Celebrating life's precious moments
ON THE COVER:

Stan Miller, a current CHC patient, stands on his beautiful farmland, where he resides with his wife and children.

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Center for Hospice Care achieved several milestones in 2018. For the fifth consecutive year, the total number of patients cared for was over 2,000. By annualized numbers of patients served, CHC continues to rank in the top 3% of all hospice programs in America. And we have again expanded our service area. A new La Porte office location opened in early 2018 bringing to four the number of care offices that serve as operational bases for our clinical homecare staff. To generate continued growth, we added Porter County to our service area bringing to nine the number of northern Indiana counties served by CHC. The only Medicare-certified hospice inpatient units in the region, CHC’s Elkhart and South Bend facilities, served more than 600 patients for the third consecutive year.

It was a spectacular year for many of our signature special events. With more than 400 registered guests the 2018 Helping Hands Award Dinner, honoring Sister Carmel Marie Sallows, CSC for her lifetime of service, was held on Wednesday, May 2. Later that month, we held a reception for our first Vera Z. Dwyer Fellow in Hospice and Palliative Medicine. The event was an opportunity to publicly thank the Vera Z. Dwyer Charitable Trust for their $500,000 gift to fund the first five years of the Fellowship as well as to announce the trust’s $1 million challenge grant to establish a permanent endowment for an annual Fellowship seat at the Indiana University School of Medicine. We were pleased to celebrate other events including the 25th anniversary of Camp Evergreen on August 9 and the tenth anniversary of the Elkhart Campus on August 16. During this event we rededicated the inpatient facility as “Esther’s House” in honor of Dick Streffing’s mother. Dick and Rita Streffing made a substantial gift toward the Elkhart Campus capital campaign a decade ago. For local hospice fundraisers desiring a physically active experience, the annual Bike and Walk events were held concurrently on our Mishawaka Campus on September 23. More than 500 riders, walkers, staff and volunteers participated. Our annual Veterans Tribute Ceremony took place at our Mishawaka Campus Veterans Memorial on October 16 during which we rededicated the memorial as the “Captain Robert J. Hiler Jr. Veterans Memorial,” thanks to a generous gift from Catherine and Jack Hiler and the Hiler Family Foundation. Additionally, as a level four “We Honor Veterans” (WHV) program member, we gave more than 100 certificates to veterans in our service area on or close to Veteran’s Day 2018. What a pleasure it is to thank them for their service. WHV is a collaborative program between the Veteran’s Administration and the National Hospice and Palliative Care Organization in Alexandria, VA.

On June 12, we held our official groundbreaking ceremony for the Ernestine M. Raclin House, the new state-of-art 12-bed hospice inpatient facility being built on our Mishawaka Campus and overlooking the St. Joseph River. The facility is named in honor of a generous donor, Ernie Raclin, who made a transformative gift. Our five-year comprehensive campaign, “Cornerstones for Living: The Crossroads Campaign,” ended 2018 at $11,580,844, eclipsing the $10 million campaign goal, with six months to go. Overall cash gifts received by the Hospice Foundation in 2018 totaled $1,637,550. Thanks to the generosity of a very giving community, we were able to continue our 38-year promise of never turning anyone away due to an inability to pay. In fact, during 2018 the value of charity care, write-offs, adjustments, etc. added up to $2,051,544. Over the last four years charity and other free programming has totaled $8.4 million in CHC care and services.

Part of that care includes bereavement services. Of the total bereaved clients served last year, 20% were from the community with no prior experience with CHC or other clients from throughout our service area. Of the total individual/family counseling sessions, 66% were with community clients. Individual and group counseling continued on page 9
The Gift of Time

Stan Miller lives on a lovely piece of property dotted with beautiful barns, a farmhouse and even a curious cat. I came to talk to Stan about his life. A polite teenager greeted me with a smile and welcomed me inside. Stan was already talking with his nurse, Jessica. The house was warm and cozy, full of family photos and farmhouse charm. Yet the warmest feeling came when Stan opened up in a vulnerable and sincere way. With genuine transparency, Stan’s words challenge us to open up ourselves and allow our common humanity to bind us together.

Stan began journaling soon after his diagnosis with ALS, commonly referred to as Lou Gehrig’s disease. Per Wikipedia, “ALS is characterized by stiff muscles, muscle twitching, and gradually worsening weakness due to muscles decreasing in size. Most eventually lose the ability to walk, use their hands, speak, swallow, and breathe.”

