HOSPICE CARE OF NANTUCKET FOUNDATION

The Marla Ceely Lamb Fund

family and friends and to the generosity of the people of the community, the Marla Ceely Lamb Fund continues to thrive and served over 100 people this year. very grateful to all who've contributed. We also continue to This year, the annual Mother's Day Dinner and Auction, the express sincere thanks to Cape Air/Nantucket Airlines, Walk for Transportation, this year in memory of Kelly West, a thoughtful benefit by the NHS Girls' Basketball Team, a their assistance with the transportation needs of our patients. nice donation from the American Cancer Society, and the

hanks once again to the dedication and work of Marla's many memorial gifts received have all kept this valuable fund supported. So many people express their appreciation for how much the fund benefits the community and, and we are Island Airlines, the Hyline, and Marine Lumber, for all of

Upcoming & Ongoing...

Tree of Remembrance Service: Sunday, November 22rd at 4:00 PM in the Gazebo Garden of the Jared Coffin House Coping with Cancer Support Group: every other Monday, 1-2:30 PM, for persons with cancer and those who love them "Time Out" for Caregivers: every 2nd and 4th Tuesday of the month, 1:00-2:30 PM

Tapestries - our program for grieving children and their families

Through our Tapestries Program, education is provided to families of children impacted by grief from the death of someone they love. When enough families are interested to form a group, bi-weekly sessions are provided to help children process their grief in a very gentle way. We also have a wonderful library of resources for both parents and children that many have found helpful. For more information, please contact our office. As always, these services are offered free of charge.

Support for Family Caregivers

hrough our Caregivers' Connections Program, family caregivers of persons with any long term illness or disability can access education, support, and practical assistance from our staff, in their efforts to provide care for their loved one as well as remembering to take care of themselves. Services include:

• Coaching for Caregivers - one on one consultations with our Nurse Practitioner on any aspect of care;

• Time Out - stress reduction education and/or counseling, in the home or office, which may include talking, learning relaxation techniques, yoga, etc. Thai Shiatsu massage is also available;

• Volunteers - can provide 1 - 2 hour/week for respite breaks for caregivers, or can help with errands, transportation, etc.; Lending Library of caregiver-related topics.

All our services are free of charge! For more information or an appointment, please call our Office at 508-825-8325.

Hands Across the Water

Our "twin" hospice in Cradock, South Africa, continues to do amazing work with limited resources. In their last report to us, they noted that they currently have 400 clients with HIV disease, 39 patients with cancer, and 78 children who attend their day care program for orphans. Over the past few years, we've designated one item per year in our Annual Dreamcatcher Auction to be earmarked for Cradock. This year we sent \$4000 through the Foundation for Hospices in Sub-saharan Africa to help Cradock, money which will be used to help support their orphan program. If anyone is interested in supporting this cause, please let us know or visit at the FHSSA website at www.fhssa.org.

Hospice Care of Nantucket Foundation

Board of Trustees: Geoffrey Silva, President...Betsy Brown, 1st Vice President...Mary Smith, 2nd Vice President... Judy Waters, Secretary....Eugene Collatz, Treasurer...Robert Barmen...Richard Beaudette....Gussie Beaugrand...Nancy Chase... Michael Getter...Peggy Gifford... Louise Hourihan.... John Penrose... Patricia Rottmeier... Jennifer Shepherd....Richard Wolfe Hospice Care of Nantucket Foundation is a not-for-profit tax exempt public charity.

A Partnership in Caring

Funded primarily by the Hospice Care of Nantucket Foundation, the palliative & supportive care program is operated as a department of the Nantucket Cottage Hospital, which is an affiliate of Massachusetts General Hospital, and a member of Partners HealthCare, Inc. Palliative & Supportive Care of Nantucket is a specialized health care program, dedicated to providing excellent physical, psychological, social, and spiritual care to persons with life-threatening illness and their families.



Program Director's Annual Report by Charlene Thurston, R.N., A.N.P.

It's been quite a year! At about this time last year, we were in the midst of deliberating over whether to work towards becoming a Medicare-certified hospice program or to change our name from hospice and work towards expanding our services for persons in the early phases of life-threatening illness. As most of you know by now, we chose the latter route and have, thus far, been surprisingly gratified by the results.

