in hospice care is pain. Your Gulfside Hospice care team is available around the clock to help treat pain. Each person experiences pain or discomfort in their own way. You know how you or your loved one is feeling and this will help us customize your plan of care.

Your Gulfside Hospice team will:

- Ask questions about your pain, including what type of pain you are having and what treatments have been most effective in the past.
- Adjust medications and dosages based on the pain reported.
- Train you on medications, side effects and if/when to give more pain medication.

Patient & Caregiver Training: What can you do?

- 1. Take your medication as directed.
- 2. Report any side effects to your care team.
- 3. Talk openly and ask questions of your care team so we can work together to find the pain medicine or treatments that help you the most.
- 4. Please note if one medication or treatment does not work. There may be other options available.

Contact Gulfside Hospice for additional help or training needed with managing pain. Assistance is always available to you 24 hours a day, 7 days a week at 800-561-4883.

Nausea & Vomiting

There are many different causes of nausea and vomiting. Much can be done to prevent and treat these distressing symptoms. Our hospice care team will try to find out what is causing them in order to help you be more comfortable and control those symptoms.

Your Gulfside Hospice team will:

- Ask you if you are having any nausea or vomiting, and will be available for you 24 hours a day.
- Provide training for you and your loved one on medications and tips for managing nausea and vomiting.

Patient & Caregiver: What can you do?

- Eat small, frequent meals that are soft or bland (if desired and are tolerable).
- Avoid dairy products and foods that are fatty, greasy, spicy or fried.
- Eat foods at room temperature or cooler. (Hot foods may trigger nausea).
- Provide frequent mouth care. Try sips of water or ice chips before eating again.
- Avoid strong odors such as perfume and deodorizers.

- Try to relax and focus on pleasant thoughts and activities, such as listening to music, reading, or watching TV, that may distract from the nausea.
- Rest after meals for about 1-2 hours. Activity may trigger nausea.
- Take the medication that has been ordered for nausea. Contact your care team if it is not relieving the nausea.

If vomiting occurs:

- Turn head to side to prevent choking.
- Provide oral care. Use damp, cool cloths.
- Do NOT eat or drink anything until vomiting has stopped.
- Once vomiting stops, begin with small amounts of clear liquids and gradually increase.
- Once able to keep clear liquids down, try other liquids and gradually work up to your regular diet as tolerable.

Call Gulfside immediately if:

- Vomiting happens more than two times in two hours.
- · Vomit looks like coffee grounds or looks bloody.
- You have increased weakness, dizziness, thirst, or constipation.
- You are unable to swallow or keep down medications, especially ones prescribed to control nausea and vomiting.

Restlessness & Agitation

As an individual is nearing their final days, restlessness may occur. Terminal restlessness, also referred to as terminal agitation, includes anxiety, agitation and confusion. It is possible even mild-mannered individuals may become agitated or angry. They may demand to get up, their body may jerk or twitch, or they may pull at their bedding or clothing.

Understanding what terminal restlessness is and learning about other end-of-life signs can help family members cope with the changes their loved one experiences. The sudden burst of terminal restlessness can be very concerning for family members. Speak to your care team about any concerns you may have for your loved one's safety or if you need additional emotional and spiritual support to help cope.

Your Gulfside Hospice team will:

- Work with you to determine if there is a treatable cause, like pain.
- Utilize the hospice social worker and/or chaplain to address underlying concerns and provide emotional or spiritual support.
- If there is no treatable symptom, the best course of action is to try to calm the individual and keep them safe.

Patient & Caregiver: What can you do?

- Let your Gulfside Hospice care team know if the patient becomes restless or agitated.
- Promote a calm environment with soft music.
- Dim the lights.
- Give reassurance. Speak slowly and calmly.
- Talk openly with your hospice care team.
- In order to maintain a calm environment, it may be helpful to decrease the number of visitors.
- Some people find comfort in sharing memories about special occasions, holidays, family experiences, or a memory of a favorite place.

Contact Gulfside Hospice for additional help or training needed with restlessness and agitation. Assistance is always available to you 24 hours a day, 7 days a week at 800- 561-4883.

Trouble Breathing

Feeling out of breath, also called shortness of breath or dyspnea, is a very uncomfortable and tiring. As a result, this can cause a lack of energy and decreased activity. There are many different ways to decrease difficulty breathing, and your care team can help customize your plan of care to meet your needs.

Your Gulfside Hospice team will:

- Ask questions about your breathing, which may include what treatments have been most effective.
- Work with you and your caregiver to obtain and teach you about medications, including oxygen therapy, that may be ordered for your plan of care.
- Help you manage your symptoms and figure out what is causing them.

Patient & Caregiver: What can you do?

- Talk openly and ask questions of your care team so you can work together to find the medicine or treatments that will help you make your breathing more comfortable.
- Plan activities to conserve your energy.
- Certain positions can help with chest expansions. Sitting upright and leaning forward helps move air in and out of your lungs.
- Elevate the head of bed with pillows.
- Eliminate allergens, such as smoke, dust and mold.
- · Take your medication as directed.
- Follow the Oxygen Use & Safety Guide in your admission packet.

Contact Gulfside for additional help or training needed with trouble breathing. Assistance is always available 24 hours a day, 7 days a week at 800-561-4883.

Constipation

Constipation is a symptom that your care team takes very seriously. Changes in bowel functions are common during illness. Many factors, such as lack of fluids/fiber, medications, and decreased activity or mobility, can lead to slowed bowel function and hard, infrequent stools.

Your Gulfside Hospice team will:

- Ask about your bowel movements.
- Work with you to determine if there is a treatable cause.
- Provide training and work with you to prevent and manage constipation.
- Work with you and your medical providers to see if there is a better option to prevent or manage the constipation

Patient & Caregiver: What can you do?

- Talk openly with your care team about any current or past problems with your bowels and what has helped in the past.
- Drink water, juice and other liquids as you are able to tolerate them.
- Take bowel medicine as prescribed.
- Keep track of your bowel movements.

Call Gulfside Hospice at 800-561-4883 if:

- Stool is hard and difficult to pass.
- It has been three or more days since your last bowel movement.
- Your abdomen is tender, painful or bloated.
- You have constipation with nausea and/or vomiting.

Sadness & Anxiety

Feeling anxious and sad can have a huge impact on your wellbeing. It can lead to changes in mood, sleep, appetite and behavior. When it becomes overwhelming and starts to affect you, the care team is skilled in addressing these feelings through multiple ways including team support and medications if needed.

Your Gulfside Hospice team will:

- Ask questions and identify signs of anxiety and/or sadness.
- Share information and provide reassurance that may include counseling or spiritual support for the patient and family, as well as medications for the patient.

Patient & Caregiver: What can you do?

- Promote a calm environment.
- Learn how to recognize symptoms of sadness and/or anxiety.

- Utilize your care team members to provide counseling or spiritual support.
- Take medications as directed.
- Express feelings of anxiety and sadness to your hospice team.

Contact Gulfside Hospice for additional help needed with sadness and anxiety. Assistance is always available to you 24 hours a day, 7 days a week at 800-561-4883.

Managing Medications

Medications are needed to assist in achieving and maintaining comfort. However, this may be a new or overwhelming experience for you. Your care team is a great resource for learning more about the medications and how to safely use them.

Your Gulfside Hospice team will:

- Discuss and provide training on the use and reason for the medication.
- Teach and provide training on how and when to take or give the medication.
- Ask questions and monitor your medication list to determine if the medication is working to provide comfort.
- Review your current medication supply and assist in obtaining medications as needed.
- Ask to see all medications you are taking, including prescriptions, supplements, eye or ear drops, and over the counter medication.

Patient & Caregiver: What can you do?

- Keep all medications out of the reach of adults, who are unable to take them safely, children, and pets.
- Do not share medications with anyone else, crush pills without first checking with your Gulfside nurse, or take/ give more than the amount of medicine ordered.
- Read the label before taking/giving the medicine.
- Make sure the medicine is taken or given just as it is ordered.
- Take or give routine medication on a regular schedule.
- Use "break-through" or "in-between" medicine for the reason and the times ordered as needed, according to the prescription.
- Keep a written schedule and record of when and how often the medication is given.
- Try a medication box to help keep track of what medications you should be taking and when.

Call Gulfside Hospice at 800-561-4883 if:

- You have any questions or doubts about your medications.
- The medication does not seem to be working to manage your pain or symptoms, or if there are any side effects.
- You are unable to take or give them as ordered due to difficulty swallowing, nausea, or vomiting.
- You are considering stopping, starting, or changing a medication. Your nurse can work with your medical provider to help you do this safely.

How will I receive my medications?

