

以愛心服事關懷 With Love, We Serve of

靈實等養院

Haven of Hope Holistic Care Centre "Embrace the Last Journey with Love"

Holistic EOL Care in a NGO Setting

Dr Antony C.T. Leung

梁智達醫生

Mission of Holistic Care Centre

To provide quality residential, outpatient and home care services for frail elders and patients with late stage cancer or other irreversible illnesses. We believe in the integration of medical and psychosocial-spiritual care to bring healing, comfort, dignity and peace to the clients through the love and care of a healing community according to the core values, mission and vision of Haven of Hope.



Nov 2006

Beliefs and Core Values

- We believe that frail elders and patients in the last stage are entitled to holistic care through an integrated care team.
- We believe that Quality of Life especially comfort, dignity, respect and peace takes on an especially important meaning for terminally ill people and could be much enhanced by good symptom control, psychosocial support and spiritual care.
- We believe that physical death is part of life and through the sacred grace of God in Christ Jesus, man could have the hope of eternal life.
- We believe that care-givers and family members of the patients have special needs under the Holistic Care Model. They will also be supported with grief counseling & bereavement care.

Haven of Hope Holistic Care Centre

- Specialists led in-patient Service (50 Beds)
- 24-hour medical coverage & skilled nursing care
- SOPD & Home Care Service
- Integrated Rehabilitation Services
- Psycho-social-spiritual Care
- Bereavement Counseling
- TCM and Acupuncture
- Clinical Massage & Aromatherapy

Quality Infirmary Care

Comprehensive Geriatric Rehabilitation

Holistic EOL Care

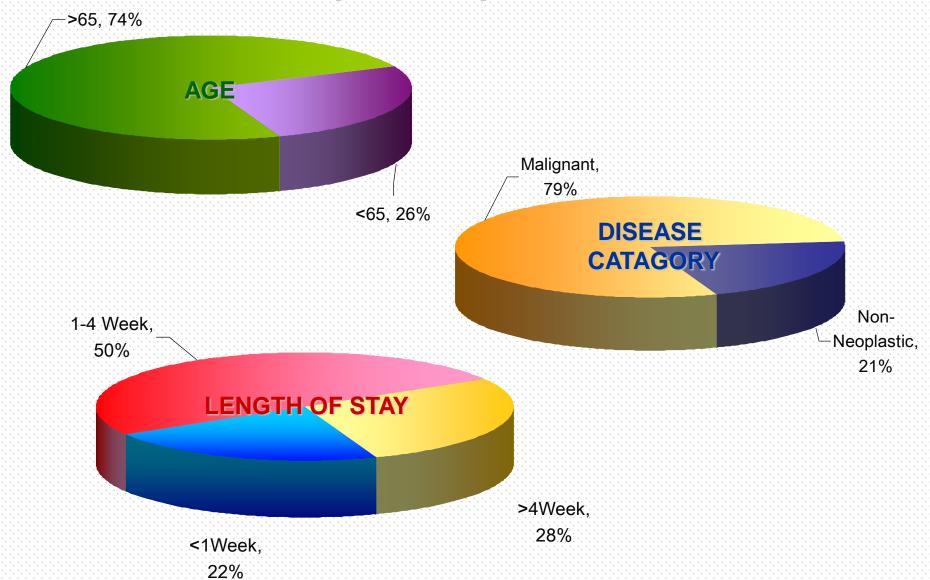
A Haven of Hope 盼望之灣、平安之所

- In Holistic Care Centre, we focus on good symptom control, Quality of Life, Reconciliation of Relationships, Healing of the Inner Person, and Spiritual Transformation and Growth
- 徵狀紓緩
- 生活質素
- •關係復和
- •心靈醫治
- 內在的轉化及成長

