



Suggested QUESTIONS FOR CANDIDATES 10.17.07

General Comments:

To the extent possible, speak from personal experience. It is helpful to anchor your question in your or your family's personal experience.

For instance:

When my father had pancreatic cancer his doctor seemed only able to talk about the treatments available, he seemed unable to help with my father's pain, digestive problems or his depression. I know that the federal government provides funding for medical schools. As President what will you do to improve the training doctors receive in treating pain, caring for frail elders, or caring for people who are dying?

Another example:

Two times when my grandmother was in a nursing home, we found her lying wet in her bed. She said she had been pushing the button for the nursing aide, but no one came. I understand that staffing is a problem – and that it may be getting worse. As President what will you do to ensure adequate staffing so that patients and families can be confident of getting their basic needs met?

What happens if the candidate challenges the question because it sounds like it came from an organization?

The best response is to be honest and to reaffirm the question. Here's an example.

Candidate: That question sounds like it was prepared by this Reclaiming the End of Life group.

Citizen: I have benefited by the information and research compiled by the Reclaiming group. I think they are addressing one of the most critical problems facing our nation. But the question is my own and sincere [Senator/Governor.] So, I'd like to ask again...

Questions to consider:

1. MEDICAL EDUCATION

Personal version:

Q: When my father had pancreatic cancer his doctor seemed only able to talk about the treatments available, he seemed unable to help with my father's pain, digestive problems or his depression. I know that the federal government provides funding for medical schools. As President what will you do to improve the training doctors receive in treating pain, caring for frail elders, or caring for people who are dying?

Professional version:

Q: The Institute of Medicine has said that the training of American doctors and nurses fails to provide them the attitudes, knowledge, and skills required to care well for dying people. Today, medical students are far more likely to learn how to deliver babies than to treat pain, care for frail elders or people who are dying. As President, how would you address this deficiency?

Q. Financing: Each year, approximately 400,000 American families go bankrupt due to medical expenses for serious, chronic illness. This is a source of suffering that comes from our health care system rather than disease. What will be your plan for resolving this financial suffering that afflicts ill Americans and their families?

2. PAIN TREATMENT

Personal version

Q: My mother lived with disabling pain from osteoporosis during the last years of her life. There were no doctors or pain programs who were able to significantly help her. Yet I have read that good pain treatment does exist. Why isn't it available? And what will you do as President to make sure that doctors and hospitals provide the best pain treatment possible to people who need it?

Professional version

Q: Studies confirm that at least 50 million Americans live with chronic pain. In general pain is poorly treated. Doctors are inadequately trained to competently assess pain and are often reluctant to prescribe the medications patients need. Multi-disciplinary approaches that include medications and behavioral treatments are effective in improving function and quality of life for people in pain, but comprehensive pain centers have largely closed due to lack of reimbursement. As President, how will you address this serious public health problem?

Personal version:

Q: I am one of the over 50 million Americans who live with chronic pain. As you may know, in general pain is poorly treated. Doctors are often reluctant to prescribe strong pain medication even when they are clearly indicated. How would your Administration address this problem?

Professional version:

Q: At least 50 million Americans live with chronic pain, yet we know that in general pain is poorly treated. Currently, pain accounts for more than 20% of medical visits and 10% of prescription drug sales, but far less than 1% of National Institutes of Health research funds. As President, how will you balance the real health needs of American people with the research investment our nation makes?

Professional version:

Q: Inadequate treatment of pain is a national health problem that cripples the lives of many Americans. After years of collaborating with national pain specialists, the Justice Department and DEA have begun investigating physicians who treat patients with pain on the basis of numbers of pills or milligrams of medication prescribed, criteria that make no sense. As a result, doctors are reluctant to prescribe strong pain medication even when they are clearly indicated. How would your Administration address this problem?

3. LONG TERM CARE

Personal version:

Q: On two occasions when my grandmother was in a nursing home, we found her lying wet in her bed. She said she had been pushing the button for the nurse's aide, but no one came. I understand that staffing is a problem – and that it may be getting worse. As President what will you do to increase staffing so that patients and families can be confident of getting their basic needs met?

Professional versions:

Q: Staffing in America's nursing homes and other long-term care facilities is acknowledged to be woefully inadequate. Studies suggest that up to 30% are malnourished because there are not enough aides to help people eat at meal time. Yet, nursing homes are unable to hire or retain sufficient staff. As President, what would you do to correct these threats to the safety and security of our frail elders?

Q: Public health and Congressional studies have found that many nursing homes are dangerously understaffed and good people who work in them are beleaguered. As a result nursing home residents' often don't get the help they need for the most basic activities, such as eating or with going to the bathroom. Indeed, in the Reclaiming the End of Life Initiative's Citizen Forums earlier this year, not a single person said they wanted to be in a nursing home during the last part of life. As President, what is your plan for reforming long-term care so we do not fear how we will face the end of life?

4. FRAIL ELDERS

Professional version:

Q: According to the Centers for Disease Control, currently a quarter of men and half of women 75 years or older live alone. Elderly people who live alone are at high risk for falls or other emergencies that leave them in peril without help. As President what plan do you have for assisting communities in making sure that people are secure in their own homes?

5. FAMILY CAREGIVING

Personal version:

Q: When she was caring for my uncle who had Alzheimer's disease, my aunt became ill herself and needed to be hospitalized. Because she was his main caregiver, my uncle also ended up in the hospital and needed to be placed in a nursing home. Things went from bad to worse and he died there a few months later. Since his death, I've heard dozens of similar stories. As President, what would you do to support the millions of family caregivers in the US?

Professional version:

Q: A variety of research has documented that family caregivers are at risk of becoming ill themselves and even dying prematurely due to the strain of providing care. Nearly one in four American families is caring for a frail or chronically ill adult. As President how will you address the needs of these millions of family caregivers in our country?

6. END-OF-LIFE CARE

Personal version

Q: When my husband was living with advanced stages of lung cancer he was told that he would have to give up chemotherapy to receive hospice care. He wanted to fight to live as long as possible, so he refused hospice care until the last week of life. When the hospice got involved, they were marvelous. Why does Medicare force people to choose between treatments for their disease and hospice care for their comfort and their family's support?

Personal version:

Q: My father died of heart failure last year. We knew that it was incurable, yet no one really guided him or our family in making decisions that enabled her to die comfortably. He wanted to be at home in his last days, but as things turned out, he ended up dying in the hospital. Hospice was mentioned, but it felt like giving up hope. We understood that he would have to give up any more cardiac treatments to receive hospice care. My father was a fighter and to the end the doctors felt that there might be more treatments that could prolong his life. As President, what would you do to make hospice care more available to people who are dying, but still want treatments that might extend their life?

Professional version:

Q: Approximately 2.4 million Americans die each year. Even though most people die in old age and as a result of chronic illness, most Americans, when asked, say they want to be at home when they die, currently over 50% of deaths occur in hospitals, including 20% in ICUs. As President, how would you approach the challenge of supporting frail and chronically ill people in spending their last days at home?

Professional version:

Q: Hospice is widely acknowledged as the gold standard for end-of-life care. Yet, Medicare requires ill people to choose between treatments for disease that might enable them to live longer and hospice care for their comfort and quality of life and their family's support. As a result only about 24% of Americans receive any amount of hospice care before they die and usually for less than 3 weeks. What would you do as President to improve this situation?