When you are admitted to Gulfside's care, the nurse will discuss and explain the medication and pharmacy process. Your hospice nurse will contact your medical provider for new prescriptions as needed. Please let your hospice nurse know when your medication supply gets low. Under most circumstances, medications will be delivered to your home. When using any pharmacy, please take a moment to look over your medications carefully when a prescription is filled. Check to make sure your name is on each medication container. Contact your Gulfside Hospice nurse if you have any questions about any medication's appearance, purpose, or directions for use.

How should I dispose of unused medications?

When a hospice patient no longer has a need for a medication for any reason (discontinuation, changes in medication, etc.), it is important that the medication is disposed of properly. Your nursing team can instruct you in the proper methods of medication disposal. Nurses and other care team members are not allowed to accept returned medication and transport in their vehicle.

Expired or unneeded prescription and over-the-counter medications from households should never be disposed of by flushing them down the toilet or a drain. Although this method of disposal prevents accidental ingestion, it can cause contamination to Florida's aquatic environment because wastewater treatment systems are not designed to remove many of these medications.

How to Dispose of Medications:

- 1. Keep the medications in the original container. This will help identify the contents if they are accidentally ingested.
- 2. Mark out your name and prescription number for safety so that they are illegible.
- 3. For pills: add some water or soda to the container to start dissolving them. For liquids: add something inedible, like cat litter, dirt, or cayenne pepper to the container.
- 4. Close the lid and secure with duct or packing tape.
- 5. Place the bottle(s) inside an opaque (non-see-through) container like a coffee can or plastic laundry bottle.
- 6. Tape that container closed.
- 7. Hide the container in the trash. Do not put it in the recycle bin.





Medication Basic Training Sheet

This Medication Basic Training Sheet provides basic information on commonly used medications that you or your loved one may receive during your care. This list does not contain all medications or side effects, but includes most commonly used medications with side effects. If you have any questions or concerns regarding medication, please contact Gulfside Healthcare Services at 1-800-561-4883.

Uses Fo	r	Examples of Medica	ation - Generic (Brand)	Common Side Effects
PAIN	5 6	Morphine (Roxanol ®, MS Contin Tramadol (Ultram®) Hydrocodone/Acetamino Hydromorphone (Dilaudid®) Fentanyl Oxycodone/Acetaminop	ophen (Vicodin°, Lortab°, Norco°) Methadone Oxycodone	Sleepiness/Drowsiness Constipation Nausea/Vomiting Rash/Itching
NAUSEA/ VOMITING		Promethazine (Phenergan®) Ondansetron (Zofran®) Haloperidol (Haldol®) Prochlorperazine (Compazin	ne°)	Constipation/Diarrhea Drowsiness Headache Dry Mouth
ANXIETY	Ó	Lorazepam (Ativan°) Diazepam (Valium°) Clonazepam (Klonipin°)	Alprazolam (Xanax®) Temazepam (Restori®) Buspirone (Buspar®)	Tiredness/Fatigue Dizziness Increased Heart Rate
AGITATION/ RESTLESSNESS		Haloperidol (Haldol") Quetiapine (Seroquel") Risperidone (Risperdal")	Olanzapine (Zyprexa®) Chlorpromazine (Thorazine®)	Tiredness/Fatigue Dry Mouth Dizziness
TROUBLE BREATHING		Morphine (Roxanol") Albuterol/Ipratropium (Duoneb") Prednisone Dexamethasone		Tiredness/Fatigue Increased Heart Rate Dizziness Headache
SADNESS		Sertraline (Zoloft®) Fluoxetine (Prozac®) Citalopram (Celexa®) Escitalopram (Lexapro®) Paroxetine (Paxil®) Bupropion (Wellbutrin®)		Nausea Increase Appetite Weight Gain Fatigue Dry Mouth Constipation
CONSTIPATION		Senna S° Lactulose (Enulose°) Bisacodyl (Dulcolax°) Docusate (Colace°)	Milk of Magnesia® Polyethylene Glycol (Miralax®)	Stomach Discomfort Nausea Bloating/Gas Diarrhea

Please make sure you have provided all medications, including over-the-counter medications, herbal supplements and vitamins, to your care team. All medications have the potential to cause side effects, so it is important that you communicate with your team if you or your loved one are experiencing these or any side effects.

Alternatives to Opioids: Medications

ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- Can reduce exposure to opioids and dependency.

DISADVANTAGES:

- May not be covered by insurance.
- May not be effective for severe pain.



NON-OPIOID MEDICATIONS	DESCRIPTIONS, ADDITIONAL ADVANTAGES & DISADVANTAGES
Acetaminophen (Tylenol)	Relieves mild-moderate pain, and treats headache, muscle aches, arthritis, backache, toothaches, colds and fevers. <i>Overdoses can cause liver damage.</i>
Non-steroidal Anti-inflammatory Drugs (NSAIDs): Aspirin, Ibuprofen (Advil, Motrin), Naproxen (Aleve, Naprosyn)	Relieve mild-moderate pain, and reduce swelling and inflammation. Risk of stomach problems increases for people who take NSAIDs regularly. Can increase risk of bleeding.
Nerve Pain Medications: Gabapentin (Neuraptine), Pregabalin (Lyrica)	Relieve mild-moderate nerve pain (shooting and burning pain). Can cause drowsiness, dizziness, loss of coordination, tiredness and blurred vision.
Antidepressants: Effexor XR, Cymbalta, Savella	Relieve mild–moderate chronic pain, nerve pain (shooting and burning pain) and headaches. Depending on medication, side effects can include: drowsiness, dizziness, tiredness, constipation, weight loss or gain.
Medicated Creams, Foams, Gels, Lotions, Ointments, Sprays and Patches: Anesthetics (Lidocaine), NSAIDs, Muscle Relaxers, Capsaicin, Compound Topicals	Can be safer to relieve mild-moderate pain because medication is applied where the pain is. Anesthetics relieve nerve pain (shooting and burning pain) by numbing an area; NSAIDs relieve the pain of osteoarthritis, sprains, strains and overuse injuries; muscle relaxers reduce pain by causing muscles to become less tense or stiff; and capsaicin relieves musculoskeletal and neuropathic pain. Compounded topicals prepared by a pharmacist can be customized to meet a patient's specific needs. Skin irritation is the most common side effect. Capsaicin can cause warmth, stinging or burning on the skin.
Interventional Pain Management	Includes anesthetic or steroid injections around nerves, tendons, joints or muscles; spinal cord stimulation; drug delivery systems; or permanent or temporary nerve blocks. Medicates specific areas of the body. Can provide short-term and long-term relief from pain. Certain medical conditions and allergies can cause complications.
Non-opioid Anesthesia	Opioids can be replaced with safer medications that block pain during and after surgery. A health care provider or an anesthesiologist can provide options and discuss side effects.

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Florida Department of Health, Office of Communications, 09-20-19

Alternatives to Opioids: Therapies

ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- Can reduce exposure to opioids and dependency.
- Treatment targets the area of pain—not systemic.
- Providers are licensed and regulated by the State of Florida.* (appsmqa.doh.state.fl.us/MQASearchServices)

DISADVANTAGES:

- May not be covered by insurance.
- Relief from pain may not be immediate.
- May not be effective for severe pain.

Sources: American College of Surgeons, Centers for Disease Control and Prevention, National Institutes of Health, the Food and Drug Administration, Harvard Health and Wexner Medical Center (Ohio State University)

