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The mission of Hospice and Palliative Care of St. Lawrence Valley is to enhance the quality of life through compassionate care for people affected by advanced illness and grief.

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New Services Added to Palliative Care

By Brian Gardam, Hospice Executive Director

If you know hospice, the definition of Palliative Care in the box will sound very familiar. Our hospice teams are successful at relieving suffering for hundreds of patients and families each year. Hospice is palliative care, except that hospice is for people near the end of life, and who are not receiving curative treatment at the same time.

For the last several years, under the additional business name of Palliative Care of St. Lawrence Valley, we have been putting the building blocks together for a full range of services for people who are suffering, but who do not qualify for hospice. It has been a slow, careful process, being careful not to do more than we have had the resources to cover. We provide short-term case management services in the home. Our Home Support Program is a partnership with local hospitals to provide home follow-up by a nurse and social worker team for people returning home after being hospitalized with a chronic illness. The North Country Care Transitions Program is an outgrowth of Home Support; in partnership with the Fort Drum Regional Health Planning Organization, our nurse and social worker – Sue Caldwell and Jill Deno – work with Medicare patients to avoid an early readmission to the hospital. We may be extending that program to people with other types of insurance as well.

We have now made a major addition to our palliative care services by adding Missy Heylen, Nurse Practitioner, to our team. Missy will be conducting comprehensive, focused assessments of patients and families with palliative care needs. She will assist patients in developing their health care goals. Working as a consultant, she will implement and evaluate palliative care plans in collaboration with the patient’s attending physician and other members of the health care team. She will be able to call on Jill Deno to work with the patient to address social and family issues, as well as having the backup of Sue Caldwell to provide additional home follow-up for pain and symptoms.

Since joining us, Missy has been busy visiting physicians and other health care providers to describe her role in palliative care. She has already seen several patients who have been referred to her. We plan to have her see patients in the hospitals, in our Palliative Care Office, and at patient’s homes.

There has been growing attention to the importance of palliative care in improving health care outcomes and reducing costs. New York State has just rolled out a Delivery System Redesign Incentive Program that will fund initiatives to improve health care. One of the ideas they support is “Expansion of palliative care programs to reduce avoidable hospitalizations.”

Our expanded palliative care team is be pioneering these services in St. Lawrence County.
Quality Assessment and Performance Improvement

By Nina Nuwer
Director of Quality Assurance

Quality Assessment and Performance Improvement (QAPI) activities in 2013 continued to focus on improving the care provided to Hospice Patients and to increase the number of patients in Nursing Homes that use our services. Several Performance Improvement Projects were continued from 2012, and a number of new projects were started in 2013.

Anxiety and depression is an area that we have monitored due to the impact on patients’ quality of life. Our goal is 90% of patients who screen positive for anxiety and/or depression will receive the appropriate follow-up per protocol. Interventions to improve anxiety and depression scores include the discussion of anxiety and depression at team meetings and monthly review of the anxiety and depression scores. The results for 2013 were 56.7% for anxiety and 62.1% for depression. After the above mentioned implementations the overall trend was positive, and although we did not reach the goal, a significant improvement of greater than 20% above 2012 results was realized. We will continue to focus on this quality indicator for further improvement in 2014.

We continued to work on a Performance Improvement Project initiated in late 2012, based on timeliness of Volunteer documentation. The goal of the project was to increase the timeliness in placing the volunteer flow sheets in the patient’s charts within 45 days. Initial efforts implemented in late 2012 were not successful, so the protocol was re-designed, tested and had very positive results. Overall results for 2013 were 91%, meeting the goal of 90% of all flow sheets in patient charts within 45 days.

A series of chart reviews indicated not all medications documented in patients’ charts were included on the EMR (electronic medical record) medication list. A Performance Improvement Project was initiated to correct this discrepancy, with a goal to have all medications entered on the medication list. In 2012, the highest audit result was 75%. Interventions were implemented in 2013 that required each primary nurse to audit their patients’ charts on a regular basis to reconcile all medications with their chart documentation. Within three months of implementation, the percentage of correct medication lists had reached 98% and remained above 97% for the rest of 2013. Interventions included a number of meetings with nursing home staff, continued education of Hospice staff, designation of specific staff to serve our hospice patients in the nursing home, and provision of increased education and educational materials to the nursing home. The goal of the Nursing Home Performance Improvement project was to increase the number of nursing home patients served to 59 and this was met by year end 2013.

The number of people we have served in area nursing homes has been on a downward trend since 2009, with a four year low in 2012, serving only 49 patients in the nursing home setting. A committee implemented a number of interventions to create better relationships with the nursing homes and help them better understand the benefit of Hospice to nursing home patients.

Nurse Practitioner Joins Palliative Care Staff

Marie-Paule (Missy) Heylen, certified Nurse Practitioner, recently joined the staff to begin providing Palliative Care consultations in homes, hospitals and at the new Palliative Care Center.

Missy comes to Hospice with more than 20 years experience in various aspects of nursing, including intensive care, hospice care, and emergency nursing, and she takes a special interest in Gerontology. “My passion is providing effective, holistic care to the patient and their family. Treating the emotional and psychological issues that one encounters upon diagnosis of a chronic illness is essential to ensuring a good quality of life while managing the illness” she said.

