

COVENANT HOSPICE:

Pro-life to the end of life

*By Anita Crane and
Sean Gallagher*

After the infamous death of Terri Schiavo at Woodside Hospice in Florida, many Americans became alarmed and began asking what a hospice should be. Greg Patterson is answering the question.



Photo by David Stephenson

Greg Patterson



As the founder and president of Covenant Hospice Services based in Lexington, Kentucky, Patterson's staff serves 190 patients in central and northern Indiana. He says that his organization operates according to "faith guided" principles. Patterson established Covenant first to give patients the best possible care, but also to assure that the patients' families could be at peace with the care provided to their loved ones—and he says this distinguishes Covenant from numerous other hospice organizations



Photo by Bonnie Hobbs

in the United States.

"There's a big push toward euthanasia in the hospice industry," Patterson said. "Why are they so misunderstanding the general principles of hospice, which is to do nothing to either hasten or postpone death? That's a founding hospice principle. Well, they're hastening death. So there's a little bit of frustration and anger.

"Let's hold off on morality for the moment. Euthanasia doesn't make sense even if you only care about money. After all, the way we get paid is based on a per diem, which is a flat rate per patient/per day," he explained. "And so the longer that we have patients in our care, the more we're going to get paid. Why would any individual in his right mind want to shorten the revenue source for his company? It's baffling to me.

"Not-for-profit hospices make up about 65 percent of all hospices today," he revealed. "They're declining every year, rather quickly; because people are realizing that it's good business.

"Some for-profit hospices are greedy about it," Patterson continued. "They try to squeeze every penny. They may cut corners.

"Because we have a philosophy of caring for our patients, we don't look at the cost," he said. "We look at the care first and the cost comes second. We accept that with some patients, we're going to lose money. But other patients might not need a lot of medications and we'll profit on that—not because we're cutting costs, but because that's where the chips fall."

Guiding principles

The Covenant Hospice team is comprised of more than 100 medical professionals, chaplains and office staff serving patients with terminal illnesses. Patients may receive Covenant's care wherever they choose to live; in their homes, assisted living facilities or nursing homes.

Over the years, when staff members would ask where he came up with such good policies, Patterson—who is Catholic—enjoyed their recognition of the Catholic Church's doctrine. For years Patterson had volunteered and worked in various aspects of long-term care for people with medical conditions. Then in March 2002, Patterson established Covenant Hospice Services with policies directly based upon the Church's teachings about end-of-life issues. The teachings are stated in the Catechism of the Catholic Church, paragraphs 2276-2279.

The Church's Catechism primarily commands "special respect" for "those whose lives are diminished or weakened."

It also defines euthanasia as directly "putting an end to the lives of handicapped, sick or dying persons" and notes that this "morally unacceptable" act can occur indirectly, through the omission of ordinary care that is due to the patient.

Taking into account the complexity of end-of-life conditions, the Catechism then says that medical care which is "burdensome, dangerous, extraordinary or disproportionate to the expected outcome can be legitimately ended." Such a decision, made by the patient or the patient's chosen representative, is a recognition of the "inability to impede" natural death.

Effectively, it is recognition of someone's birthday into eternal life—which the Church celebrates often, if we consider that a saint's feast day is usually the anniversary of his death.

Finally, the Catechism teaches that "ordinary care" due to a patient cannot be morally discontinued, even if death is imminent. However, it does say that an increase in the dosage of

painkillers, which may shorten a dying person's life, is legitimate if the hastening of death is not the intended outcome.

A motivated staff

In January 2003, Chris Ice, also a believing Catholic, moved to Lexington where he met Patterson and the two men became friends. Two years later, Ice became one of Patterson's closest advisors and now he works as a consultant.

Ice knew something about hospice work because one of his grandmothers, who died in 1991, had received care in a hospice situation. "I was very impressed with how they did things and took care of her," said Ice. "So I kind of had an inkling of what hospice was all about, but I was not aware of the inner details until I got involved with Greg."

"The guiding principles that Greg Patterson had laid out for the hospice were very enticing," Ice said. "To be able to apply those principles in daily work life was a big factor. Seeing what hospice can do for patients and their families was also very enticing."