Most of the year has been spent on revising our program offerings and revising our policies and informational brochures accordingly, while memorialize and then placed on the tree. (Other weathercontinuing to offer all of our patient care services. While our end-of-life proof personalized ornaments are welcome as well.) procedures remain essentially unchanged, expanding services for the Participants may bring readings. All members of the early phases of illness has involved much exploration of state-of-the-art community are welcome to participate in this very care, including what's being offered around the country in non-hospice special event. After the service we will gather for programs - often called "supportive care" programs. While many refreshments upstairs in the Brotherhood. hospices have added some palliative care services to their programs in order to care for patients with a longer life-expectancy than six months who are continuing to pursue treatment, these services are usually fairly referrals, when needed. Services are offered through private limited. Our goal was to become much broader in scope than this, and consultations and group support with the appropriate member(s) of our to offer our full range of services to patients who are even hoping to staff, which includes a nurse practitioner, palliative care counselor, fully recover. social worker, and volunteers.

What we are developing is a readily identifiable program, which will It's been interesting to see the increase in consultations and encompass the entire continuum of life-threatening illness, from the admissions to our program since beginning to publicize the changes time of diagnosis through cure, or, if cure is not possible, through we're making. In compiling our patient activity statistics for the 12 advancing illness, death, and bereavement and support for their families. months, we've seen a dramatic increase in the number of earlier phase Patients in the earlier phases of illness are faced with the shock of patients who've accessed our services, especially since early '09, the hearing a serious diagnosis and, often, prognosis, and are faced with time at which the decision was made to change our name. While the many major decisions, while, at the same time, feeling overwhelmed. number of "comprehensive care patients" (formerly called "hospice They and their families are often destabilized as they experience grief and patients"), the number of community grief clients, and the number of turmoil, and often employment and financial struggles, while they try caregiver clients remained about the same as the prior year, the number desperately to find the best treatment options available and deal with the of palliative & supportive clients with earlier phase illness increased side effects and consequences of such treatments. If all goes well, the from 11 last year, to 37 this year (336% increase), with the number of patient may be cured; if the disease is not curable, the patient and family private sessions for this group increasing from 63 last year to 150 must deal with the eventual terminality of the illness. In either case, (240% increase) this year! Moreover, most of the increases were seen their lives are disrupted for many, many months, and, often, years, and after 1/09. This increase confirmed our belief that many more patients they usually don't have a readily available program of services to help could benefit from our services than were accessing them, probably due them through this experience. This represents a gap in services for a to the connotation of death and dving with the name "hospice." We've very vulnerable patient population in our overall healthcare system, a also found that health care practitioners from other departments and gap which we're now trying to fill for patients in our community. agencies are more comfortable referring patients for our supportive Before now, patients would go from physician to physician, and services than they were when called "hospice."

treatment to treatment, but there was no comprehensive support While most of our efforts over the past year have been concentrated program in place to help them navigate through the system or to help in converting the program, we've, of course, continued to provide our them deal with the psycho-socio-spiritual effects of what they and their usual end-of-life care. Over the past year, 59 people have died in families were experiencing. While we had attempted to reach out to Nantucket from any cause, including sudden deaths, accidents, etc., and support this group of patients while being named "hospice," we found we have provided care for 25 of them (43%), a rate which is 4% higher that patients who were pursuing cure or life-prolonging treatments were than the national average for hospices. Over the past several months, very reluctant to access services from a program named "hospice" with we've also worked diligently, along with other concerned citizens, to try its connotation of "giving up and dying." to rescue the Adult Community Day Center from being cut from the Our plan now is to serve as this comprehensive support program by services of the town.

offering individualized assessment, assistance with symptom We were thankful that a sense of the meeting vote at the recent management, education, basic counseling, stress reduction, support, and Special Town Meeting demonstrated overwhelming support that the

Palliative & Supportive Care Currents

Fall 2009

Tree of Remembrance Service

e hope you'll join us for this annual memorial service, which will be held this year on Sunday, November 22nd, at 4PM, once again in the gazebo garden of the Jared Coffin House. At the start of the holiday season, the brief but moving ceremony, is a special and peaceful way to remember and honor loved ones who have died. Scallop shell ornaments are made available to write names of those we wish to

The Dreamcatcher Dinner & Auction

ur 16th annual Dreamcatcher Dinner and Auction was held in June under the tent at Galley Beach and once again dreams came true for our program as well as the successful bidders. The live music from the band Kahootz created a festive mood and party atmosphere, and everyone had a great time.