THERAPIES	DESCRIPTIONS, ADDITIONAL ADVANTAGES & DISADVANTAGES
Self-care	Cold and heat: Ice relieves pain and reduces inflammation and swelling of intense injuries; heat reduces muscle pain and stiffness. Can provide short-term and long-term relief from pain. <i>Too much heat can increase swelling and inflammation.</i>
	Exercise and movement: Regular exercise and physical activity can relieve pain. Simply walking has benefits. Mind-body practices like yoga and tai chi incorporate breath control, meditation and movements to stretch and strengthen muscles. <i>Maintaining daily exercise and overcoming barriers to exercise can be a challenge.</i>
Complementary Therapies	Acupuncture: Acupuncturists* insert thin needles into the body to stimulate specific points to relieve pain and promote healing. Can help ease some types of chronic pain: low-back, neck and knee pain, and osteoarthritis pain. Can reduce the frequency of tension headaches. <i>Bleeding, bruising and soreness may occur at insertion sites.</i>
	Chiropractic: Chiropractic physicians* practice a hands-on approach to treat pain including manual, mechanical, electrical and natural methods, and nutrition guidance. Can help with pain management and improve general health. Aching or soreness in the spinal joints or muscles sometimes happens—usually within the first few hours after treatment.
	Osteopathic Manipulative Treatment (OMT): Osteopathic physicians* use OMT—a hands-on technique applied to muscles, joints and other tissues—to treat pain. Clinically-proven to relieve low-back pain. <i>Soreness or stiffness in the first few days after treatment is possible.</i>
	Massage therapy: Massage therapists* manually manipulate muscle, connective tissue, tendons and ligaments. Can relieve pain by relaxing painful muscles, tendons and joints. Can relieve stress and anxiety—possibly slowing pain messages to and from the brain. At certain points during a massage, there may be some discomfort—especially during deep tissue massage.
	Transcutaneous electrical nerve stimulation (TENS): TENS is the application of electrical current through electrodes placed on the skin with varying frequencies. Studies have shown that TENS is effective for a variety of painful conditions. The intensity of TENS is described as a strong but comfortable sensation. <i>Allergic reactions to adhesive pads are possible.</i>
Rehabilitation Therapies	Occupational therapy: Occupational therapists* treat pain through the therapeutic use of everyday activities. Can relieve pain associated with dressing, bathing, eating and working. Therapy includes activities that increase coordination, balance, flexibility and range of motion. Therapy interventions and recommendations will not help if the patient does not practice as instructed.
	Physical therapy: Physical therapists* treat pain by restoring, enhancing and maintaining physical and functional abilities. <i>Therapy interventions and recommendations will not help if the patient does not practice as instructed.</i>
Behavioral and Mental Health Therapies	Psychiatrists*, clinical social workers*, marriage and family therapists* and mental health counselors* provide therapies that identify and treat mental disorders or substance abuse problems that may be roadblocks to pain management. When used to manage pain, these therapies can take time.



Indwelling Urinary Catheter Care, Adult

An indwelling urinary catheter is a thin tube that is put into your bladder. The tube helps to drain pee (urine) out of your body. The tube goes in through your urethra. Your urethra is where pee comes out of your body. Your pee will come out through the catheter, then it will go into a bag (drainage bag).

Take good care of your catheter so it will work well.

What Are The Risks?

- Germs may get into your bladder and cause an infection.
- The tube can become blocked.
- Tissue near the catheter may become irritated and may bleed.

How To Wear Your Catheter And Drainage Bag

Supplies needed:

- Sticky tape (adhesive tape) or a leg strap
- Alcohol wipe or soap and water (if you use tape)
- A clean towel (if you use tape)
- Large overnight bag. Smaller bag (leg bag)

Wearing your catheter

Attach your catheter to your leg with tape or a leg strap.

- Make sure the catheter is not pulled tight.
- If a leg strap gets wet, take it off and put on a dry strap.
- If you use tape to hold the bag on your leg:
 - Use an alcohol wipe or soap and water to wash your skin where the tape made it sticky before. Use a clean towel to pat-dry skin. Use new tape to make the bag stay on your leg.

Wearing your bags

Overnight Bag:

- You should have been given a large overnight bag.
- You may wear the overnight bag in the day or night.
- Always have the overnight bag lower than your bladder. **Do not** let the bag touch the floor.
- Before you go to sleep, put a clean plastic bag in a wastebasket. Then, hang the overnight bag inside the wastebasket.

Leg Bag:

- You should also have a smaller leg bag that fits under your clothes.
- Wear the leg bag as told by the product maker. This may be above or below the knee, depending on the length of the tubing.
- Make sure that the leg bag is below the bladder.
- Make sure that the tubing does not have loops or too much tension.
- Do not wear your leg bag at night.

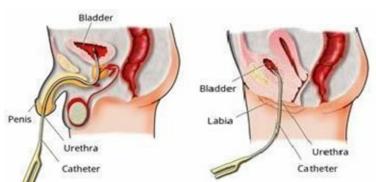
How To Care For Your Skin And Catheter

Supplies needed

- A clean washcloth.
- Water and mild soap.
- A clean towel.

Caring for your skin and catheter

- Clean the skin around your catheter every day.
 Wash your hands with soap and water. Wet a clean washcloth in warm water and mild soap.
 Clean the skin around your urethra.
 - If you are female:
 - Gently spread the folds of skin around your vagina (labia).
 - With the washcloth in your other hand, wipe the inner side of your labia on each side. Wipe from front to back.
 - If you are male:
 - Pull back any skin that covers the end of your penis (foreskin).
 - With the washcloth in your other hand, wipe your penis in small circles. Start wiping at the tip of your penis, then move away from the catheter.
 - Move the foreskin back in place, if needed. With your free hand, hold the catheter close to where it goes into your body.
 - Keep holding the catheter during cleaning so it does not get pulled out. With the washcloth in your other hand, clean the catheter.
 - Only wipe downward on the catheter, toward the drainage bag.
 - Do not wipe upward toward your body. Doing this may push germs into your urethra and cause infection. Use a clean towel to pat-dry the catheter and the skin around it. Make sure to wipe off all soap. Wash your hands with soap and water.
- Shower every day. Do not take baths.
- Do not use cream, ointment, or lotion on the area where the catheter goes into your body, unless your doctor tells you to. Do not use powders, sprays, or lotions on your genital area.
- Check your skin around the catheter every day for signs of infection. Check for:
 - Redness, swelling, or pain
 - Fluid or blood
 - Warmth
 - Pus or a bad smell



How to Empty the Bag

Supplies needed

- Rubbing alcohol
- Gauze pad or cotton ball
- Tape or a leg strap

Emptying the bag

Pour the urine out of your bag when it is $\frac{1}{3}-\frac{1}{2}$ full, or at least 2–3 times a day. Do this for your overnight bag and your leg bag.

- 1. Wash your hands with soap and water.
- 2. Separate (detach) the bag from your leg.
- 3. Hold the bag over the toilet or a clean pail. Keep the bag lower than your hips and bladder. This is so the urine does not go back into the tube.
- 4. Open the pour spout. It is at the bottom of the bag.
- 5. Empty the urine into the toilet or pail. Do not let the pour spout touch any surface.
- 6. Put rubbing alcohol on a gauze pad or cotton ball.
- 7. Use the gauze pad or cotton ball to clean the pour spout.
- 8. Close the pour spout.
- 9. Attach the bag to your leg with tape or a leg strap.
- 10. Wash your hands with soap and water.

Follow instructions for cleaning the drainage bag. Instructions can come from:

- The product maker
- Your doctor

How To Change The Bag

Replace your bag when it starts to leak, smell bad, or look dirty.

- 1. Wash your hands with soap and water.
- 2. Separate the dirty bag from your leg.
- 3. Pinch the catheter with your fingers so that urine does not spill out.
- 4. Separate the catheter tube from the bag tube where these tubes connect (at the connection valve). Do not let the tubes touch any surface.
- 5. Clean the end of the catheter tube with an alcohol wipe. Use a different alcohol wipe to clean the end of the bag tube.
- 6. Connect the catheter tube to the tube of the clean bag.
- 7. Attach the clean bag to your leg with tape or leg strap. Do not make the bag tight on your leg.
- 8. Wash your hands with soap and water.

General Instructions

- Never pull on your catheter. Never try to take it out. Doing that can hurt you.
- Always wash your hands before and after you touch your catheter or bag. Use a mild, fragrance-free soap. If you do not have soap and water, use hand sanitizer.
- Always make sure there are no twists, bends, or kinks in the catheter tube.
- Always make sure there are no leaks in the catheter or bag. Drink enough fluid to keep your urine pale yellow.
- Do not take baths, swim, or use a hot tub.
- If you are female, wipe from front to back after you have a bowel movement.

Contact Gulfside Hospice if:

- Your catheter gets clogged.
- Your catheter leaks.
- You have signs of infection at the catheter site, such as:
 - Redness, swelling, or pain where the catheter goes into your body.
 - Fluid, blood, pus, or a bad smell coming from the area where the catheter goes into your body.
 - Skin feels warm where the catheter goes into your body.
- You have signs of a bladder infection, such as:
 - Fever
 - Chills
 - Urine smells worse than usual
 - · Cloudy urine
 - Pain in your belly, legs, lower back, or bladder
 - Vomiting or feel like vomiting

Get Help Right Away If:

- You see blood in the catheter.
- Your urine is pink or red.
- Your bladder feels full.
- Your urine is not draining into the bag.
- Your catheter gets pulled out.

Summary

- An indwelling urinary catheter is a thin tube that is placed into the bladder to help drain urine out of the body.
- The catheter is placed into the part of the body that drains pee from the bladder (urethra).
 Taking good care of your catheter will keep it working well.
- Always wash your hands before and after touching your catheter or bag.
- Never pull on your catheter or try to take it out.



