



High Peaks Hospice & Palliative Care Inc.

Dignity, comfort and peace at the end of life.

Celebrating 25 years of caring

Serving the counties of Warren, Essex, Franklin, Hamilton, and St. Lawrence

OUR NEW LOOK FOR THE FUTURE...

You will notice that this newsletter has a new look and we have a new logo! As High Peaks Hospice and Palliative Care continues its positive evolution into the future one of our goals is to keep you fully informed by providing more up-to-date and diverse information that might be of interest to you about who we are, what we do, and who we serve.

We will include stories about and by our staff and volunteers as well as about our patients and their families. Staff will offer their unique perspectives about the work they do. There will also be information helpful to those who are facing end-of-life issues as well as information that focuses on our initiatives and campaigns. And, we will highlight the past 25 years of providing hospice care in your communities.

With this edition of *Reflections* we are also introducing our new logo. As in the past, our logo reflects the continuity of life (the dragonfly) and the intimate beauty of where we call home (the pine cone). The new logo, unlike the old, shows them as being interconnected in a gentle and unique way - not unlike the services we provide. We would like to thank Roy Chellingworth, Ron Reposh and Sandy Bandru of High Peaks Hospice and Palliative Care for their efforts in designing a logo that truly evokes the essence of what we do.



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***Focus on
a day in the life of a hph&pc medical director***



Dr. George Cook is a local family medical doctor and is also one of High Peaks Hospice and Palliative Care's six part time medical directors on contract to cover our 4,600 square mile service area. What does a day as a medical director bring to Dr. Cook?

Very early in the morning Dr. Cook is on rounds at the local hospital. He is meeting with a patient and his family who is struggling to make the decision to discontinue curative treatment for his lung cancer. He'll show them his lab tests, x-rays and pathology reports, and help them to talk about how this time might be best spent on quality time at home with family rather than coping with aggressive treatment that is not likely to extend his life.

A call on his beeper brings him to the emergency room to meet with a woman who has acute symptoms of her illness and is on hospice services. She is arriving with her hospice nurse who feels a consult and possible short hospitalization may be necessary to manage the problem. Dr. Cook orders blood work to ensure that she has a therapeutic level of medication, and will in due course adjust the dose of her pain medication so that she is able to return home from the ER.

He has a visit with a local man who has been considering suicide because of the illness he has and how he believes it will progress and cause his family and himself great pain. Dr. Cook has spoken with this gentleman before and he will now meet with him and his family to teach them how they can live with the disease and plan for a peaceful death instead of considering the option of suicide.

The local Interdisciplinary Team (IDT) of High Peaks Hospice and Palliative Care is meeting for review and Dr. Cook will attend where he gets an update on how each of the 20 patients and their families are doing. It's his opportunity to offer advice and "teaching moments" about palliative care or interventions that might be useful in supporting a particular patient or a family member. Thanks to electronic medical records he is able to bring up a patient's records at the meeting and have the latest information available for prompt and effective care.

After the IDT meeting he and a nurse case manager do home visits with two patients who have been on services almost 180 days. Medicare now requires that medical directors provide a face to face visit with patients to verify that they continue to be eligible for hospice services.

"It's been good for me to be going directly to some patients' homes. Not only do I see the patient, but I also see the absolute circumstances of that person's life. It gives me a perspective on their quality of life I would otherwise not have. Hospice is an incredible service for the community. I am so pleased to be a part of this great organization."

www.hphpc.org

MESSAGE FROM THE EXECUTIVE DIRECTOR



High Peaks Hospice and Palliative Care has had the honor of serving the families of northern New York with love and compassion for 25 years. We are proud to employ a team of highly qualified professionals whose expertise is matched by a dedication and generosity of spirit. They claim hospice work as their personal calling and it shows in all they do. It is truly a joy for each of us to come to work each day to care for our patients, families, and caregivers.

We know that no one ever wants to have to call upon hospice. While we affirm that death is a natural and inevitable part of life, we understand none of us ever wants to face the terrible news that a loved one's illness is terminal. We are especially sensitive in this difficult time, and we live by our commitment to provide support, comfort, and education to those facing the challenges at life's ending. We believe that each life is worthy of being celebrated, and we are privileged to assist our hospice patients and families as they establish their legacies and find peace during life's last journey.