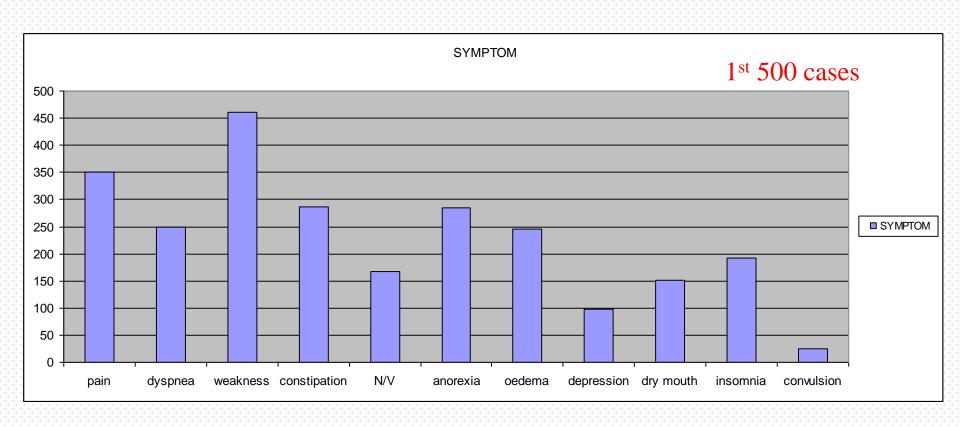
"所以,我們不喪膽. 外體雖然毀壞, 內心卻一天新似一天"

林後4:16

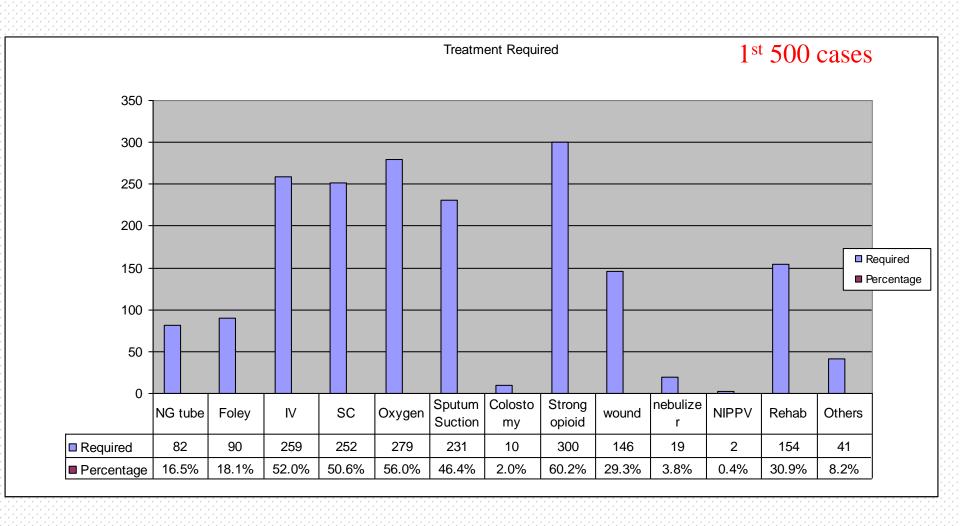
Client Profile (n=500)



Common Symptoms



Treatment Required



"Embrace the Last Journey with Love" "An Option outside Hospitals"

Caring atmosphere and tranquil environment



"Embrace the Last Journey with Love" "An Option outside Hospitals"

 Well-designed facilities to fit client's needs



Embrace the Last Journey with Love: The integrated care team



Walking an Extra Mile with our Clients

願望成真了! 與家人一起在病房共享日式鐵板燒! Last Wish Comes True!

Tears yes but also laughter & joyous moment

A Rewarding Ministry Letter from patient's family

The centre has clearly lived up to its name in providing holistic care to mother. Though the great team efforts of the medical, nursing and caring staff, we experienced what professional palliative service means to the patient and how emotional support is rendered to the patient's family members at difficult times. The ambience at the Centre and the loving relationship built up between mother and the caring team had made it possible for her to remain what she always is - strong, dignified, calm and loving till the final moment. We are particularly grateful to the Centre for accommodating numerous visitors during weekends and in the last days so that everyone had a chance to talk to her leisurely and to bid her farewell. This included in particular visits by mother's two young grandchildren whom she was so fond of. I believe she has left without regrets.

