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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Office Hours
8:00 - 4:30 p.m.
Monday through Friday

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The Only Constant in Life is Change

By Ruth Fishbeck
Executive Director

2017 brought many changes to the world, our country, our own lives and, of course, to Hospice! Some of those changes were related to our staff, some to community programming, and some to how we provide services.

Staffing Changes
• Two long-time employees retired during the year; Anne Karlberg, the Director of Patient Services and Nina Nuwer, Quality Programs and IT Coordinator. We thank both of them for more than 35 years of combined service to Hospice!

• Our own Kelly Durant-Adams became the Director of Patient Services in November and has enthusiastically embraced the rewards and challenges of that position.

• In March, new Finance Director Elizabeth Demo joined the team.

• A new Medical Director, Dr. Deborah Lang, started with the organization in November, bringing with her a wealth of experience and knowledge about end-of-life care.

New Programs and Initiatives
• We completed a major redesign of our website and continue to add features and information about end-of-life daily.

• The Hospice Book Club met several times for lively discussion- look for quarterly meetings in 2018!

• We implemented a new opportunity for community members, Dying to Talk: Conversations About Facing Death and Embracing Life, that encourages reflection about our end-of-life wishes and how to have the conversation with family.

Service Provision
• After many years of providing care through three geographic “teams”, we switched to two teams last fall. The East and West teams provide the same great services!

• In response to the rapidly changing healthcare landscape, combined with federal regulation changes, we spent much of 2017 critically evaluating every facet of the organization. Many changes have occurred in response to this introspection and more are coming as we prepare Hospice to thrive and grow in the coming years.

A Sneak Peek at 2018
The new year will find us fully implementing our vision for a quality hospice of the future, including joining elite Hospices in implementing a synthetic training space. More on that next year!
Care Strengthened by Community Support

By Kellie Hitchman
Director of Development and Community Relations

For all of us at Hospice, 2017 was a very exciting year. It brought new challenges, great success and opportunities to improve upon the care and programs we provide to the community. Always standing behind us are many, many generous supporters. We are deeply grateful for the many ways you show your support of our work.

It was a year of many firsts in the Development and Community Relations Department! We added a dueling piano show to our lineup of fundraisers. We were absolutely overwhelmed by the support shown as more than 300 guests came out for a great night of entertainment to support our organization. Your feedback was to do it again so it will be back in 2018! Swim a Mile for Hospice hit a milestone as we raised nearly $33,000, far surpassing our longtime goal of raising $30,000 for the event. It is always an incredible morning on the beach, but this year was extremely exciting as the total was announced. At the end of 2017 we took a look at the importance of corporate sponsorships and their impact on the programs and services we provide. We moved to an Annual Sponsorship structure to provide additional opportunities to acknowledge our generous corporate partners. They are now included in all special events, listed on our website and right here in our newsletters! We are very grateful for this support and all it allows us to do in our community.

In addition to securing financial support to provide quality care to our patients and their families, we also focus on providing education about our services, end-of-life care and other issues surrounding advanced care planning. Marketing and Events Coordinator, Samantha Jones, worked with many local businesses, service groups and other organizations to bring a new program to help facilitate these important conversations. Dying to Talk: Conversations About Facing Death and Embracing Life was presented several times enabling many people to begin thinking about their wishes and making them known. The presentations have been very well received and will continue to be booked throughout 2018.

It is a privilege to bring hospice care and many other important programs to our community when they need us. It is truly humbling to see the support shown to our organization each day. Gifts large and small have an immediate impact in the lives the patients, families and community members we serve. As our supporters you have a very important role in each day of care provided. We thank you for your very generous support and all it helps us do.

Dueling Pianos Return in 2018!

Back by incredibly popular demand is our Dueling Pianos fundraiser!!! Mark your calendar: Friday, June 1st, the talented musicians from Cutting Edge Dueling Pianos will return to Cheel Arena for another amazing performance. The first event drew more than 300 community members who were thoroughly entertained by the show from the time the first note was played. The all-request show encourages audience participation throughout and will have you out of your seat singing, dancing and clapping along from start to finish! Tickets will go on sale April 1st. Visit our website for ticket information and learn about purchasing a table at a discounted rate! You don’t want to miss out!!!

Annual Hospice Sponsors

Premier
NuMed for Children
Donaldson-Seymour Funeral Home

Gold
Kinney Drugs Foundation
Frazer Computing
HB Properties
Phillips Memorial Home
SeaComm Federal Credit Union

Bronze
Save-A-Lot
Gouverneur Savings & Loan
Town & Country Veterinary Clinic

Event
Scott’s Auto Center
Massena Savings & Loan
Johnston’s Water, LLC
Casella Waste Systems, Inc.