September 9, 2015 was the day he was diagnosed with ALS. Two weeks after the diagnosis, Stan wrote this entry:

I was peaceful with receiving the diagnosis. I felt an urgency to move into action, to do the things that were most important. To do important things, not urgent things. Spend time with family. Write a testimony for God. Finish the barn.

Spending Time with Family

On the ride home after receiving the diagnosis, Stan and his wife, Elvera, began planning a trip out west. Years ago, they took a road trip to California during which the older children raved about the Redwoods. Now, with younger children added to the family, they wanted to take the trip again. It wasn’t the most convenient time to do it – with crops ready to harvest – but crops were urgent, this was important. Stan noted in his journal:

I am shocked at how fast my condition is moving. My muscles are shrinking fast. An electrical sensation has covered my entire body, making sleep difficult. Fatigue is keeping me from functioning. I was looking forward to this western trip, figuring if we did it right away, I would really enjoy it. I really have to push myself. I can’t keep up with my family. They have been so understanding. I have loved being with them. Trying to help the children process what is happening. They’re all very angry at God. They have had so much loss.

Stan and his wife are no strangers to loss themselves. They built their beautiful family with the bittersweet pieces of love and heartbreak. They had three biological children; all of them with significant medical needs. Two passed away, and Stephanie lives with them still, needing daily care and support. They’ve adopted six other children, including several older ones who had moved around quite a bit. It is quite evident that Stan wants to pour himself into the lives of his children – and realizing his “plans” were cut short was tough.

I had this great idea about writing letters to all the children for the important events in their lives that I would not be around for. You cannot take a child further than they are emotionally and mentally ready for. There is so much I would love to guide and teach and pass on, but they are not ready for much of this. So I need to move it to a few things that they can remember.

Confronting Death and Prioritizing Life

Stan’s initial prognosis was dire, being told he had only a few months to live. Soon after diagnosis, Stan began noticing his physical decline. He was put on oxygen almost immediately and this affected his perception of his days. He quickly had to confront the imminent possibility of death, and help those he loved do the same.

Tonight, I am struggling to figure out how to respond to death. When I think of all of the important things that should be done, I realize I can never make that happen. Once you’re sick with a disease, it is not the time to do extra things. God, I need the wisdom to decide what things to let go of and which things will make the biggest difference. Death is like life. You need to do your best and trust God for the rest.
Life often becomes an endless to-do list that can overwhelm even the most disciplined person. Coming to the end of life can exacerbate the anxiety created by the list, but it also has a keen way of filtering out the unimportant things.

**Acknowledging the “Elephant in the Room”**

Throughout life we strive to talk about the important things with our loved ones. From faith to relationships to problems in our society - finding a kindred spirit to discuss our ideas truly helps us feel ready for, confident in and content with our decisions. It’s no different with acceptance of death and dying. Yet finding people to talk to can be challenging. “I need to talk about death and dying. You find that death and dying are pretty taboo subjects,” Stan wrote.

As ALS ravaged his body, his mind was continuing to process all the changes happening in his life. Questions about the future swirled in his head. Knowing that I’m dying makes me feel isolated.

Stan would be the first to express that he’s had a wonderful support network of family and friends. He’s felt truly loved and cared for, which has helped him tremendously. Yet, even with a strong support network and people willing to listen, feelings of isolation are often part of this final journey. Stan shared the often confusing balance of encouraging his family to continue with life as “normal,” while daily recognizing the reality of his disease. Even when he has had people that would listen to his inner thoughts, he held back some of the deepest. This illness was his to face, and he didn’t want to burden everyone around him with his “elephant.”

*When I did talk about it, I did not go into it as deeply as my heart would have liked. I didn’t want to overwhelm the people I was talking to.*

*Living with a terminal illness can be hard for everyone. Denial is a very effective coping skill. But, using it indiscriminately isn’t healthy. At some point in this life and death play, the primary actors need to admit that everything isn’t OK. I get that. But it doesn’t mean I understand it.*

*Many people are uncomfortable talking about death and dying. Even the person that is dying finds it difficult to talk about. Maybe it’s because these are subjects we have never heard discussed.*
Finishing Well: Glimpses of Stan Miller’s Diary (cont.)

Stan has thought a lot about this “elephant.” He’s forced to think about it. But in reality, it’s a topic all of us will face at some point. Ignoring it doesn’t make it go away. In fact, engaging in healthy conversations about death and dying with those we trust may do everyone good. Stan mentioned that at times he thought there was an “elephant” in the room, when in fact, it was just his perception. We may be surprised that some people may be more open than we realize. Stan has thought about how to address the difficult topics people don’t want to talk about, and came up with his own formula.