After receiving her Hospital Nurse Diploma at the Catholic Regional Institute of Nursing in Belgium, Missy came to the United States, where she began work as a Graduate Nursing Assistant. She continued her education and received a Bachelor of Science in Health Care Administration from St. Joseph College and in 2012, earned her Master of Science in Nursing with a concentration in Gerontology from SUNY Institute of Technology. She holds a certificate from the Hospice and Palliative Nursing Association as a Certified Hospice and Palliative Nurse (CHPN).
Family Support Services

By Mary Jones
Director of Family Support Services

The Family Support Services Department welcomed a new discipline to the fold, Community Educator! Nancy Vosbrink moved from the development office in the fall and added a Caregiver Support Program to her list of responsibilities. Nancy spent the last quarter of 2013 developing a caregiver support through referrals from local physicians. The program was implemented in January 2014.

Hospice completed Level 3 of the national We Honor Veterans program in October, quickly moving on to level 4, the final level. A Veteran’s partnership with a number of local organizations began meeting quarterly to explore and enhance the Hospice/Veteran connection.

St. Lawrence County has the sixth largest veteran population in New York State. In 2013, Hospice provided services to 100 veterans. This equaled approximately 25% of total patients for the year. In an effort to ensure that their service was recognized appropriately, a pinning ceremony was made available to all veterans receiving hospice care. The pinning team consists of staff and hospice volunteers who are veterans. The ceremony includes presenting a hospice veteran pin and a framed certificate of appreciation to the hospice veteran patient. The response has been great. Following one pinning ceremony a patient commented “I feel like a hero today.”

Camp Healing Hearts welcomed 16 campers in June 2013. The super hero theme was enhanced with the artistic talent of Potsdam High School Senior Micah Caraballo. Micah designed 15 super heroes for the event. Three comic books were written by Hospice Social Workers and illustrated by Micah. Camp T-shirts and temporary tattoos were also created featuring Micah’s super hero artwork. In spite of the rainy day, staff volunteers and campers had a spectacular day.

Thanks to a grant from Stewarts Shops, Hospice Bereavement Services once again hosted grief education workshops for local school counselors. The 2013 topic addressed grief support groups in schools. Twenty-five counselors attended this event.

In November, Mary Jones, Director of Family Support Services, presented a five minute IGNITE session at the National Hospice and Palliative Care Organization’s Virtual Grief, Loss and Bereavement Conference. Her topic: “When Grief Comes to School – The Hospice Connection.”

Canton teen Christopher McGaw volunteered to clean up and enhance the walking trail behind the hospice building as his Eagle Scout project. There are two signs, one at each entrance, designating it as the Tranquility Trail. There are quote plaques scattered throughout the trail to offer words of comfort. Camp Healing Hearts campers created decorated pavers for the trail during the annual camp in June.
Ever since a small group of volunteers founded Hospice 30 years ago, donors have been the key to providing excellent comfort care for our patients. In 2013, Hospice staff cared for more than 500 patients and donors, in turn, supported the organization generously.

Donors who gave to the Annual Appeal and those who gave in memory of their loved ones provided over $313,189. Those who left gifts to hospice in their wills contributed over $321,841. Still others made gifts through their businesses or through the State Employees Federated Appeal.

Grants from the St. Lawrence County Cancer Fund, the JM McDonald Foundation, Kinney Drugs Foundation, Enterprise Holding Foundation, Stewarts Shops, Hospice Education Institute and the Corning-Canton Plant helped fund in-home respite care, community education, bereavement and palliative care.

Many Hospice supporters attended fundraising events like the Community Bank Golf Tournament, Tastes of Autumn, Swim a Mile for Hospice and the Hospice Motorcycle Run, which is generously organized by Roger and Linda Willmart and their family and friends. These special events, plus the Hospice Radiothon, hosted by Community Broadcasters, St. Lawrence Radio and Stephens Media Group, raised nearly $75,097 for Hospice care in our county.

During the holiday season, hundreds of Hospice supporters made gifts in memory of loved ones, most of whom had been cared for by Hospice. Their names were added to stars which decorated two Memory Trees at the Hospice office. Thank you all!

Compared to other Hospices in New York State and nationally, we consistently perform above the national average in all domains of care, as reported from our patient satisfaction survey. We will continue our commitment to provide high quality services, and to enhance the quality of life for all patients and families whom we serve.
Patient Care Services

By Sue Cappione
Director of Patient Care Services

With all of the changes in health care this year, we are very fortunate to have a stable, engaged and passionate nursing staff. Unlike other providers, we have very little staff turnover which makes it fortunate for our patients. They remember the nurse that cared for a loved one years ago and are reassured that the same nurse is able to care for them. We are fortunate this year to have hired three new nurses that we hope will continue to be with us for a long time.

Dawn Brabaw completed her nursing education and became an RN in 2013. She started her career as a CNA in 2001 and worked at Maplewood Nursing Home. In 2007, she became an LPN and continued her employment there. After her graduation she began her career with Hospice. Her years at the nursing home make her an ideal candidate for our nursing home team. Dawn is currently the nurse for the nursing home patients in Ogdensburg and Massena. Her energy and willingness to help out anywhere are the qualities that make her great.

