VOLUNTEERS, YOU ARE APPRECIATED!

Volunteers turned out in masses for the HOWC’s annual Volunteer Appreciation Luncheon, and learned that they provided more than 16,300 hours of service in 2009, and drove more than 109,500 miles to do it!

“The huge hearts you have go way beyond the numbers,” said Mark Philbrick, VP of Clinical Operations. “We appreciate your dedication.”

CEO John Thoma echoed the gratitude, saying that HOWC had a watershed year in 2009, building the new campus, hiring 70 new staff, and serving more than 2,400 patients and families.

“We saw an increase in the quality and satisfaction scores from our patients and families,” he said, praising volunteers for their role in that.

The luncheon, held at My Sister’s Garden on April 20 as part of National Volunteer Appreciation Week, featured music by pianist Jane Thompson and a beautiful medley of songs by soprano Lora Fabio.

Keynote speaker Michael Messner, a retired hospice volunteer coordinator from Charlotte, told the audience that hospice is the deal of a lifetime because hospice volunteers receive the priceless gift of learning how to live by helping those who are dying.

Among the lessons he’s learned over the years, he said, are to walk your talk, maintain trust, and look for the good in everyone.

Volunteer Coordinator Marcy Samuels also thanked the volunteers, telling them, “No matter what the request, we always find a willing soul to help out. You go above and beyond, and we thank you!”
BY THE NUMBERS

- **420+ volunteers**, up from 150 three years ago
- **16,372 volunteer hours** worked in 2009, up from 9,162 in 2008 (the equivalent of 3.5 extra employees)
- **5,527 patient visits** in 2009, up from 3,570 in 2008
- **109,504 volunteer miles driven** in 2009, an increase of 44,000 from the previous year
- In 2009, 18 volunteers and 26 staff represented HOWC as ambassadors, **attending 133 events and reaching 3,600 people**

CANCER AND FRIENDS

(read at the luncheon by Volunteer Coordinator Ginny Rowe)

When I was first diagnosed with cancer:

My FIRST friend came and expressed shock by saying, “I can’t believe that you have cancer; I always thought that you were active and healthy.” He left and I felt alienated and somehow very different.

My SECOND friend came and brought me information about treatments used for cancer and said, “Whatever you do, don’t take chemotherapy. It’s a poison.” He left and I felt scared and confused.

My THIRD friend came and tried to answer my “whys” with the statement, “Perhaps God is disciplining you for some sin in your life.” He left and I felt guilty.

My FOURTH friend came and told me, “If your faith is great enough, God will heal you.” He left and I felt guilty.

My FIFTH friend came and told me to remember, “All things work together for good.” He left and I felt angry.

My SIXTH friend never came at all. I felt sad and alone.

My SEVENTH friend came and held my hand and said, “I care. I’m here. I want to help you through this.” He left and I felt loved.

– Linda Mae Richardson in *The Victory in the Valley* (Submitted by FSV Ray Moore).
HOWC recently passed our accreditation requirements as evaluated by the Accreditation Commission for Health Care (ACHC). Overall, we were given high marks, thanks to the hard work of staff and volunteers.

However, we need to pay more attention to complying in two very important areas: maintaining proof of current auto insurance and timely documentation of patient visits.

The following areas were cited by ACHC:

- **LACK OF ADEQUATE AUTO INSURANCE INFORMATION.**
  Current insurance information was missing from the volunteer file ACHC recently reviewed. Staff had to call the volunteer to immediately bring the information to the office, which she graciously did.

  ACHC requires that ALL volunteers have on file proof of valid auto insurance and driver's license whether or not the volunteer uses a car in the performance of HOWC duties.

- **INCOMPLETE DOCUMENTATION OF PATIENT VISITS.**
  50% of the documentation (FSV log sheets) for scheduled volunteer visits was missing from one of the patient charts reviewed by ACHC.

  HOWC is accountable for the effective use of its resources to meet the specific needs of the patient and family. The number of FSV visits and the purpose of these visits are part of the patient's plan of care. The plan of care defines which services the patient and family receive from hospice, why we provide these services and how the patient or family expects to benefit from them. The accurate contents in a patient’s chart confirm that we are doing what we say we are doing.