I have observed and admired staff practicing skills through adverse circumstances and am awed by their dedication and demonstrations of love in the face of grief and difficult spiritual questions. With the goal of supporting patients and families, we have restructured our patient care teams. High Peaks Hospice and Palliative Care has always had a dedicated team of professionals offering nursing care and counseling. To use our resources more fully in the best interest of patients, each of the three offices (Tri-Lakes, Essex County, and Warren County) has created two distinct teams: the **Clinical Team** of nurses and the **Family Support Team** of counselors. Each team has a **team leader**, a highly skilled professional, who coordinates the work of that team. This new arrangement offers opportunities for a more holistic approach to improving the quality of life a person with a terminal illness as well as their loved ones and caregivers.

Hospice is about quality of life, the way we live at the end of life. The relief from pain and symptoms opens the door to the possibility of a peaceful and dignified life in our final months. The Clinical team of nurses and doctors ensures that the most effective palliative care is offered to ease pain and symptoms. The Family Support team of masters level social workers and counselors tends to spiritual concerns and grief as well as practical supports, ensuring that we add to the quality of day to day living. Our **Care Companions** are our volunteers from the community who offer compassionate support to their neighbors and friends facing the last months of their lives.

As we all know, the grief we suffer when a loved one dies begins long before they pass away. We need support to cope with our grief and stress far before the time of death. Bereavement and caregiver support will now begin for families at the time of referral and will be available for as long as it is needed.

We have two new outreach positions in each office. On the Clinical Team, we have dedicated a nurse position of a **Referral Management RN** whose primary responsibility is to meet regularly with doctors, nurses, skilled nursing facilities and senior living homes, and the medical teams and discharge planning committees at hospitals to maintain positive, ongoing communications with the medical communities. On the Family Support Team, the position which was once "Volunteer Coordinator" is now **Community Outreach Coordinator** and provides educational seminars to the general public about High Peaks Hospice and Palliative Care and engages individuals and groups to volunteer. The individuals holding this position have wide-ranging skills in public education, exceptional people skills and are team-oriented.

This past year we also took a giant technology step by implementing an Electronic Medical Records System which gave our entire staff the ability to access accurate and up-to-date patient records whether they are at the office or in the field. This has improved our services to our patients, accuracy in our recordkeeping, and kept us abreast with the technologies of our peers and partners in the medical field. Staff continues to work hard to make this system a reality, and I know they realize their hard work pays off in the best care for patients. We continue to address the challenges of working in our very rural, wilderness region of 4600 square miles; staying current in best practices of the hospice and palliative care world; and staying aware of evidence-based research that can improve patient care. *(continued on page 4)*

SNEAK PEAK INTO OUR FUTURE

A new program for High Peaks Hospice and Palliative Care, but not brand new for hospices across the country, is the concept of “*transitions*”. This type of program is designed for people with life-limiting (late-stage) illnesses or their family member/caregiver who can benefit from supportive, self-care healthcare coaching to manage the quality of life at home but who:

- ◆ Have a likely terminal prognosis of 7-18 months
- ◆ Need assistance stabilizing at home after an inpatient or emergency room visit
- ◆ May have a history of calling their physician on a continual basis for assistance or support
- ◆ May still be undergoing curative treatment for their disease
- ◆ Are not yet ready to make a decision about entering a hospice program
- ◆ Need assistance in learning how to access community and medical resources to manage their disease and/or the challenges it brings

What would HPHPC staff and volunteers provide?

- ◆ Patient self-care education and coaching
- ◆ Home visit and phone check-in calls
- ◆ Initial nurse and family support assessment
- ◆ Information and linkage to area community services
- ◆ A listening ear
- ◆ A connection with a trained Home Companion (volunteer)
- ◆ Companionship
- ◆ Emotional support
- ◆ Help with errands and shopping
- ◆ Respite for caregivers

continued from page 3)

In celebration of our 25th anniversary, we have redesigned our logo and are about to launch a new website. Our materials will be updated and have a fresh, user-friendly appearance. We have also created ***Circle of Friends***, a program to bring our friends and supporters closer to our mission. The annual meeting celebration will be hosted at the AuSable Club in Keene Valley on May 31st with *North Country Public Radio* Adirondack Bureau Chief *Brian Mann* as our keynote speaker. Brian has been a true friend with his 2010 public radio series, *The Hospice Path*, that follows a local family on High Peaks Hospice and Palliative Care. He has also authored several full-page newspaper articles about HPH&PC in 2011.