Natasha Zmitrowitz is a transplant from Ithaca where she worked on a medical surgical floor. She liked working with the palliative care patients the best and felt she would do well as a hospice nurse. We agree. Tasha has a take charge personality that is reassuring to families. Like Dawn, there is no task too daunting for Tasha. She is a wonderful addition to the Maple Team.

Jennifer Johnson is a well seasoned RN that comes to us from a varied background that includes Public Health and Nursing Homes. Jen has just completed her Master’s in Nursing and was instrumental in working with SUNY Canton nursing faculty to allow us to become a preceptor site for the student LPNs. Each week she and Tasha have students follow them to patients’ homes to teach them about hospice care. The students have been very interested and have loved their hospice rotation. This gives us a chance to test their abilities and offers us a pool of new LPN’s who may wish to begin a career in hospice care.

This year was also the year of the “Health Buddy”. Funding for the interactive devices came from a state grant administered by the Fort Drum Regional Health Planning Organization. This is our first foray into the world of telehealth. The Buddies are small boxes that plug into a patient’s phone or internet. Once a day the patient documents weight, blood pressure, pulse and other metrics associated with their disease. This information is reviewed in our office and a communication is sent to the nurse if any of the metrics are “red flagged”. There are disease specific programs that ask different questions, but all ask about pain. We wondered about people’s willingness to have a Health Buddy in their home. So far we have had success in placing the devices in 24 NCCTP homes and 3 hospice homes. Patients are enthusiastic about the devices and find they help them keep track of the vital signs that keep them up and about and feeling well.

This year we continued to provide ELNEC (End of Life Nursing Education Consortium) workshops for community members. However this year we decided to tailor the education to Nurses Aides. We felt that these are the folks that spend the greatest amount of time with patients who reside in their homes or in nursing homes, and there are very few classes designed specifically for these dedicated people. Sharon Bearece and Anne Karlberg, two of our ELNEC educators provided a workshop at the Hospice Center, and were also asked to provide the program for the BOCES Home Health Aid class.

We continue to take the philosophy of quality care for the dying out into other health care arenas so the residents of our county will experience a safe and comfortable death.

Hospice Receives Local and National Quality Awards

Hospice SLV was named a 2013 Hospice Honors recipient, established by Deyta, a Kentucky-based organization that specializes in healthcare satisfaction and quality measurement. This prestigious annual honor recognizes the top 100 agencies that continuously provide the highest level of satisfaction through their care as measured from the caregiver’s point of view. Deyta used the Family Evaluation of Hospice Care (FEHC) survey results from over 1,200 partnering hospice agencies contained in its national database.

Additionally, Hospice was awarded the North Country Citation, presented by St. Lawrence University to an individual or organization which works to improve quality of life for area residents.
Hospice Care Around the County

Hospice care is a mobile service, with staff and volunteers driving to visit patients in their homes, nursing homes or hospitals. Within our service area of St. Lawrence County, care is provided by three teams: Maple, Oak and Pine, with all staff using the Hospice Center in Potsdam as their base.

The Pine team serves the largest geographic portion of the county and Maple, the smallest. In 2013, the Pine team also served the greatest number of patients. Hospice staff logged more than 523,786 miles in 2013 to provide care to 522 patients.

Oak Team
Ogdensburg Area
Average Daily Census 22
Patients Served 156
Days of Care 7,866
Miles driven 127,905

Maple Team
Massena Area
Average Daily Census 23
Patients served 158
Days of care 8,351
Miles driven 160,900

Pine Team
Canton, Potsdam and Gouverneur Areas
Average Daily Census 34
Patients served 208
Days of care 12,372
Miles driven 234,981

St. Lawrence County, NY

Patient Services Statistics

Hospice Average Daily Census

Hospice Patients Served by Diagnosis

Cancer
Non Cance
Hospice Memorial Garden Reservation Form

I would like to memorialize/honor my loved one,__________________, in the Garden with a gift to Hospice of $_________ for the following Garden feature(s) (select from list below):_______________________________

Name: __________________________________________________  Phone:_________________________

Address_________________________________________________________________________________

2 1/4" Glass Medallion, $60  4" x 8" Memorial Paver, $125  12" x 12" Memorial Paver $500
Memorial Grove Tree, $1,500  24" x 24" Corporate Paver, $2,000

To Name the Hospice Memorial Garden in its Entirety, $50,000

When ordering a Glass Medallion or Memorial Paver, please print desired engraving below:
Glass medallions: 3 lines, up to 16 characters per line (inc. spaces). 4"x8" Pavers: 3 lines, up to 14 characters per line (inc. spaces). 12"x12" Paver: 6 lines, up to 15 characters per line (inc. spaces)

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Payment Method (Please circle one:)
Check (payable to Hospice of St. Lawrence Valley)  Mastercard  Visa  Discover
Name on Credit Card ___________________________________________________________
Card Number___________________________________ Exp. Date______________________
Signature_____________________________________________________________________

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