Thanks to our corporate sponsors. For more information on Annual Sponsorships please visit our website.
Family Support Services

By Mary Jones, BSW, CT, 
Director of Family Support Services

Family Support Services continued to thrive in 2017 as it worked to assist patients and families with the many emotional issues associated with illness and grief.

Social Work:
• In 2017 Social Workers were fully integrated with larger caseloads, averaging 30 patients, and were supported by Resource Advocate, Brandy Walton.
• Hospice began contracting with Northern Lights to provide Social Work services to their home bound clients.

Caregiver Support
• The fourth Caring for the Caregiver Event included 25 vendors. This successful event attracted 60 individuals from all over the county interested in learning about caregiver services available in the county.
• The Caregiver Support program met monthly throughout 2017 to support one another and to learn about what to consider when caring for a loved one with memory loss, dementia or a cancer illness. Jill Deno began facilitating this program in the fall.

Chaplain Services
John Kashorek retired in March of 2017. Reverend Rob Schirmer continues in his role as the Hospice Chaplain, serving all Hospice patients to address their spiritual care needs.

Bereavement Services
Bereavement Coordinator, Kay DePerno, continued to offer grief support groups including Grief Gardner’s, a group open to anyone experiencing grief and A Widow(er) group for those who have lost a spouse or partner in Massena. She also facilitated a six-week support group for those grieving a death from suicide. The number of clients seeking individual counseling sessions steadily increased throughout the year. Bereavement services are open to anyone dealing with the loss of a loved one. They did not have to be cared for by Hospice.

When Grief Comes to School
Hospice’s program designed to respond to schools when a student or staff member dies reached the milestone of having served every school in St. Lawrence County. Mary Jones and Kay Deperno supported 7 schools in the aftermath of 10 student deaths in 2017. In addition to providing immediate response to schools, an annual training is provided to counselors and other professionals who work with youth. The training for 2017 educated 25 professionals on Grief and Resiliency. This training is funded by a grant from the Stewart’s Holiday Match program.

When Grief Comes to School services are provided to St. Lawrence County schools as part of a contract with St. Lawrence/Lewis BOCES. In 2017, this contract was renewed and services expanded to include schools in Jefferson County with a similar contract established with Jefferson/Lewis BOCES. In addition to education for school administrators, teachers and support staff, services offered to schools include consultation on crisis plans, education to address specific issues and other services as needed.

We Honor Veterans Program
Hospice continues to honor patients who served in the Armed Forces with a pinning ceremony and certificates of recognition. A cadre of veteran volunteers perform the pinning ceremonies with Hospice staff. In some cases, veteran patients may also be assigned a volunteer through the Vet-to-Vet program.

Patient Enrichment Projects Expanded

Quality of life for our patients is always a top priority. In 2017, Volunteer Manager, Linda Caamaño, worked with Hospice volunteers to further develop opportunities to improve the lives of our patients and families while they’re on hospice. Thanks to a grant from the Youth Philanthropy Council of the Northern New York Community Foundation, Hospice joined the ranks of more than 5,000 certified Music & Memory organizations. The program brings music to patients suffering with Alzheimer’s Disease and dementia. Studies show a strong connection between music and long-term memory. Through the certification, our volunteers learned how to carefully select music for each patient using information from family members. Although the program is relatively new, the impact on patients has been profound!

Hospice welcomed its first ever certified therapy dog, Bristol Caamaño to the team. She’s been working very hard visiting patients in Nursing Homes to lift the residents spirits. She will begin visits in the homes of Hospice patients in 2018.

Look for more information on these projects and many more on our website!
Hospice Finances

A Financial Snapshot of 2017 (Our Unaudited Financial Statement)

**REVENUE**

**Patient Revenue**

Medicare..................................................... $3,356,847  
Medicaid.......................................................... 559,397  
Third Party*..................................................... 176,885  

Total Patient Revenue................................. $4,093,128

**Public Support & Other Income**

Contributions................................................. $186,127  
Bequests........................................................... 222,239  
Special Events................................................... 111,835  
Grants............................................................... 105,464  
Contracts............................................................ 10,000  
Other Income+................................................... 11,765  
Investment Income............................................ 16,484  

Total Public Support &  
Other Income................................................ $663,913