Basic Home and Patient Safety

PATIENT SAFETY IS A TOP PRIORITY

The key to safe and sensible home care includes:

- Safety improvements in and around the home
- Fall prevention
- Emergency planning

The Gulfside Hospice team will:

- Look for fall and safety risks at each visit.
- Evaluate the need for equipment/assistive devices to maintain your safety.
- Teach you how to prevent falls and use medical equipment safely.
- Ask that you report any falls or safety concerns promptly.

ADAPT THE HOME FOR SAFETY'S SAKE

It is important to make appropriate changes as soon as possible after coming home from a hospitalization or nursing facility, or to adapt the home to physical changes the patient may have experienced. For example:

THROUGHOUT THE HOME:

- Maintain clean, bright surroundings.
- Make certain furniture is comfortable and sturdy.
- Lower water heater temperature to 120 degrees to avoid burns.
- Keep walking areas clear from clutter.
- Make sure that cords are out of the way.
- Remove scatter/throw rugs and secure any loose carpeting.
- Repair any holes in carpeting and be sure to fix any flooring that's warped or buckled.
- Use night lights in bedrooms, bathrooms, hallways, etc.

IN THE KITCHEN:

- Set utensils, foods, and other needed items at a convenient height.
- Install grab bars on the walls.
- Choose a convenient height for mounting foil and paper towels.
- Develop a safe system for storing heavy pots (for example: at waist height or close to the floor).
- A fire extinguisher should be installed in the kitchen.

IN THE BATHROOM:

- Install grab bars on the bathroom walls (especially near the toilet and shower). REMEMBER: towel bars are NOT meant to be grab bars and are not safe to support body weight.
- Install a toilet extension to raise the seat. A bedside commode can often be used, take the bucket out and place over the toilet.
- Switch to a hand-held showerhead.
- Replace bar soap with easier to hold liquid soap in plastic bottles.
- Make sure faucets and towel bars are easy to reach.

ON STAIRS:

- Build ramps.
- Install new railings or secure old railings.
- · Repair or replace worn or unsafe steps.

IN THE BEDROOM:

- Consider buying or renting a hospital style bed with side rails.
- Obtain an over the bed trapeze so that the patient can lift himself or herself.
- Have a portable toilet beside the bed.
- Provide a bell to signal when the patient might need help.

TAKE CARE WITH CONFUSED PATIENTS:

If a patient has Alzheimer's Disease or any condition that causes mental confusion:

- Set up a daily schedule having a routine helps limit restlessness and wandering.
- Obtain an ID bracelet for the client in case he or she gets lost.
- Keep medications out of reach they can be a source of danger in the hands of confused or forgetful patients.
- Limit access to dangerous items Keep irons, hair dryers, power tools, scissors, pins, and any other dangerous items where patients can't reach them.

FALL PREVENTION TIPS

Assessing loved ones for falls is a constant process for hospice patients. What are some of the things that are monitored for fall prevention?

- Throw rugs should be held down by grippers.
- Declutter pathways for safe ambulation. Ensure that clothing, towels, cords, etc. are out of the way, and the floors are clean and dry. Make sure to clean up spills promptly.
- Recommend safety bars in the shower and toilet area.
- Medication review will be done with the nurses at each visit. Sometimes medications can cause an increase in fall risk and should be discussed during those visits.
- Ensure assistive devices (cane, walker, wheelchair) is within reach and is well maintained. Ensure brakes on wheelchair are locking well and able to stay in place for safe transfers.
- Utilize gait belt as necessary for safe transfers. Talk to your nursing team for help with providing a gait belt and the training on proper use.
- Lighting should be bright enough for patient to be able to see well to get around the home.
 Encourage night light at nighttime for safe ambulation to bathroom, or request bed side commode if strength and balance are worse at night.
- Monitor for changes in mentation with new onset of confusion or worsening confusion.
- Encourage patient to wear hearing aids and glasses appropriately.
- Notify Gulfside Hospice of any patient fall.

SAFETY & EMERGENCY PREPAREDNESS

Weather/Disaster Precautions

Hurricanes, power outages, tornadoes, localized flooding, acts of terrorism and fire are all examples of possible threats to normal living.

- Develop an action plan. Where will you go during an emergency event. If going to a shelter, have you pre-registered?
 - If you live in an evacuation zone or are electrically dependent on medical equipment (i.e., continuous oxygen, suction) plan now for where you and your family will evacuate. Your physical condition and needs should guide you in determining where you would need to go and how you would get there.
 - Options to discuss with family and your care team regarding where you will evacuate:
 - Family or friends in a non-evacuation zone
 - Host homes
 - Hotel in a non-evacuation zone
 - Public/Special Needs shelters. Please note that special needs shelters are intended to be a place of last refuge and that the conditions in a shelter may be very stressful. It is recommended that a caregiver accompany an evacuee to the special needs shelter and remain with him or her.

- Caution: A pet-friendly shelter should be your last choice in the event of an evacuation with your pet. These are not equipped as special need shelters.
- Other options are based on condition and needs (i.e., skilled nursing facility or hospital).
- Remember it is important to bring your own Personal Protective Equipment (masks & gloves).
- Have emergency numbers posted on or near all phone or doors for fire/police, relatives and out
 of area contacts.
- Prepare physically. Each household should have a reserve of medicines. During hurricane season (June November), have a 14-day supply of prescription and non-prescription medication.
- Maintain a minimum of at least three gallons (11 L) of water per person and three days of nonperishable, ready-to-eat foods in case it is necessary to shelter in place for an extended period.
- Prepare an Emergency Go bag/kit with following items:
 - Blankets, complete change of clothes, and sturdy shoes
 - Flashlight, radio (battery or windup), and spare batteries
 - First-aid kit and a whistle to signal for help
 - Eating utensils, can opener, pocket tool set, and waterproof matches
 - Dust masks, gloves, waterproof tape, and plastic sheeting for shelter
 - Toothbrushes, soap, towels, and toilet paper
 - Child-care supplies and special-needs items for seniors or people with disabilities
 - A waterproof container with needed medication, copies of prescriptions, and other important documents
 - List of emergency contacts and a local map
 - · Credit cards and cash
 - Extra set of house keys and car keys
 - Paper, pencils, books, and games for children
- If you own a car, try to keep the fuel tank at least half full.

After An Evacuation

 After the danger has passed and authorities have notified you that you can return to your residence or reenter an affected area. Gulfside staff will attempt to make contact with you as soon as possible. Please call us at (727) 845-5707 to update us on your condition and location.

FIRE SAFETY PRECAUTIONS

- All family members and caregivers should be familiar with emergency 911 procedures.
- Keep exits clear and have a plan for escape. Practice plan with family members.
- Know your fire escape routes and plan two exits. If your exit is through the ground floor window, make sure it opens easily.
- Alternative exits should be accessible in case of fire.
- Install smoke alarms in hallways and near sleeping areas. Check smoke alarm batteries when you change your clocks for daylight savings time in the spring and fall.
- If gas is used in the home, Carbon Monoxide detectors should be placed in hallways and near sleeping areas.
- Smoke alarms/Carbon Monoxide should be placed on each floor.
- If you live in an apartment building, know the exit and stair locations.
- If your fire escape is cut off, remain calm; close the door and seal cracks to hold back smoke. Signal for help at the window.
- Always keep the fire department and emergency numbers posted for easy viewing at all times.
- Remember, life safety first, but if the fire is contained and small you may be able to use your fire extinguisher before the fire department arrives.
- Fire extinguishers should be checked frequently for stability.
- When using the fire extinguisher remember "PASS"- Pull the pin, Aim hose at base, Squeeze the handle, Sweep across the base of fire.

Fire and Oxygen Safety

- Know the correct oxygen liter flow that your doctor ordered and do not change the setting.
- Do not smoke or allow others to smoke within 10 feet of you when oxygen is in use.
- NO SMOKING SIGNS should be posted in all areas of oxygen use.
- Patients using oxygen should stay at least 10 feet away from all open flames or heat sources (e.g., space heaters, stoves, candles, fireplaces, electric razors, hair dryers, cigarettes, lighters, matches, etc.)
- Do not use petroleum-based products or flammable products on your face or upper body. Water based products may be used such as K-Y jelly or Aloe Vera. Do not use: Vaseline, Chapstick, rubbing alcohol, bag balm, nail polish.
- Change the nasal cannula every 14 days and as needed if soiled or damaged.
- Oxygen concentrator should be placed in a well-ventilated area at least 12 inches from draperies, furniture, and walls.
- The oxygen concentrator filter should be cleaned (vacuumed) every 7 days and as needed.
- Keep oxygen tanks out of the way in well-ventilated areas, upright in a stand or on its side. Do
 not place anything combustible around any tank (example: stacks of paper). Ask for an extra
 stand to keep tanks safe and secure.



