

## **Soundbite Script**

### **Julie Brock, Palliative Care Nurse, OSF HealthCare**

“I appreciate that there is a month dedicated to hospice and palliative care. First of all, it designates the importance of hospice and palliative care, but it also brings to light the education and the opportunities to be able to talk and educate people about what we do.”

### **Dr. Trent Barnhart, Northern Region Medical Director, Post-Acute Care and Inpatient Palliative Care, OSF HealthCare**

“Palliative care is more upstream. It may be that you have several years left to live. You may still want to get some treatments. You may want to be back in the hospital, and this is where you have a team of health care professionals that will support you on how to best make your decisions when you know it may involve more treatment and just focusing on end of life.”

### **Dr. Trent Barnhart, Northern Region Medical Director, Post-Acute Care and Inpatient Palliative Care, OSF HealthCare**

“Over the past 15 years it’s become more and more evolved to where doctors are thinking ‘is this something we really want to offer our patients? Is it really going to be helpful?’ To help patients and families to recognize that just doing more because you can do more doesn’t necessarily help you. Whether it’s hospice or palliative care, the medical team, which includes nurses, doctors and social workers coordinate emotional and spiritual support for the patient as well as the caregiver and family with emotional and spiritual needs.”

### **Julie Brock, Inpatient Palliative Care Nurse, OSF HealthCare**

“The most important thing in what we do is building trust with our patients and families. Sometimes that happens right away and sometimes that develops over time. But caring for people at the end of life is delicate, it’s intimate, it’s the most intimate time you can come into a person’s life, so developing trust and developing a strong relationship with them right away is very important.”

### **Julie Brock, Inpatient Palliative Care Nurse, OSF HealthCare**

“I cannot change a person’s outcome. I don’t hold that power in my hands. What I can do is make the time a person has, whatever time that is, between A and Z, between X and Z, whatever I can do to make that time the very best, with the best quality of life, I’ve done my job. That is the highest honor I could ever have, is walk with somebody, a patient or family, through that time.”