  FSV visits are a critical part of patient plan of care. Volunteers are required to turn in log sheets for each scheduled visit. (We covered this in training!) This should be done within a week after the scheduled visit. If a scheduled visit is changed for any reason, you must notify the volunteer coordinator so that the patient chart is kept up to date.

Please see the email attachments included with this newsletter. They will refresh your memory about how to complete an activity log that provides appropriate information. Thanks for your extra attention to these items, and for helping us to remain in compliance!

**milestones**

Congratulations to our volunteers who celebrated anniversaries with us in April! Thank you for your continued dedication.

- **12 YEARS**
  - Dan Harrod

- **10 YEARS**
  - Jay Foliano
  - Priscilla Massenburg

- **9 YEARS**
  - Barbara Brown
  - Ann Fruehauf
  - Tina Glaserman
  - Donna Langley

- **7 YEARS**
  - Jane Currin
  - Lynda Davis
  - Jean M. Harris
  - Jean S. Harris
  - Ray Moore

- **6 YEARS**
  - Tom Alexander
  - Dyck Dewid
  - Mary Kreul-Starr
  - Kay York

- **5 YEARS**
  - Jenette Hodge
  - David White
  - Betty Yancey

- **2 YEARS**
  - Sandra Davis
  - Joy Allen
  - Cinda Brandt
  - Betsy Carroll
  - Joan Chandler
  - Brenda Davis
  - Lynn Doyle
  - Cari Fisher
  - Chris Giles
  - Dane Johnston
  - Ellen Kelsch

*continued on page 4*
A CANDLE WITH MEANING

The next time you enter the Hospice Home, take a moment to notice whether the battery-operated candles are lit at the Volunteer Reception Desk and Caregiver Station. When a patient dies in our Hospice Home, we will turn on the candles to alert staff and visitors that we have had a death and that there may be newly bereaved people on site. Once the family is ready for the body to be removed, staff and visitors stand along the hallways to form an honor guard. Sometimes, family members will carry the candle while escorting their loved one from the building. The candles stay lit until the last family member or friend of that patient leaves the building. In this way, we honor the departed and their families.

VOLUNTEERS NEEDED AT THE HOSPICE HOME

Would you like to be a part of the team that offers compassion and care to the patients and families members who are staying at the hospice home? Do you have some time on Friday evenings or on weekends?

We have a special need for volunteers who are available to work 3- to 4-hour shifts between 8 am and 8 pm on these days. The responsibilities may include greeting visitors as they enter the building, assisting the staff with answering the phone, acclimating new families to the amenities of the facility, making certain that the common areas are tidy, or providing tours to potential residents and families.

If you are interested, please contact Marcy Samuels at 719-6845 or msamuels@hospiceofwake.org.

CONNECTIONS MEETING

In May and June, CONNECTIONS will offer a presentation by the ALS Association on Amyotrophic Lateral Sclerosis, most commonly known as Lou Gehrig’s disease. ALS is a progressive disease which results in the degeneration of the nerve cells in the central nervous system which controls voluntary muscle movement. It generally does not affect the mind, personality, intelligence or memory. ALS most frequently strikes people between the ages of 40 and 70. About half of the people diagnosed with ALS die within three years and about 90% within six years. The program will provide education about the disease from the patient’s and the family’s perspectives and suggestions for effectively working with these patients.

Remember to register ahead for either the May 10 or June 9 meeting. A light meal will be served.
MARK YOUR CALENDAR…

The next three months are full of great activities and meetings. Any items that earn Continuing Education Units are marked with our CEU butterfly symbol. As always, remember that dates are subject to change, so sign up ahead of time and double-check details with staff. Their phone numbers are on p. 1.

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FILL OUR KITCHEN

Help us fill the Hospice Home Family Kitchen and Dining Room with the pots, pans, utensils and dishes that families need to feel “at home” in the kitchen. To drop off an unwrapped donation, please leave it in the Foundation office (Administrative Building). Be sure to include your name and address so that we can properly acknowledge your generous gift.