Oxygen is essential for life, valuable therapy for many patients, and can be surprisingly dangerous.

You may not think of oxygen as dangerous. After all, it is all around us in the air we breathe. But the oxygen concentration in ordinary air is a mere 21%. Increase that concentration by only a little, and the risk of fire grows dramatically.

In oxygen-enriched atmospheres (defined as greater than 23% oxygen), fires can be easily started and spread by means that would not happen in ordinary air. Many materials that do not burn in air will burn easily and vigorously in oxygen-enriched atmospheres.

What's more, these fires burn hotter and faster than ordinary fires. The higher the level of oxygen, the worse the fire.

What You Need to Know About Oxygen Therapy

Your doctor may have prescribed supplemental oxygen therapy. The good news is that many people lead very active lives despite needing oxygen. But using oxygen can also put you at risk. So it is important that you know how to keep yourself and those around you safe.

How Does Oxygen Therapy Work?

Oxygen therapy is used to increase the supply of oxygen to the lungs, which in turn, makes more oxygen available to other body tissues.

It can be delivered from high-pressure cylinders, cryogenic liquid containers, or oxygen concentrating devices (e.g., oxygen concentrators). The oxygen flows from the supply through a long, thin plastic tube that connects to a breathing device worn by the patient. Breathing devices include nasal cannulas, facemasks, and tracheostomy tubes.

What Are The Risks?

One of the greatest risks of using oxygen is the potential for fire. Smoking while oxygen is in use or nearby is the greatest cause of oxygen-users' deaths. Smoking while breathing supplemental oxygen can cause the cigarette to burst into flames, causing severe facial burns or fire.

Fires in the home pose a risk for neighboring residences and buildings to catch fire as well. Many ordinary things can cause a fire on or around the oxygen supply or a patient using oxygen, such as the flame

from a match, candle, lighter, furnace pilot light, space heater, hair dryer, static sparks and more. It is recommended that anyone using oxygen stays at least 25 feet away from any of the above heat sources or another person smoking.

The oxygen supply device itself can also be hazardous and explode if improperly used, stored, hit, dropped, or if it leaks. Oxygen use in a car without good ventilation can start a fire.

In Case Of Fire, What Should I Do?

Should there be a fire involving oxygen or an oxygen supply, act quickly:

- Shut off the oxygen supply or remove tubing from supply, if possible and if safe to do so
- Get away from the oxygen delivery device, oxygen supply, and the fire
- If the fire is on you, remove the oxygen delivery device, then stop, drop and roll.
- Extinguish the fire with water or a fire extinguisher, if possible and if safe to do so

Safety Tips for Patients Using Oxygen Therapy

1. Patients who smoke while using oxygen are at risk of fire and facial burns.

Preventative measures include:

- Patients, caregivers, visitors should not smoke in any part of the house where oxygen is used
- Patient/caregiver to use signage "No smoking oxygen in use."
- Arrange for removal of any oxygen equipment not in regular use
- Ensure smoke detectors are fitted and in working order
- 2. Exposure to open flames from gas fires, open fires, candles and cooking appliances puts the patient using oxygen at risk for explosion and fire.

Preventative measures include:

- Patient to maintain a safe distance from fires and open flame appliances while wearing oxygen
- Oxygen must be securely positioned and stored away from heat and open flames
- 3. Patients using oxygen are at risk of little to complete restriction of oxygen if entrapment or kinking of tubing occurs in or under furniture, doors, wheels or other heavy objects.

Preventative measures include:

- Check there are no kinks in the tubing
- Check that the tubing is not trapped between furniture or trapped (e.g. under bed or wheel, etc.)
- Use only tubing supplied by the oxygen provider or hospice
- 4. Patients who use petroleum-based products while using oxygen are at risk of local burning of affected area. Preventative measures include:
 - Patients (or caregivers) should not use petroleum on or near patient's nostrils
 - Patients should not use oils or gels on or near a patient's nostrils
- 5. Patients using oxygen are at risk for trips and falls when using tubes to receive oxygen therapy.

Preventative measures include:

- Patients and caregivers to check position of tubing daily to minimize risks of falls
- Patients and caregivers to check position of tubing, particularly if patient using a walker, etc.
- Current oxygen tubing must be of an appropriate length to meet the needs of the patient, and if needed contact hospice to alter the tubing length

6. Patients using oxygen are at risk of no oxygen supply if the power supply to the oxygen concentrator is turned off.

Preventative measures include:

- Ensure patient has a back up cylinder
- Patient should not use back up cylinder unless there is power failure to concentrator
- 7. Oxygen-sensitive patients are at risk of worsening respiratory failure if an unauthorized adjustment of flow rate on equipment occurs.

Preventative measures include:

- Patient and caregiver will know and understand the reason for oxygen
- Patient and caregiver will know and understand prescribed flow rate and hours of use
- Patient and caregiver understand how to operate equipment safely
- Patient and caregiver know the importance of not adjusting oxygen flow rate without seeking appropriate clinical advice and assessment
- 8. Non-compliance with oxygen treatment prescribed for the patients puts them at risk of low oxygen remaining untreated.

Preventative measures include:

- Patients will be educated on when and how to use oxygen at the time of prescribing
- Reason for oxygen will be discussed at each review of care plan
- Significant caregivers, family and others involved with the patient to be educated on why oxygen has been prescribed

How Can I Keep Myself Safe?

- Read, understand, and follow the oxygen device instructions for use and safety.
- Never smoke while using oxygen or near an oxygen supply.
- Keep yourself and the oxygen supply at least 25 feet away from:
 - any fire, candles, stove, oven, grill, or other heat source or open flame
 - electrical appliances that make sparks
 - elements that produced high heat, such as an electronic igniter, toaster, space heater, hair dryer or electric motor
 - anyone smoking
- Do not use flammable aerosol sprays (such as spray paint, hair spray) near the oxygen supply because they may spontaneously burn.
- Do not use cosmetic oils, waxes, petroleum-based products or greases because they can easily burn in supplemental oxygen.
- Avoid static electric spark conditions. For example, do not use synthetic blankets because sparks could
 occur near the site of oxygen use.
- Keep oxygen concentrators, containers and cylinders on a upright position. Oxygen cylinders must remain on a securing device such as a cylinder rack to prevent the tank from falling or being knocked over.
- Never cover or place anything over an oxygen supply.
- Keep a fire extinguisher in the area of oxygen use.
- Keep a phone near patients who may have difficulty escaping in a fire.





Infection prevention prevents or stops the spread of infections in healthcare settings. In hospice, infection prevention practices may need to be adapted so that the patient's requests, needs, and dignity are maintained and incorporated as safely as possible into the patient's plan of care.

How Infections are Spread

Germs are a part of everyday life and are found in our air, soil, water, and in and on our bodies. Some germs are helpful, others are harmful. Many germs live in and on our bodies without causing harm and some even help us to stay healthy. Only a small portion of germs are known to cause infection.

An infection occurs when germs enter the body, increase in number, and cause a reaction of the body. People can be sick with symptoms of an infection or colonized with germs (not have symptoms of an infection but able to pass the germs to others).

A person susceptible to infection is someone who is not vaccinated or otherwise immune, or a person with a weakened immune system who has a way for the germs to enter the body. For an infection to occur, germs must enter a susceptible person's body and invade tissues, multiply, and cause a reaction.

HAND HYGIENE

Hand hygiene is the single most important way to prevent infection. Hand hygiene is a term for either hand washing using soap and water, or cleaning hands with an alcohol-based hand sanitizer.

When you should clean your hands:

Hand hygiene at any time of the day can help get rid of germs, but there are key times when it is most important to clean your hands.

- Before touching your eyes, nose, or mouth.
- Before, during, and after preparing food
- Before eating food.
- Before and after caring for someone who is sick.
- Before and after treating a cut or wound.
- After using the bathroom, changing diapers, or cleaning up a child who has used the bathroom.
- After touching surfaces in the patient's immediate area such as bed rails, bedside tables, doorknobs, remote controls, or the phone.
- After blowing your nose, coughing, or sneezing.
- After touching an animal, animal food or treats, animal cages, or animal feces.
- After touching garbage.
- If your hands are visibly dirty or greasy.

How you should clean your hands with an alcohol-based hand sanitizer:

- 1. Put sanitizer with at least 60% alcohol on hands and rub hands together.
- 2. Cover all surfaces until hands feel dry.
- 3. This should take around 15-20 seconds.