**TOTAL OPERATING REVENUE**................... $4,757,041

**EXPENSES**

Personnel/Salaries..................................... $2,406,117  
Employee Benefits.......................................... 533,611  
Contracts & Professional................................ 540,828  
Ancillary Services#.......................................... 657,910  
Administration................................................ 572,049  
Public Relations............................................... 19,990  
Insurance.......................................................... 42,341  

TOTAL EXPENSES........................................ $4,772,847

**TOTAL REVENUE/EXPENSES**.......................... $15,806

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* Blue Cross and other insurance  
+ Contracts, in-kind and miscellaneous  
# Medication, oxygen and medical equipment, for example

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“Hospice was a gift to our family during the end of my mom’s life. They kept her comfortable and coordinated everything we needed to keep her at home, surrounded by people she loved and that loved her in return.”

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Quality Assessment and Performance Improvement

By Jessica Barr, RN, BSN  
Director of Quality Improvement

Hospice Quality Assessment and Performance Improvement (QAPI) has experienced multiple staff changes in 2017. Warren Franklin, RN stepped down from his position as QAPI coordinator in February with Alecia Tharrett, RN stepping into the position from May through mid-December. The new QAPI Coordinator, Jessica Barr, RN, began her training in late November and completed all audits from November forward.

QAPI continued to focus on improving the care provided to hospice patients using quality indicators. In a comparison report produced by Deyta for the months of April, May, and June of 2017, caregivers indicated on the Hospice CAHPS survey that they felt Hospice and Palliative Care of St. Lawrence Valley provided training about safely moving the patient 70% of the time (national average is 65% of the time, NY state average is 62% of the time). Although our rating was higher than the national and state average, interventions to address this score were initiated. In September, Hospice Physical Therapist, Kerry Newell, completed training for safe turning, positioning and transferring to direct care staff and RNs with the focus of the sessions centering around how staff can teach caregivers to confidently and safely do this in the home.

Performance Improvement Projects (PIPs) through 2017 included the continued monitoring Foley catheters and wounds, both considered high risk areas and both with overall improvements to documentation through interventions performed. A checklist was developed for Chaplains and Social Workers which has dramatically improved admission documentation for both disciplines. Clinical staff report this to be a valuable tool that they use frequently. An Advanced Directives PIP was initiated to review and improve the process for obtaining and completing MOLST forms with educational session provided to staff. Starting in November, a medication PIP was initiated, specifically looking at narcotics management. This continues to be a high-risk area as evident by the rising opioid crisis around the country. RNs have increased narcotics education provided to patients and caregivers and all narcotics are now being counted weekly for all patients.

The QAPI committee met four times in 2017 and decided to raise the goals of QAPI from 80% to 90% across all audits. The committee is also pleased to report that based on the year end data generated from the Hospice CAHPS survey results, 98% of caregivers would recommend Hospice and Palliative Care of St. Lawrence Valley (Deyta Quality Indicator Report) indicating a high degree of satisfaction with the quality of services provided.

Hospice remains dedicated to providing a high level of care to the community members we serve.
Advanced Illness Management (AIM)

By Diane Pickering, RN
Administrative Director of AIM Services

AIM: Advanced Illness Management provides specialized medical care for people with serious/chronic illness in their home. It is intended to be an extra layer of support for patients and their families. This type of care is focused on providing patients with relief from the symptoms, pain and stress of a serious illness — whatever the diagnosis. The goal of AIM is to help patients with serious illness feel better and improve the quality of life for the patient and their family. AIM is not the same as Hospice. Our services are appropriate at any age and at any stage in a serious illness and can be provided together with curative treatment.

What you should know about AIM...

• The goal is to improve quality of life for patients at any point during their illness, regardless of their treatment choices or plans.

• Our focus is to improve quality of life through symptom management and support for the patient and the patient’s family.

• AIM is not specific to any one disease. The palliative care team can help identify and address troubling symptoms including the emotional impact a serious illness has on the patient’s family.

• AIM will assist in complex communication interactions, collaborate with the other providers involved in treating the patient and coordinate care in the home. Our providers strive to educate and promote understanding of the disease process which, in turn, helps patients and families make difficult decisions about what level of care they wish to pursue.

Our services have resulted in significant reductions in the costs of laboratory, Emergency Room visits and readmissions to the hospitals. The team can improve a patient’s quality of life and mood, as well as enhance the satisfaction of both patient and family. As the number of Americans living with serious and life-threatening illnesses continues to increase, AIM / palliative care will play an increasingly significant role in providing higher quality health care at a lower cost.