Dr Amony Leude

express our deepest gri

Indiringhing britt high between natures many digigified, calm stril between terminal what she always is a strong digigified, calm stril between terminal what she always is a strong digitified. Colore for accommondational terminal to consider the calm of the string strip of the string string week, before the last stry so that over your band in the string with the training straining st

(Mrs Carrie Late)
Daughter of Madam Lam Lung-las

relevant of our appreciation, phosps (and otherwise) a denotation chaque

A rewarding Ministry Letter from patient's "family"

感謝你及你的團隊在陳老師步入生命最後一個程之際,為她安排一個寧 靜舒適的空間,讓她可以平靜安穩地返回天家,能得到這樣的服侍,是 上帝給她的福氣。

我凡特別感謝貴院三樓的醫護隊伍,包括黃醫生及一群護士,他們親切, 體貼的態度和言辭,都讓陪伴陳老師走最後一程的親友獲得安慰與支持, 「不單讓去者善終,也讓留者善別」,充份體現寧養服飾的價值,也足 見貴院 的領導與隊工文化的崇高精神

"Helping the patients to pass away peacefully and supporting the family and friends to bid a good farewell"

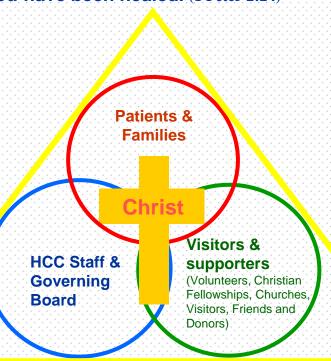
Christ-centred Healing Model



He himself bore our sins in his body on the tree, so that we might die to sins and live for righteousness; by his wounds you have been healed. (1 Peter 2:24)

THE PLACE

- Comforted healers showing compassion of God and comforting others in diseases and suffering (2 Cor 1:3-5)
- The three parties are inter-related, they have their own roles but they also share the same humanity
- They experience Christ's presence through their interaction and service in love
- Healing in Christ brings salvation & transformation. spiritual growth & development



- A 'Peniel', where people meeting God (Gen 32:30)
- A supporting environment with ample opportunity to get in touch with nature
- A warm and peaceful atmosphere that makes everyone feel welcome and valued
- A system of management based on Biblical values

A Healing Community

A Haven of Hope

A Holding Environment

Christ-centred Healing Model (I)

Inner Healing & Renewal

 "Although illness may be incurable and death inevitable, healing is possible. Orientation of focus on psycho-spiritual aspects of the whole person in the presence of a supportive environment could help patients in regaining a sense of wholeness."
 (by Dr. Yvonne Yi-Wood Mak, HKSPM Newsletter April 2004 P.14-17)

- "...because God has said, "Never will I leave you;
 never will I forsake you." (Hebrews 13:5)
- "Therefore we do not lose heart. Though
 outwardly we are wasting away, yet inwardly we are
 being renewed day by day." (II Cor 4:16)



Christ-centred Healing Model(II)

The Gospel of Reconciliation

"For God was pleased to have all HIS fullness dwell in him, and through him to reconcile to himself all things, whether things on earth or things in heaven, by making peace through his blood, shed on the cross."

Colossians 1:19

Reconciliation with self, others and GOD

"The 3R Phenomenon leading to a peaceful death"

The need to love and loved, as well as to forgive and be forgiven are inherent in our human nature. Restoring the broken relationships with significant others and our Creator God brings peace to the patients.