How you should clean your hands with soap and water:

- 1. Wet your hands with warm water. Use liquid soap if possible. Apply a nickel- or quarter- sized amount of soap to your hands.
- 2. Rub your hands together until the soap forms a lather and then rub all over the top of your hands, in between your fingers and the area around and under the fingernails.
- 3. Continue rubbing your hands for at least 15-20 seconds. Need a timer? Imagine singing the "Happy Birthday" song twice.
- 4. Rinse your hands well under running water.
- 5. Dry your hands using a paper towel if possible. Then use your paper towel to turn off the faucet and to open the door if needed.

Speak up for clean hands

Members of your healthcare team should perform hand hygiene. Protect yourself by asking questions:

- 1. Clean your own hands and ask those around you to do the same.
- 2. Don't be afraid to use your voice: it's ok to ask your healthcare provider questions, such as:
 - "I didn't see you clean your hands when you came in, would you mind cleaning them again before you examine me?"
 - "I'm worried about germs spreading. Will you please clean your hands once more before you start my treatment?"

3. Ask your loved ones to clean their hands too:

• "I saw you clean your hands when you arrived some time ago, but would you mind cleaning them again?"

TRANSMISSION OF GERMS AND PERSONAL PROTECTIVE EQUIPMENT (PPE)

Transmission refers to the way germs are moved to a susceptible person. Germs don't move themselves. Germs depend on people, the environment, and/or medical equipment to move in healthcare and home settings. There are a few general ways that germs travel during patient care – through contact (i.e., touching), sprays and splashes, and inhalation. To prevent transmission of germs your healthcare team may wear items of PPE and instruct family and caregivers on when and how to wear PPE. PPE includes gloves, gown, mask and eye protection.

Gloves

Disposable gloves protect everyone. They are to be used only one time and then discarded. If a glove tears while putting it on, throw it away and use a new one. You should wear gloves when touching:

- Blood
- Body fluids (urine, stool, vomit)
- Mucous membranes (such as the inside of the mouth)
- Wound drainage
- Soiled dressings
- Soiled linens or clothing

Keep hands free of contamination when removing gloves

- 1. Remove the first glove by holding it just below wrist. Be sure to only touch the glove— not the skin on the wrist or arm.
- 2. Pull the glove down over your hand, which turns it inside out.
- 3. Continue to hold the discarded glove in your gloved hand. Slide two fingers from your ungloved hand under the wrist of the glove still on your hand. Do not to touch the outside of the glove.
- 4. Pull the glove down over your hand, which turns it inside out. Hold onto the glove by grasping the clean inside surface of the glove. The first discarded glove will now be inside the glove you just pulled off.
- 5. Discard gloves in trash.
- 6. Perform hand hygiene.

RESPIRATORY HYGIENE/COUGH ETIQUETTE

The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection.

- Cover your mouth and nose with a tissue when coughing or sneezing;
- Dispose of the tissue in the nearest waste receptible after use;
- Perform hand hygiene after having contact with respiratory secretions and contaminated objects/materials.

Steps You Can Take to Avoid Getting COVID-19 and the Flu

Many of the steps we take to protect ourselves from COVID-19 are the same things we can do to keep us safe from influenza. Practicing these good habits is also a great way to stay healthy:

- Stay up to date on your COVID-19 and flu vaccinations.
- Get tested if needed.
- If you're feeling ill, keep your distance from others and avoid close contact with those who may have COVID-19 or the flu.
- Wash your hands or sanitize often to prevent the spread of the virus.
- Cover your mouth when sneezing and keep from rubbing your eyes, mouth and nose.

GENERAL CLEANING AND DISINFECTION

Germs are also found in the environment. Examples of environmental sources of germs include bed rails, medical equipment, countertops, and tables.

Not all cleaners and disinfectants work the same. Read the label and follow the instructions. The label will tell you what germs it works for, and how much and/or how long surfaces need to be "wet" to be effective.

• If you choose to use bleach, use it safely. Never mix it with other cleaning products, especially those that contain ammoinia. This mixture can create a dangerous gas. Do not use chlorine-based disinfectants on urine spills.

- If surfaces are visibly soiled, clean the surface first following the disinfectant label instructions and then disinfect. Maintain proper movement of fresh air in your home.
- Regularly clean and disinfect surfaces in close proximity to the patient and frequently touched surfaces in the patient's envornment.
- Pour dirty mop or cleaning water down the toilet, not the sink.
- Pet areas, including litter boxes, birdcages and fish tanks, should be kept very clean. Persons with weakened immune systems should have someone else take care of pet areas.
- Discourage people who have infectious illnesses, such as colds or the flu, from visiting.

Handling Soiled Clothing and Bedding

- Wear gloves if laundry is visibly soiled.
- Avoid shaking soiled laundry in the air, which can spread germs.
- Wash laundry as promptly as possible after soiling.
- Place soiled clothing or bedding in a separate container or trash bag until ready to wash.

BIOMEDICAL WASTE DISPOSAL IN THE HOME

Gulfside Healthcare Services is responsible for the collection and removal of all biomedical waste generated while providing services. OSHA-approved sharps containers and red biomedical waste bags marked with a biomedical waste symbol are utilized.

Biomedical Waste Red Bag

Biomedical waste is defined as any solid or liquid waste that may present a risk of infection to humans. These include:

- Used, absorbent materials saturated with blood, blood products, body fluids, or secretions or excretions contaminated with visible blood, whether wet or dried.
- Non-absorbent disposable devices that have been contaminated with blood, body fluids or secretions or excretions visibly contaminated with blood.

Disposal of needles

- Dispose of needles in a provided sharps container that is an unbreakable, puncture-proof container that has a closable lid.
- Do not replace caps on needles.
- Do not overfill the container more than 2/3 of the container.
- Your nurse will dispose of the container when it is full, or it is no longer needed.



BE ANTIBIOTICS AWARE

Smart Use, Best Care

Antibiotics can save lives. Improving the way we take antibiotics, helps keep us healthy now, helps fight antibiotic resistance, and ensures that these life-saving drugs will be available for future generations.

Antibiotic Resistance

Antibiotics aren't always the answer. According to the Centers for Disease Control and Prevention (CDC), antibiotic resistance is one of the most urgent threats to the public's health. Antibiotic resistance happens when germs, like bacteria and fungi, develop the ability to defeat the drugs designed to kill them. That means the germs are not killed and continue to grow. When a patient needs antibiotics, the benefits outweigh the risks of side effects or antibiotic resistance.

When Antibiotics Are Needed

Antibiotics are only needed for treating certain infections caused by bacteria, but even some bacterial infections get better without antibiotics. We rely on antibiotics to treat serious, life-threatening conditions such as pneumonia and sepsis, the body's extreme response to an infection. Effective antibiotics are also needed for people who are at high risk for developing infections.

When Antibiotics Are Not Needed

Antibiotics do not work on viruses, such as those that cause colds, flu, or COVID-19. When antibiotics aren't needed, they won't help you and the side effects could still cause harm. Common side effects of antibiotics can include rash, dizziness, nausea, diarrhea, and yeast infections. More serious side effects can include severe and life-threatening allergic reactions and *Clostridioides* difficile infection (also called *C. diff*) which causes severe diarrhea. Any time antibiotics are used, they can cause side effects and contribute to the development of antibiotic resistance.

What You Can Do To feel Better

If you need antibiotics, take them exactly as prescribed. Talk with your healthcare professional if you have any questions about your antibiotics, or if you develop any side effects.

What to Expect When Dying

Death can come suddenly, but often death comes with a natural slowing down of the body's physical and mental systems. Often, we can share an estimated time frame based on how your body is responding to the disease process. The Gulfside Hospice care team understands that death is different for every person and will tailor a plan of care for each patient. The experience of this moment may take you by surprise, but the Gulfside Hospice care team is here to help.

Your Gulfside Hospice team will:

- Act as a guide and teach you signs that may occur before death, such as:
- Increased sleeping or difficulty waking up.
- Pauses in breathing or vocal breathing.
- Changes in skin color.
- Changes in body temperature.
- Changes in appetite or ability to swallow.
- Decreased urination and bowel elimination.
- Train and educate you on how to use medications and how to manage end-of-life symptoms.
- Help you recognize non-verbal cues to determine if your loved one is uncomfortable.
- Support you and your loved one during the dying process.
- Respect and honor wishes.

Patient & Caregiver: What can you do?

- Talk in a gentle way or play music to provide comfort. The sense of hearing remains until the end, even if the patient cannot respond.
- Touch can be comforting such as holding a patient's hand. However, some patients become more sensitive to touch, and this may not be comforting.
- Provide medications as prescribed.
- Report any questions or concerns and discuss them with your hospice care team at 800-561-4883.