Many, many thanks go to all of the "Dreamcatcher" volunteers from the community as well as our Trustees who helped to make this a tremendous evening for all. We wholeheartedly thank the event Underwriters and Sponsors whose loyal support is so important to our financial success.

Again this year a table was sponsored and reserved for our dedicated Hospice volunteers, and we thank Trustee, Mary Smith and her husband, Jeff, for making this year's Angel Table possible.

Once again we are grateful to the several island landscape companies and the students of the Nantucket superb and the auction was a great success.

New School who will be planting hundreds of daffodil bulbs along the Milestone Road again this fall in honor of Hospice. Yellow "daffodil cards ", each with a value of \$250, were available to all who attended the auction and it was heartwarming to watch the sea of yellow cards when Raphael introduced this auction item which raised \$10,250 for Palliative & Supportive Care.

Rafael's signature auction item, the memorial sunset, gave donors the opportunity to honor and memorialize loved ones and friends adding an additional \$20,000 to our program.

For the 5th year, we set aside one of our live auction offerings and dedicated the income to our South African partnership, which through recent donations has provided renovation of the Cradock Hospice building and medical supplies from Direct Relief.

Again we thank the Nantucket community, not only those who attend but also all of the individuals and local businesses who year after year generously donate many of our wonderful auction items and in-kind services in support of our main fundraising event. The evening was

Board Transitions

his year, we express our sincere gratitude to Sandy Knox-Johnston and Michael Varbalow, our outgoing board members who each served for six year terms. We are deeply grateful for Sandy's efforts, particularly for her work in helping to make our Dreamcatcher Auction what it is today, first as a volunteer of several years, then as a board member. We are grateful for her enthusiasm and hard work in bringing Direct Relief International together with the Foundation for Hospices in Sub-

Support for Veterans

Teterans who are facing life- ensure that the needs of vets during their families in our community. We threatening illness often have serious illness, dying, and bereavement experiences that are unique to could be met, in an informed and their military service, particularly if they have been involved in combat. In palliative care practitioners who have nurse, Deborah Grassman, explores the an effort to help veterans in their home communities, the Hospice and We, at Palliative and Supportive Care Palliative Care Federation of of Nantucket, have joined with several Massachusetts formed a collaboration other hospices across the state to Please don't hesitate to call on us for with the V.A. Healthcare System to provide this service to veterans and further information.

resulted in bringing much needed supplies to many African hospices. And to Michael, we extend our thanks several healthcare companies and is for his commitment and leadership, particularly his contributions regarding appropriate legal affairs of the organization, and for sharing his experiences from working on boards of other Foundations. Michael is a lifelong volunteer and a devoted member of the Nantucket community who serves on many boards and councils and we are fortunate that Michael shared his time and experience with us. Welcome to our two new board

saharan Africa, a relationship which has members, John Penrose and Richard Beaudette.

> John Penrose is a former CEO of now "somewhat retired" with a passionate commitment to serving the Nantucket community. Richard P. Beaudette, having received his JD from Northeastern University in 2003, is currently a partner with Vaughan, Dale, Hunter, Stetina & Beaudette PC here on Nantucket. We look forward to benefitting from their experience and to the contributions they will bring to our foundation.

also own a copy of the award-winning DVD, "Wounded Warriors" in which sensitive manner, by hospice and nationally-recognized expert and VA issues veterans confront at life's end been educated about their unique needs. and offers strategies to provide them with compassion, dignity, and respect.

DID YOU KNOW ... We've change the name of our program from Hospice Care of Nantucket to Palliative & Supportive Care of Nantucket! The Foundation's name will also change in December to Palliative & Supportive Care of Nantucket Foundation.

Director's Report continued from page 1

program be continued. We'll continue to work to try to maintain very important service, a service which we helped create in 199

Our volunteers have provided a total of approximately 400 ho support patients and caregivers over this period. Most volassistance has been utilized in providing respite to caregivers th our caregiver support program.