I'd like to send a special “thank you” to all of our devoted volunteers who are always available to help us with any project we are working on - patient and caregiver companionship, office work, fundraising and those who are willing to come at a moment's notice whenever a last minute need arrives. Thank you for giving your time and talents throughout the year!

As we celebrate the past 25 years, we must also plan for the decade ahead. 2011 and beyond will bring significant turning points for hospice and palliative care in New York State and across the country . Our ability to confront the challenges of rural healthcare has the promise to elevate our potential as a leader in caring for people as they near the end of their lives, as well as those who love them.



Shawn Galbreath
Executive Director

It's not how much we give but how much love we put into giving.

Mother Teresa

2011 - Celebrating 25 Years of Caring

As we move into 2011 we would like to share with you the exciting events that we have planned for our 25th year anniversary. We hope you find an event, or better yet many events, that you would like to participate in. Your support of our events will assure that we will continue to help people find comfort, peace, and dignity in our Warren County and Adirondack communities for another 25 years.

25th Anniversary Celebration Parties

We are planning to have parties in each of our clinical areas this summer and fall. While we do not yet know where the Tri-County party will be held (information forthcoming!) we do know that 25th anniversary celebration fundraising parties are set for:

July 24th - Keene

At the home of Sam Fisk and Linda Coe with spectacular panoramic views of the Adirondack High Peaks

August 21st - Westport

At the stately and historic "Skenewood" estate

September 18th - Bolton Landing

At the lovely home of Norman and Marian Wolgin on the shores of Lake George looking out toward Buck Mountain

25th Anniversary Events

June 4th - Claire Sweet Memorial Golf Tournament

3rd Annual Claire Sweet Memorial Golf Tournament at Top of the World overlooking Lake George, 9am shotgun start

June 7th - Radio Day

Radio Day from Adirondack Medical Center in Saranac Lake and LP Quinn Elementary School in Tupper Lake from 6am until 8pm

July 9th - Pawz Power

Because pets are an essential part of our well-being we need to support their health as well. This will be a day of energizing you and your pet

August 7th - Motorcycle Rally

Specifics to be determined

October 8th - 5K Run for Your Life

5K Walk/Run for Hospice in Warrensburg - 9am

Other Events in the Works

Swim for Hospice - Westport
25th Anniversary Party in the Tri-Lakes

Helpful Hints: Planned Giving Corner

It's never too late to make a will

There are many people who want to support High Peaks Hospice and Palliative Care but are unable to donate the amount they want to give while they are still alive. Many donors have assets that are needed during their lifetime to cover living expenses, rising healthcare and the many other costs of everyday necessities. You may be one of them.

Remembering High Peaks Hospice and Palliative Care in your will, living trust, or other estate plans is an easy way to make such a gift. A bequest through a will or living trust can be a stated sum of money, a percentage of your estate, a percentage of the residue of your estate after other bequests have been fulfilled, a specific asset such as personal or real property, or the portion of your estate that would otherwise be taxable. Please consider including us in your will or living trust. Your gift will honor the past as it benefits the future.

Remember - Before implementing any plans, be sure to seek the advice of your professional financial and legal advisors.

TOO GOOD TO BE TRUE?

There are two new ways that you can make financial contributions to High Peaks Hospice and Palliative Care without having to actually write out a check.

The first is through the Affinity program at TD Bank. If you already have an account at TD Bank all you have to do is fill out a form and TD Bank will make annual donations to HPH&PC based on your average balance. If you do not already have an account you can open one and sign up for the Affinity Program at the same time. This is all at no cost to you.

The second is even easier! Do you often go on-line to purchase items or plan trips? If so, the websites that you frequent such as Amazon and Orbitz will actually make a donation to High Peaks Hospice and Palliative Care of from 4-12% of the value of your purchase - at no expense to you and through the same websites you usually use. (It's true!)

All you have to do is go to the internet, type in "2clickfundraising.com," click on "High Peaks Hospice & Palliative Care," then choose the site where you want to make a purchase. You will be in the same website you always use - the only difference is that the vendor will now make a contribution to us!

HELP RAISE MONEY

AFFINITY MEMBERSHIP PROGRAM

Open an account at TD Bank and we'll make a contribution to your organization. TD Bank will make an annual contribution based on the average balance in all members' accounts. Checking, Savings, Money Market, CD and Retirement accounts are all included in the program.