BEREAVEMENT SERVICES

The journey of losing a loved one is undeniably one of life's most challenging experiences. It is a time marked by grief, confusion, and a range of emotions that can be overwhelming. Hospice bereavement services are designed to provide compassionate support to grieving individuals and assist in:

- Recognizing the importance of seeking help to cope with grief
- Understanding that grief is a natural and complex response to loss
- Providing a safe space to express and process emotions associated with loss
- Reducing feeling of isolation by connecting with others who understand
- Supporting the search for meaning and purpose after the loss of a loved one
- Encouraging growth through transformative experiences

- Equipping individuals with healthy coping mechanisms to navigate daily life
- Offering tools to manage grief-triggers stress, anxiety, and depressions
- Encouraging a reconnection with life and fostering supportive relationships with others

Available Gulfside Hospice Bereavement Support:

Individual Counseling:

- One-on-one sessions with a trained Bereavement Counselor
- Personalized support to process emotions, thoughts, and deal with challenges

Group Support:

- Safe spaces where individuals with shared experiences gather to discuss their grief.
- Facilitated by a Bereavement Counselor to encourage healing through shared stories.

Workshops and Educational Programs:

- Workshops addressing coping strategies, stress management, and self-care.
- Educational programs offering insights into the grieving process and its stages and tasks
- Memorial Services and Remembrance Event
- Opportunities to honor and remember loved ones through gatherings and ceremonies.
- Foster a sense of community and connection among those grieving

Accessing Gulfside Hospice Bereavement Services:

Bereavement support is provided without cost to anyone regardless of when they experience their loss or their connection to the departed. These services are accessible at any point following the passing of a loved one. Reach out to Gulfside's Bereavement Department at **800-561-4883** to talk with a bereavement counselor to discuss your situation, needs and preferences to find the most suitable pathway for you.

Gulfside Hospice bereavement services play an integral role in guiding individuals and families through the intricate process of grief. By understanding the available resources, accessing the appropriate support, and engaging in healing activities, you can navigate your grief journey with greater resilience, finding solace in the understanding and compassion of others who have walked a similar path.

Remember, seeking support is not a sign of weakness but a courageous step toward healing and renewal.



Hospice patients have a right to be notified in writing of their rights and obligations before treatment begins and to exercise those rights. The patient's family or guardian may exercise the patient's rights when the patient has been judged incompetent. Gulfside Healthcare Services has an obligation to protect and promote the rights of their patients, including the following rights:

A Right to Dignity and Respect

Hospice patients and their caregivers have a right to not be discriminated against based on race, color, religion, national origin, age, sex, or disability. Furthermore, patients and caregivers have a right to mutual respect and dignity, including respect for property. Gulfside Healthcare Services associates are prohibited from accepting personal gifts and borrowing from patients.

Patients have the right:

- to have relationships with hospice staff that are based on honesty and ethical standards of conduct;
- to be involved and receive support in the resolution of ethical issues concerning their hospice care;
- to be offered a qualified sign/language interpreter to assist you in communicating with us.

Decision Making

Patients have the right:

- to be notified in advance about the care that is to be furnished, the types of caregivers who
 will provide care, and the frequency of the visits that are proposed;
- to be advised of any change in the plan of care before the change is made;
- to be informed of the hospice medical diagnosis and prognosis for care;

- to participate in the planning of the care and in planning changes in the care, and to be advised that they have the right to do so;
- to be informed in writing of rights under state law to make decisions concerning medical care, including the right to accept or refuse treatment and the right to formulate advance directives;
- to be informed in writing of policies and procedures for implementing advance directives, including any limitations if the provider cannot implement an advance directive on the basis of conscience;
- to have health care providers comply with advance directives in accordance with state law requirements;
- to receive care without condition on, or discrimination based on, the execution of advance directives;
- · to refuse service without fear of reprisal or discrimination; and
- to be involved in decisions to withhold resuscitation and forego or withdraw life sustaining care.

Nondiscrimination and Grievance

Patients have the right:

- to be informed of the procedure they can follow to report a complaint to the hospice provider about the care that is, or fails to be, furnished and about a lack of respect for property;
- to know about the disposition of such complaints;
- to voice their grievances without fear of discrimination or reprisal for having done so;
- to be advised of the telephone number and hours of operation of the state's hospice "hot line" which receives questions and complaints about local hospice agencies, including implementation of advance directive requirements:

Quality of Care

Patients have the right:

- to receive care of the highest quality;
- to be admitted by Gulfside Healthcare Services only if it has the resources needed to provide
 the care safely and at the required level of intensity, as determined by a professional
 assessment; and by informing the patient of any limitations so an informed decision can be
 made regarding service;
- to appropriate assessment and management of pain and other symptoms; and
- to be told what to do in the case of emergency.

Gulfside Healthcare Services shall assure that:

- all medically related hospice needs are provided in accordance with physician's orders and that a plan of care specifies the services and their frequency and duration;
- all medically related personal care is provided by an appropriately trained hospice aide who is supervised by a hospice registered nurse; and
- patients and / or patient representatives participate in prompt and orderly transfers to other organizations or level of care.

Financial Responsibility

Patients have the right:

- to be informed of the extent to which payment may be expected from Medicare, Medicaid, or any other payor known to the home care provider;
- to be informed of the charges that will not be covered by Medicare;
- to be informed of the charges for which the patient may be liable;
- to receive this information, orally and in writing, before the care is initiated and within 30 calendar days of the date the hospice provider becomes aware of any changes; and
- to have access, upon request, to all bills for service the patient has received regardless of whether the bills are paid out-of-pocket or by another party.

Patient Responsibility

Patients have the responsibility:

- to notify the provider of any change in their condition, (e.g., hospitalization, changes in the plan of care, symptoms to be reported);
- to participate in and to follow the plan of care;
- to notify the provider of any concerns about their understanding or their ability to follow the plan of care;
- to notify the provider if the visit schedule needs to be changed;
- to notify the provider of any changes in insurance coverage for hospice;
- to inform providers of the existence of any changes made to advance directives;
- · to advise the provider of any problems or dissatisfaction with the services provided;
- to provide a safe home environment for the delivery of care and services by the Gulfside Healthcare Services employee;
- to carry out mutually agreed responsibilities; and to notify Gulfside Healthcare Services when a piece of equipment is no longer needed or not functioning
- to notify us if the caregiver can no longer meet his/her responsibilities.



During the course of your experience with us, we welcome your feedback and opinions should you have any concerns or issues that you would like us to address. In addition, we promise to listen carefully to what you have to say and to respond in a professional and timely manner.

If you have any questions or concerns, please contact Gulfside or any of the agencies listed below.

Gulfside Hospice

2061 Collier Pkwy, Land O Lakes FL 34639 800-561-4883

Agency for Healthcare Administration (AHCA)

1-888-419-3456 • https://apps.ahca.myflorida.com/hcfc/ 2727 Maham Dr. Tallahassee, FL 32308

The Joint Commission

https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/ Mail to: The Office of Quality & Patient Safety,The Joint Commission One Renaissance Blvd., Oakbrook Terrace, Illinois 60181

Medicaid Fraud

1-888-419-3456

Abuse, Neglect or Exploitation

Dept. of Children & Families • 1-800-962-2873 9393 North Florida Avenue Tampa FL 33612 http://reportabuse.dcf.state.fl.us

Agency on Aging/Aging & Disability Resource Center

800-963-5337 • https://www.agingcarefl.org/contact-the-helpline.html 9549 Koger Blvd, Gadsden Building, Suite 100 St. Petersburg, FL 33702

Disability Achievement Center for Independent Living

12552 Belcher Rd. South Largo, FL 33773 https://www.mydacil.org/ • 727-539-7550

Protection & Advocacy Agency

Disability Rights Florida • 800-342-0823 2473 Care Drive Suite 200
Tallahassee, FL 323308
http://www.disabilityrightsflorida.org/contact/select_form

Quality Improvement Network

Health Services Advisory Group 602-801-6600

Kepro Quality Improvement Organization

813-280-8256 • Beneficiary Helpline • 888-317-0751 TTY (855) 843-4776 TTY: *711 5201 W. Kennedy Boulevard Suite 900 Tampa, Florida 33609



Your Information. Your Rights. Our Responsibilities.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

Your

Rights

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

Your Choices

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

Our Uses and Disclosures

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

Your Rights

When it comes to your health information, you have certain rights.

This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect
 or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say "yes" to all reasonable requests.

Ask us to limit what we use or share

- You can ask us **not** to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

Get a list of those with whom we've shared information

- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

• You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services
 Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W.,
 Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/
 privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we *never* share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

 We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat you

 We can use your health information and share it with other professionals who are treating you. **Example:** A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

 We can use and share your health information to run our practice, improve your care, and contact you when necessary. **Example:** We use health information about you to manage your treatment and services.