We also have registered at Target for specific gifts. Visit any Target store in person, or online at www.target.com and search for List ID: 012399101300156, or click on Gift Registries + Lists and then the red header TargetLists and search for:

First name: Hospice of
Last name: Wake County

Thank you for giving our families a kitchen equipped for ease and enjoyment!

PLAN TO ATTEND…

The Triangle Caregivers Conference
June 22, 2010
8 am – 3 pm
McKimmon Center

This year, we’re partnering with Resources for Seniors and Alzheimers NC East and hope to reach out to 400 people who daily face issues for which they need respite, resolution and resources. Check out the web site www.trianglecaregiversconference.com for more information on the speakers, and to register.

REMINDER!
ANNUAL TB SKIN TEST DUE

All FSVs need to have a current TB test by September 30, in order to continue to visit patients.

If you have not had a TB test within the last 12 months, contact Shamika Spruill at 719.6707 for an appointment. They are available on the 2nd and 4th Tuesdays each month, and you will need to return for a reading 48-72 hours later. You may have the test at HOWC or at a clinic or doctor of your own choosing. (However, if you have the test elsewhere, you must provide documentation to HOWC and you WILL NOT be reimbursed.)

For your convenience, appointments also may be scheduled between 5 and 6 pm on May 10th prior to the May CONNECTIONS meeting.
Being “compassionately present” is a special gift that hospice volunteers and staff can provide to patients, and learning to care for others with love, wisdom and clarity brings rewards to both the patient and to us as caregivers, according to nationally respected hospice expert.

At a daylong workshop sponsored by Duke HomeCare & Hospice on March 19, Ostaseski shared his vision and experience about developing a compassionate presence. First, we must accept suffering as a very real part of life and death.

“To think that we can go through life with no suffering is magical thinking,” he said. “But while we can’t wipe it out, we also don’t have to create more of it. We can be willing to be compassionately present with the suffering of another person. We can attune ourselves to this.”

Compassion, he said, “snuggles up close to pain and allows us to stay with what would be otherwise intolerable,” and the key is learning to be present in a loving and caring way—to show that we are listening to patients, and sensing their needs and feelings.

In addition to our willingness to tune in to another’s suffering, we need to remember that we are all human, thus freeing ourselves and the dying person from particular roles, and we need to have a deep and abiding trust in the process of dying.

“We can feel ourselves to be in the presence of something larger than ourselves, but also be a part of it,” he said.

Ostaseski, founder of the Zen Hospice Project in San Francisco, has developed the Five Precepts© as companions on the journey of accompanying the dying, and offers them as inspiration and guidance for other areas of life, as well. They are:

1. Welcome everything; push nothing away (don’t approve or disapprove, but trust, listen and pay careful attention to the changing experience).
2. Bring your whole self to the experience (open to both our joy and fear, draw on your strength and helplessness, invite everything in).
3. Don’t wait (enter fully into this life and do what’s most important to you).
4. Find a place of rest in the middle of things (bring your full attention to this moment, to this activity, even in the midst of chaos).
5. Cultivate don’t-know mind (be open and receptive).

Ostaseski also reminded the audience that “compassion is attunement to where the other person is,” saying that “you cannot help another human being if you are trying to change them.” He also said “compassion pays close attention precisely to what matters most,” and that sometimes, the best gift we can give to someone who is suffering is to not try to do or say anything to make it better, but “just be present.”

“By staying with it, something deeper is revealed; without a willingness to open yourself to pain, you won’t get to the truth,” he said. “This is intimate work we are doing. We cannot do it from a distance. We must use our hearts and minds and bodies.”

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**Listen to Frank Ostaseski**

A 3-CD set of Frank Ostaseski’s conversations and lessons has been donated to the HOWC Library by FSV Kim Gazella, and is available for volunteers and staff to borrow.

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The Five Precepts reprinted with permission by Frank Ostaseski, Founder of the Metta Institute. For more information or to purchase CDs, call 415.331.9600 or visit www.mettainstitute.org.