"It's been extremely rewarding from a perspective of giving people the quality of life they deserve at

the end of life," Ice reflected. "There are two times when people are extremely vulnerable—in the womb and at birth—but it's also at death. And having the opportunity to watch our staff take care of patients and their families, especially giving our patients a quality of life at the end of their lives, is very rewarding."

Having worked in hospice care for more than 20 years, Helen Welter has seen the industry develop from its infancy. But she noticed something special about Covenant Hospice and it convinced her to accept the position as its education coordinator based in Indiana.

"I was really impressed because their mission is to have God in the center of everything they do," Welter said. "And that's a really unusual attitude."

"Hospice is always spiritual because it directs itself to the higher psycho, social and spiritual aspects of people," she said. "But for an organization to flat out say that God is going to be in the center of everything we do, that's pretty powerful."

Jacqueline Criss, the organization's clinical director, also experienced the interrelationship between pro-life principles and compassion soon after coming to

work at Covenant Hospice as a registered nurse.

"Those principles are really what I've always lived by—just having respect and integrity and a God-centered life," said Criss. "That's been with me through my work always. Especially now in this hospice setting, it's really what drives all of us, I think, here in Covenant. We have it in our mission statement," she emphasized. "All of the staff has that to carry around with us. We have it framed in our office. It's so much more evident."

Criss and Patterson both interview everyone who applies to care for patients. "We choose our staff carefully," said Criss. "We take a lot of time in choosing our staff because we want A+ people so that our patients will have the best of care. And people with principles and integrity and respect will only give the best care. It will be evident in their lives as they go about their work."

"Our goal is to relieve a patient's pain and suffering and it takes a certain type of person that can work day in and day out to relieve suffering," said Criss.

Hoping for a wider impact

Covenant Hospice, then, takes an integrated approach in the care it gives patients. The work involves faith in God, pro-life principles and compassion so that patients can experience the joy of life to the end of life.

But Covenant Hospice is just one organization among scores of independent hospices across the country. For all of the organizations like Covenant, there is a greater number of hospice organizations that take the opposite approach as they compete, in a sense, for the hearts and minds of those with a terminal illness.



Photo by David Stephenson

Patterson and Chris Ice

Nevertheless, Patterson and Ice hope that, little by little, Covenant Hospice can bring about a positive change in care for the dying.

"We belong to the National Hospice and Palliative Care Organization, which officially opposes euthanasia. But in 2005, NHPCO gave its Heart of Hospice award to Hospice of the Florida Sun Coast, the company that ran the hospice where Terri Schiavo died," Patterson said.

"NHPCO also set up a 22-state speaking tour for Bill Colby, the pro-euthanasia attorney who won the case for Nancy Cruzan's parents to deprive their daughter the ordinary care of nutrition and hydration," said Patterson.

"And Ann Jackson, president of the Oregon Hospice Organization, advocates physician-assisted suicide but she's on NHPCO's state issues subcommittee," he said. "Last year she was on a panel at NHPCO's annual conference claiming that every hospice in Oregon favored physician-assisted suicide. Then a nun spoke up and protested because the Catholic hospice where she works is against it. So even our national hospice organization is leaning towards euthanasia and it's frightening."

"Hospices have gotten a bad name for a lot of good reasons,"



Photo by Bonnie Hobbs

acknowledged Ice. "If you look at Oregon's state hospice organization endorsing physician-assisted suicide, it's very disturbing. To me, that is an alternative toward despair. It's a horrible alternative."

"We are somebody different," Ice declared. "When you're sharing the truth, there is strength in that. And that's what we continue to do."

"We are open to partnering with nursing facilities that share our values and our mission," said Ice. "We see that as an opportunity, if someone wants to partner with us to provide hospice within the facility, which could share that same message and further it."

Patterson and Ice both know that any fruit from their own hard work depends on help from above. "This is all up to God's will," Ice said. "I know Greg has a vision and a mission. With God at our side, we will prevail."

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Covenant staff members with a patient



Photo by Bonnie Hobbs