Other activities we've been involved with have included continu assist Cradock Hospice in South Africa, continuing to p education on advance directives, and continuing to provide profes development opportunities, both for our own department's staff a staff of other departments and agencies. Over the past year, I've att a Cancer Guides Workshop (complementary and alternative therap cancer care), and will be attending Harvard Medical School's Pal Care Conference in October, and our Palliative Care Counse attending 2 workshops to further develop her skills in Thai S Massage, a type of bodywork that we've been offering to decrease and enhance well-being. We've recently sponsored 14 particiattendance at the Alzheimer's Services "Seminar by the Se conference which focused on the use of compassionate touch t calm and soothe patients. The attendees included our Vol Coordinator, 3 of our volunteers, our Social Worker, 1 Home Aide from the Visiting Nurses Dept., and 8 staff members from Island Home. In October, we will be sponsoring tuition transportation costs for 4 professionals to attend the Annual England Hospice and Palliative Care Conference, 1 of whom w from the hospital's medical-surgical unit, 2 from Our Island Hom 1 from our Palliative Care staff. We'll also be covering transport expenses for 2 patient care assistants from ACDC (Adult Comn Day Center) to attend a free, one day, off-island conferen Alzheimer's Disease. We've been able to offer such exc opportunities this year thanks to a very generous grant fro Dorothy Egan Foundation designated for continuing education of care staff.

As we look to the coming year, we'll be continuing to develo new services, providing more informational outreach, and conv our website to reflect our program changes. As always acknowledge and appreciate our colleagues in other departmen agencies with whom we work so that patients in our comm receive the best care possible by their health care team, and, of c we continue to deeply appreciate the work of Hospice Ca Nantucket Foundation, without whom none of this would be po

Heartfelt Thanks to the **Dorothy Egan Foundation**

e express our sincere gratitude to the Dorothy Egan Foundation for the generous gift given to us to be used to continue the education of staff who provide direct patient care. Particularly in the present economic environment, most of the continuing education we've been sponsoring both for our own department's staff and that of our colleagues in other departments and agencies would not have been possible. This has afforded the opportunity for many staff from agencies without money in their budgets for professional development to continue to enhance their skills in caring for persons nearing the end of life.

> As always we sincerely thank those families who have directed that memorial contributions be made to Hospice Care of Nantucket Foundation. Because of these donations we are able to continue to provide services free of charge.

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Patient Care Statistics - 9/1/08-9/1/09

rehensive care patients: 25 patients - this includes physical, social, spiritual care to patients in any setting - home, hospital, ing home - and support for their families both during the illness approximately 1 year after the death of a patient. The total of patient care days was 1828 for this group of patients. The length of time on our services was 75 days, with a median of 28 otal number of days spent in the hospital was 227, while total of days spent at home or nursing home was 1601 days. (Note: vere 59 deaths from any cause in Nantucket during this period.) ients were served in the prior year also.)

Palliative & supportive consultations: are consultation sessions for person in earlier stages of illness.)

otal number of individuals for private sessions 37 (11 in prior year)

Total number of private sessions 150 (63 in prior year) 4 of which included relaxation/massage) (63 in prior year)

> Total number of individuals for **Cancer Support Group sessions** 23 (12 in prior year)

Fotal number of Cancer Support Group visits 131 (75 in prior year)

Community grief consults nese are grief support sessions for community members who experienced the death of a relative who was not a "comprehensive care" patient.)

> Total number of individuals 15 (12 in prior year)

Total number of private sessions

86 (87 in prior year)

57 of which included relaxation/massage) (61 in prior year) iver support services: (These figures reflect services for mostly "non-comprehensive care" family members.)

> Total number of individuals 23 (17 in prior year)

Total number of private sessions

46 (71 in prior year) 8 of which included relaxation/massage) (49 in prior year) number of individuals for "Time Out" group sessions 7 (5 in prior year)

Total number of "Time Out" group visits 53 (50 in prior year)

TOTALS:

Total number of clients served: comprehensive care patients & families are counted as 1 client) 82 prior yr.

Total number of "comprehensive care" patients/families 25 (25 in prior year)

Total number of non-comprehensive care clients 105 (57 in prior year)

Total number of non-comprehensive care client visits 466 (346 in prior year) (149 of which included relaxation/massage/yoga) (209 in prior year)