(by Ms K Y Lo and Dr A Leung)

HKSPM Newsletter April 2004



Glimpse of Heaven

- a) 2008, True Stories of Hope and Peace at the End of Life's Journey Trudy Harris:在這時刻,我們佇立在聖地的邊緣·未來天堂的一瞥,是生命中最重要的最後一堂課,在此生之後不畏懼,可以有美好的盼望·
- b) 2001,「共譜生命休止符」 靈實醫院盼望病房的故事

梁智達: 聖經啟示錄裡描繪的天堂極其美麗, 當你細味此書文章點滴,可否跟我們一樣 感受到天堂的門已為離世的病友開啟,也 讓我們這群送別他們最後一程的人,對天 家作了驚鴻一瞥呢?



生命的學習 AHAVEN OF HOPE 盼望之灣,平安之所

"The peace of God, which transcends all understanding"
"神所賜出人意外的平安"

腓立比書4:7

"We have this hope as an anchor for the soul, firm and secure" 我們有這盼望,如同靈魂的錨,又堅固,又牢靠"

希伯來書6:19

Merits & Limitations

Merits

- Autonomy
- Christian atmosphere & culture
- Flexibility e.g. visiting hours
- Individualized care & tailor made care plan
- Geriatrics specialist care
- Christ-centered PSS care model
- Privacy & tranquil environment
- Alternative & complementary therapy

Limitations

- Lack of hospital support

 e.g. blood transfusion service
- Relatively small operation (economy of scale)
- Lower salary package comparing to HA & private hospitals
- Transport & geographical location
- Training for doctors
- Self-financing mode of operation

Types of patients suitable for care at the Holistic Care Centre

- 1. Patients needing holistic End-of-life care using a palliative approach (e.g. late stage cancer or end organ failure).
- Patients upon discharged from hospitals and needing active rehabilitation under close medical supervision (e.g. fracture hip, stroke, Parkinson, and swallowing problems with aspirational pneumonia.
- Long Term Care residents who, upon deterioration in physical conditions, could no longer be adequately care for in ordinary nursing home / C&A home settings but prefer "an option outside hospital" with personalised medical supervision & nursing care.
- 4. Elderly patients requiring Specialist Geriatrics / Rehabilitation assessment and quality nursing care.
- 5. Respite care for frail elderly patients with chronic illnesses.

Cases *not* preferred for admission include:

- 1. Severely depressed / agitated patient with risk of suicide
- Delirium / severe confusion of recent occurrence that has not been investigated
- 3. Unstable psychotic patients
- 4. Malignant wounds with difficulty in controlling bleeding
- 5. Patients with bleeding or with conditions that requiring frequent transfusions or use of blood products
- 6. Fractures that require special equipment / expertise for treatment
- 7. Infectious cases needing active treatment
- In addition, there is a quota for the following categories of patients:
- Maximum 1 patient on Bipap Respirator and only portable home Bipap;
- b) Maximum 1 CAPD patient;(at any one time and must be cared for in single rooms)

Reference: Average cost for residents according to disease types and room choice

	4-bed room		Single room	
	per week	per month	per week	per month
Long Term Care	around \$10,395	around \$44,550	around \$14,595	around \$62,550
End-Of-Life Care (Cancer Case)	around \$14,350	around \$61,500	around \$18,550	around \$79,500

- i. The above are average figures of 10 representative patients from December 2012 to February 2013. According to their own health conditions, the residents might choose different medical, nursing and/or rehabilitation treatment. Therefore the figures are <u>for reference only</u>. Figures include the cost for weekly consultant medical round, isolation facilities, drugs, laboratory investigation, X-rays, rehab therapy, special nursing procedures (e.g., wound dressing, tube feeding), meal and laundry.
- ii. The cost will be higher for the first and the last week when usually more medical treatments are necessary. If the drugs are mainly supplied from the referring HA hospitals or specialist clinics, the cost would be lower.

2012/13 Statistics

- 1) Average bed occupancy: 65.5%
- 2) Average Length of stay: 53.8
- 3) Total number of admission: 117
- 4) Total number of death: 55
- 5) Total number of patients accepting Christ: 19
- 6) Total number of funeral/farewell services held in the Centre: 8
- 7) Staff turnover rate: 4.17%