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Employee Profile
Teaching and Reaching Out:
Hospice Social Worker Helps Patients and Families Cope

Sue Newman loves getting to know people, even though her work requires her to meet people at the worst time of their lives, when they or a loved one is dying.

As a social worker with Lutheran Hospice, Sue works with patients who have been given a prognosis of six months or less to live and have chosen to receive palliative care, or treatment to make them comfortable, rather than treatments to try to cure their conditions. One of the main goals of social workers in hospice, says Sue, is education.

“I talk with patients and families about living wills and about planning so that their wishes for end-of-life care can happen,” says Sue. “If a patient doesn’t want to have CPR administered, for example, I arrange for a Do Not Resuscitate order for that patient.”

Sue also does a psychosocial assessment of the patient’s and family’s coping style when the patient enters Lutheran Hospice care. She says, “The assessment helps me see how the family deals with stress so that I have an idea of what their needs are going to be during this very stressful time.” Sue varies her counseling from family to family. “Some patients and families want to talk and others don’t; I let them do what’s comfortable.”

Ashton Carroll, executive director for Lutheran Hospice, says that the organization’s social workers, all of whom have masters degrees, are problem-solvers for the families. “Hospice social workers provide emotional support, but they also help families find resources for other problems, like transportation or financial problems.”

Sometimes these problem-solving skills are used in coordinating visits between dying patients and relatives they want to say goodbye to. Sue Newman has arranged for several visits from incarcerated prisoners to their dying relatives in nursing home facilities. In one situation, Sue helped a hospice patient, whose illness kept him from traveling long distances, to visit a brother who was not allowed to leave a prison facility.

Sue explains, “I made many phone calls and got assistance from Senator Strom Thurmond’s office, who helped arrange for the brother to be transferred to a facility closer to the patient. Then one of our nurses went with the patient to visit his brother in the prison for about an hour. We believe the patient was hanging on just for this visit because he died two weeks later.”

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Social workers have to take care of themselves to avoid burnout, says Sue Newman. “On weekends, I do cross-stitching, I play with my dog, and I take trips with my husband. It’s not that I don’t want to think about the families I’m working with, but I have to care for myself, too.”

Sue says that the spiritual basis of Lutheran Hospice also helps hospice staff members with their stressful jobs. “The staff here does devotions together, we celebrate communion on special occasions—we are close as a team,” she says.

In spite of the sadness and stress, Sue says it’s rewarding to be a hospice social worker. “Though it may sound strange,” she concludes, “it’s good to be a part of someone’s death when they die a good death—when they die with acceptance, when the family is there and is supportive, when they have no pain. It’s good to help make that happen.”

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