Bill for your services

 We can use and share your health information to bill and get payment from health plans or other entities. **Example:** We give information about you to your health insurance plan so it will pay for your services.

continued on next page

How else can we use or share your health information? We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see: **www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.**

Help with public health • We can share health information about you for certain situations such as: and safety issues Preventing disease Helping with product recalls Reporting adverse reactions to medications Reporting suspected abuse, neglect, or domestic violence Preventing or reducing a serious threat to anyone's health or safety • We can use or share your information for health research. Do research Comply with the law We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law. • We can share health information about you with organ procurement Respond to organ and **tissue donation requests** organizations. Work with a medical • We can share health information with a coroner, medical examiner, or funeral director when an individual dies. examiner or funeral director Address workers' • We can use or share health information about you: compensation, law For workers' compensation claims enforcement, and other • For law enforcement purposes or with a law enforcement official government requests With health oversight agencies for activities authorized by law • For special government functions such as military, national security, and presidential protective services Respond to lawsuits and • We can share health information about you in response to a court or legal actions administrative order, or in response to a subpoena.

Special Notes:

We are held to a higher standard of privacy protection that is stricter than HIPAA requirements for releasing Hospice records after the death of a patient pursuant to Florida Statute 400.611.

We do not create or manage a hospital directory.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our office, and on our web site.

Effective Date: February 10, 2023

This Notice of Privacy Practices applies to the following organizations.

Gulfside Healthcare Services, Inc.

Privacy Officer Contact Information kim.maier@gulfside.org Phone 800-561-4883/Fax 813-528-8941

Giving Back to Gulfside



Gulfside Healthcare Services is there when local residents need us the most by providing comfort care for those living with chronic or life-limiting illnesses.

All Thrift Shoppe proceeds support our mission and enable us to provide quality patient care and bereavement services in Pasco County to everyone, regardless of an inability to pay.

Shop!

When you shop at any of the Gulfside Hospice Thrift Shoppes, you are not only getting a good deal, but also supporting a good cause. The proceeds from each of our stores directly support patient care costs. Thanks to a constant flow of new donations, merchandise at each store is unique and constantly changing. That means you never know what treasures you might find!

Merchandise includes clothing, shoes, furniture, housewares, antiques, collectibles, movies, books, holiday items, and more!



Donate!

All of the items on the shelves at the Gulfside Hospice Thrift Shoppes are thanks to the generous donations of the community. Donations of new and gently used items are accepted during store hours at all store locations. Free pickup service is available for furniture and large donation items. All donations are tax-deductible and a donation receipt can be provided.

Volunteer!

Volunteers are an integral part of the success of the Gulfside Hospice Thrift Shoppes. Each store is almost entirely volunteer-run. New volunteers ages 15 and up are always welcome to join our Thrift Shoppe team. All volunteers receive an orientation about Gulfside Hospice, followed by specialized training for the Thrift Shoppe of their choice.

Volunteering is a great way to give back to the Pasco County community, help others, and even earn community service hours.

Learn more and find a location at www.GulfsideThriftShops.org.

Giving Back to Gulfside

How are donations used by Gulfside Hospice?

Gulfside Hospice relies on donations to make hospice care available to nearly 600 patients every day in Pasco County. Every donation helps ensure that no patient is turned away because of an inability to pay. Donations are used to provide medicine, medical equipment, nursing, counseling, spiritual care and bereavement services for hospice patients and their families. No gift is too small and every donation makes a difference.

How do I make a donation to support Gulfside Hospice?

There are three different ways for you to make a donation:

- 1. Donate securely online at www.gulfside.org/make-a-gift.html or scan the QR code here.
- 2. Mail a donation check to the following address:

Gulfside Hospice

2061 Collier Parkway

Land O'Lakes, FL 34639

Attn: Carla Armstrong

3. Call 800-561-4883 to make a donation using your credit card over the phone.



I would like to include Gulfside as a beneficiary of my estate, IRA or insurance policy. What information do I need to provide my legal/financial advisors?

To ensure that your thoughtful gift is received properly in the future, please provide your legal/financial advisor with our full organization name, address and tax ID number, which is: Gulfside Healthcare Services, 2061 Collier Parkway, Land O' Lakes, FL 34639; EIN: 83-2484312.

How do I create an online memorial page for my loved one and suggest donations be made in their memory to Gulfside Hospice?

Please contact Carla Armstrong, director of philanthropy, at 727-845-5707 or carla.armstrong@gulfside.org to request an online memorial donation page for your loved one.

How can I recognize the outstanding care provided by a team or team member?

You may recognize outstanding care an employee or an entire team by making a donation of any size to name them as a Hospice Hero(es). Your Hospice Hero(es) will receive a special certificate along with a dove pin and be recognized by their supervisor for their extraordinary work.

To make a Hospice Hero donation, visit www.gulfside.org/specialprograms. You may also contact the Philanthropy Department at 727-845-5707 or email carla.armstrong@gulfside.org.

Is it possible to receive donation envelopes to display at an honor/memorial service?

Yes, we provide free donation envelopes for any honor/memorial service. To request donation envelopes, please contact the Philanthropy Department at 727-845-5707 or email carla.armstrong@gulfside.org.

More Choices for Quality & Compassionate Care



Gulfside Healthcare Services

Hospice | Palliative Care | Home Health



Compassionate care for end of life

Lic. 1989 - #5005096
Serving Pasco County

At Gulfside, our mission is to provide patients with the greatest comfort and peace of mind at the end of life.

Offering comfort and care

Gulfside takes an interdisciplinary approach to giving both patients and their families the best possible quality of life, for as long as life lasts. Our entire team provides both emotional and spiritual support to bring our patients internal peace and comfort, in addition to our excellent medical care.

Providing practical support

Interdisciplinary support and service is available 24 hours a day, seven days a week, including medical staff on call around the clock. Gulfside Hospice also has resources to help with legal and financial services involving end-of-life care.

Relieving pain and discomfort

Gulfside staff's expertise is palliative care, more commonly known as comfort care. We provide medication, quality medical treatments and soothing alternative therapies, such as massage and music, to help relieve physical pain.



Treatment plans for chronic illness

Lic. 2009

Serving Pasco & Hillsborough Counties

There are many benefits of palliative care for both patients and their families, including:

Pain & Symptom Management

Our expert team identifies and helps relieve your sources of pain and discomfort that stem from your diagnosed chronic illness. These may include problems with breathing, fatigue, depression, bowel/bladder or insomnia.

Communication & Coordination

Members of the Gulfside Palliative Care team are focused on clear channels of communication. We put great importance on communication between you, your family and all of your doctors in order to ensure that your needs are fully met. This includes establishing goals for care, help with decision making, and coordination of care.

Family & Caregiver Support

Caregivers bear a great deal of stress too, so the Gulfside Palliative Care team supports them as well. This focused attention helps ease some of the strain and can help with your decision making.



Skilled nursing and rehab at home

Lic. 2019 - #20255096

Now Serving Pasco & Pinellas Counties Coming Soon to Hernando & Hillsborough

Skilled home health services provide quality care, independence and assistance for the caregiver.

Quality Skilled Care & Rehab Services

Get back to doing the things you love with the help of our team and skilled home health services. Our hands-on approach allows you to strengthen and recover so that you can keep moving and live life fully.

Maintaining Independence

Our team understands that keeping a level of independence is important to you, so we'll work with you to help you learn new ways to keep that independence. We can help you improve quality of life so that you are able to maintain independence and stay where you are most comfortable: home.

Caregiver Solutions

Caring for someone as they work through the journey of rehab services and skilled nursing care can bring on its own set of challenges. Our team knows that, and will work with the caregiver alongside the patient to find solutions that fit your lifestyle.



Our approach to our unique three service lines provide you more choices for quality care, with the ability to transition to and from each service area as needs change.

Gulfside Healthcare Services is here to support your family, whatever your healthcare needs might be.

Gulfside's three primary services provide you more choices for the right quality care at the right time, with the ability to transition to and from each service seamlessly as your needs change. Their team of expert clinicians will continuously evaluate your needs and assist you accordingly, ensuring you are getting the right care tailored to your level of illness.







Gulfside Home Health provides patients with the therapy and rehab needed to recover after surgery. Gulfside Palliative Care offers a comprehensive care plan so you can live better with chronic illness. Gulfside Hospice provides all-around support and pain management at end of life.

By linking our three service lines, you can get individualized care.

www.Gulfside.org/continuum-of-care



NOTES



www.Gulfside.org

Phone: 800-561-4883

Fax: 813-909-0481

2061 Collier Parkway Land O' Lakes, FL 34639

A Business Line Of