Contributions are calculated at 1/2% on Checking balances and 1/4% on Savings, Money Market, CD and IRA balances. Members' accounts are not affected in any way by this contribution. Your account balances are used to determine the level of contribution and are kept confidential.

If you are already a TD Bank Customer, visit any TD Bank location and ask to have your balances included as part of your organization's Affinity Membership Program.

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MONTHLY COLUMN HIGHLIGHTS HOSPICE CARE

High Peaks Hospice and Palliative Care is pleased to announce that Denton Publications, which distributes weekly newspapers covering our entire service area, has begun printing a monthly column written by Cheryl Olson, Development Coordinator in the High Peaks Hospice and Palliative Care office in Port Henry.

The first column was printed in January and we would like to share it with you. In case you do not receive any of the Denton Publications we will include subsequent columns in future newsletters.

FINAL HUGS– A DISCUSSION ABOUT HOSPICE

When a loved one is diagnosed with a life limiting illness our initial reaction is to hold them tight and make it all better. And that's actually not a bad idea. It is amazing how much healing power is contained in a simple hug.

But when we step back from that hug the world comes at us with dizzying speed. Our minds and hearts are in shock; our emotions in turmoil. This is often true even for those who have had lengthy advance notice to prepare themselves for sad news. Clear thinking may be the last thing we feel capable of at a time like this, yet it is often exactly what we are expected to do.

Suddenly, there are decisions to be made, forms to be filled out, insurance companies to be dealt with, family to be consulted. Daunting at the best of times, these necessary issues become even more confusing and downright overwhelming when our own emotions are so fragile.

In the middle of all this, where do we find the strength and time for the most important thing of all - the patient who may be in desperate need of our comfort and support? Has that person thought about how they want to spend their final days, weeks and months? Have we remembered to ask them? Do we even feel comfortable discussing such things honestly and openly with them? Do we all know there are CHOICES and people to help with those discussions?

Years ago little choice existed. Patients were cared for at home until their medical needs grew too great, then hospitalization was the only option. It was often a frightening and lonely option. Thankfully, there is another choice today.

You've probably heard the word "hospice" in passing. Perhaps you are even one of the rare ones with real knowledge of all that word implies. Statistically, though, it is far more likely that a typical reader is a little fuzzy on the details.

Not something you want to hear about until absolutely necessary, right? Well, I can't blame you. It's just that life doesn't always give us advance notice of what we're going to need to know tomorrow. Especially not the really hard stuff.

Since knowledge is power - in this case the power to make the end of our life as good as it can possibly be - a clear understanding of our options makes a lot of sense. This column is designed to help you understand what hospice can do for you if you are facing a terminal diagnosis, or for you as a relative, caregiver or friend of someone in that situation.

In coming weeks we'll talk about specifics of hospice support for both the patient and his or her family, as well as insurance coverage, grief counseling and care options in general.

High Peaks Hospice and Palliative Care Through the Years: then and now

In 1986 Dr. David and Ann Merkel, searching for an alternative to traditional end-of-life care that gave hope and dignity to the dying and their families, began the long and challenging road to establishing hospice services in the Tri-Lakes. A group of volunteers was formed that included physicians and other members of the community. These volunteers worked tirelessly for months and in July 1986 their dream became reality when "High Peaks Hospice, Inc." received not-for-profit status.

For the first few months the agency was a completely volunteer service that provided limited end of life support services. In January 1987 "High Peaks Hospice, Inc." received state certification to operate as a full service hospice provider and the journey began.

In the ensuing twenty five years there has been much growth: In 1991 the Essex County office was established with the Warren County Office to follow in 1995. From a small agency providing services to those at the end-of-life in a small area, High Peaks Hospice and Palliative Care now encompasses a service area well over 4,600 square miles! From just a few individuals served in 1986 we have now had the privilege of working with well over 5,000 individuals and their families: laughing, crying and grieving together.

Over the next few months we will continue to highlight the accomplishments of the past twenty five years as well as new initiatives for the future. Stay tuned!



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Our Mission

Dignity, comfort and peace at the end of life.

High Peaks Hospice and Palliative Care, Inc. provides end of life care that listens with respect, cares with compassion, supports with choice, and comforts with understanding, wherever you call home.