AIM continued to grow in 2017. This January, Family Nurse Practitioner Colleen Paquette joined the AIM team as a part-time provider. A total of 186 new patients were admitted to the program. More than 1,100 visits were completed by AIM providers in the far corners of St. Lawrence County.

5 Myths About AIM/palliative care

Myth #1: Palliative Care is end-of-life care and speeds the disease process up.
AIM staff focus on the effective relief of pain and other symptoms, while supporting the best quality of life for patients with serious illnesses. In fact, patients who receive AIM/palliative care often live longer when they receive care from the palliative medicine specialist early in the course of their serious illness!

Another goal of AIM/palliative care is to help patients and their families better understand their illness, express their goals, and explain what is most important to them, especially when their illness is very complex or advanced, so they are better able to make the decisions they might face if their illness progresses.

Myth #2: Taking pain medication causes the patient to be “out of it.”
Our nurse practitioners are specialists in pain management and carefully monitor the patients’ medications so pain and other symptoms are both safely and well controlled.

Myth #3: If my doctor recommends AIM/palliative care, I’m giving up hope.
AIM is appropriate at any stage of serious illness and is often provided at the same time as curative treatments. The primary goal of AIM is to improve the quality of life for patients. With this philosophy of treatment, we strive for reduction of pain and other symptoms (shortness of breath, nausea, anxiety, depression, severe constipation and others) and better treatment tolerance for patients. When physicians recommend AIM for patients with serious illnesses, they want their patients to live as fully as possible.

Myth #4: If I want AIM services/palliative care, I will need to change doctors.
Not true. AIM services are provided by a specialized medical team who serve as consultants that work along with the patient’s treating physicians. Our team works closely with a patient’s primary care physician and the other medical specialists who may be involved in their care. We discuss, develop and coordinate an appropriate medical plan along with the other doctors caring for the patient.

Myth #5: Palliative Care only benefits patients.
First and foremost, AIM/palliative care helps patients manage the symptoms of their illness; but at the same, family members benefit. How? Families feel a huge sense of relief when they see that their loved one is no longer suffering and finally able to eat, sleep or participate in daily life. Families also have much less fear and anxiety when they better understand exactly what is happening with their loved one, especially when the patient is hospitalized or acutely ill.
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. In 2017, Hospice staff traveled the far borders of St. Lawrence County to provide care to 404 patients. In total, staff provided 24,438 days of patient care with an average daily census (number of patients served) of 67 each day.

Patient Services

By Kelly Durant-Adams, RN, BSN
Director of Patient Services

Change has been the constant this year in the patient services department. Changes in the healthcare system in the last few years have impacted Hospice just as they have other branches of the healthcare field. Through it all our hospice staff has remained a team and looked positively at the benefit of change.

Serving a county as large as St. Lawrence can be daunting, but the staff have stepped up to the plate time and time again. With patients coming to us from areas as far as Star Lake and as close as Waddington, our team has developed a system to ensure patient needs are met, no matter where they are. Hospice has placed an invisible line through St. Lawrence County. While our staff crosses this line to help patients on a regular basis, we are better able to serve our clients through an East Team and a West Team. While some may see this as a separation, we see it as our staff joining forces to fulfill our patients needs.

The support provided by Hospice is like no other. Caring for our patients and their families at such a critical time in their lives is a privilege that the Patient Services Department is grateful for each day.

On the Cover...

Staff and volunteers began coordinating the Memory Bear Project in 2017. The program serves to leave family members with a lasting, tangible memory of their loved one. Often, when someone we love dies, we find ourselves hanging on to anything they once owned or things that remind us of them.

Through this program, custom, hand-sewn teddy bears or pillows are made from clothing that belongs to a patient. This is especially meaningful to grandchildren who will have not only something to remember their loved one by, but an object that will hopefully bring them comfort each time they hug it. Each bear or pillow is unique to the specific family. Volunteer Manager, Linda Caamaño, has been the point person for the program. “This has been an incredible addition to our services. We’ve created bears out of Harley Davidson t-shirts, soft flannel pajamas and many other interesting items. The finished product always brings a smile to the family receiving a very meaningful, cherished reminder of their loved one.

This service is offered by Hospice in partnership with the women’s housing unit at the St. Lawrence County Correctional Facility in Canton.
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:)
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Name on Credit Card _________________________________________________________________
Card Number ___________________________________ Exp. Date _________________________
Signature ____________________________________________________

Please cut out and return form to: Hospice of St. Lawrence Valley, 6805 US Hwy 11, Potsdam, NY 13676