.Verify that the elephant is real. Acknowledge its presence. Consider timing. Make a plan. Have a direct, honest, detailed conversation.

Gradual Detachment

ALS is a journey of detachment. From what I could once do, along with anticipation and preparation for what I will not be able to do in the near future.

Stan’s progression with ALS took an immediate toll, but it was also unusual. Soon after his diagnosis he noticed a decline. His voice became so soft it was difficult to understand him. He couldn’t roll over in bed anymore and was only able to swallow soft foods. Macaroni became a staple in his diet. Due to the rapid progression, and his doctor’s prognosis that he wouldn’t make it to February 2016, Stan had to hastily prepare his heart and mind.

Then in January 2016, all those abilities came back to him. He started to roll over in bed, he could communicate clearly and eat anything he wanted. It was like a miracle. However, though Stan doesn’t know when, he knows those losses will return one day.

I recognize the fact that I have not even really started my journey with ALS yet. Everything can be taken away from me. But one thing, the last of human credence, to choose one’s attitude in any given set of circumstances. I was determined not to let ALS touch my soul or spirit.

While Stan realizes that ALS will take things away from him, it has also given him something else. He has gained some new friends on this journey. The staff from Center for Hospice Care, and especially his nurse Jessica, who has been with him since he started care, are some of those new friends.

Finishing Well

Jessica and Stan have been talking about what it means to finish well.

I would have to say my life has been rich and full and rewarding these last several years. I have probably had more, really deep, meaningful conversations in the last several years than I have had for a lot of years. I find that my diagnosis brings people to me that want to talk about deeper things. And it gives me a great opportunity to get to learn their heart and to share my heart.

Finishing Well

Jessica and Stan have been talking about what it means to finish well.

What does it look like to finish well? Jessica helped me with that a lot. I realized that what I really wanted to do is live well. Because if you live well, you finish well. It needs to be a changing target. As I have lost ability, living well is fleshed out in a different way.

Stan continued to encourage all of us to live well all along the way. Why put off the good things that we could do today? Why wait for retirement to take that dream trip? Prioritize the “important” things, not the “urgent” things.

The way you approach death will be how you lived your life.
Through its support of Center for Hospice Care, Hospice Foundation helps patients and their loved ones experience the best possible quality of living regardless of healthcare insurance or an ability to pay.

- Hospice
- Home Health
- Grief Counseling
- Community Education

Caring for patients in Elkhart, Fulton, Kosciusko, LaGrange, LaPorte, Marshall, Porter, St. Joseph and Starke Counties in northern Indiana.
The Gift of Time

Thomas Yoder has always had an artistic eye. Whether painting portraits or growing flowers – he found his calling and passion among beautiful things. But some experiences in life aren’t as pretty – and cancer is one of them. A few months ago, Tom’s doctor delivered the difficult news that his cancer had spread and was throughout his body, including his bones and joints. “Talk about a bombshell when he told me,” Tom said. He had always been active and healthy, and definitely not appearing the 87-years old that he is. One thing Tom has already learned is to take each day as it comes. “I grow into this,” he said. “Like something is new every day. You don’t really know what to expect exactly.” And that’s when his Center for Hospice Care nurse reassured him, “We want you to have a good quality of life – to do the things you love and spend time with the people you love.” And that is Tom’s goal, each and every day.

Tom grew up in Middlebury, where he was a meat cutter at his family’s grocery store on Main Street. By the late 1970’s, Tom was managing Everett’s Grocery Store in Goshen. He was a single dad with two daughters and a son. He couldn’t help notice an attractive frequent customer who had two sons and one daughter, and was also single. Recently, Tom and Beth celebrated their 44th wedding anniversary. Their “Brady Bunch” family remained in the Goshen area where Tom discovered and pursued his many artistic talents.

Tom tried his hand at painting and had a few pieces he showed to Martin Stevens, an Elkhart Art League teacher. Martin said that Tom should do more of it, and so he did – for 12 years. Tom entered art competitions where he won best of show, and even judged a few shows. “I started doing commission portraits,” Tom said. “I probably did 40 to 50 of them in the Middlebury area.” Even though that was quite a few years ago, many of the paintings have recently resurfaced. One by one, Beth brought pictures into their living and dining room – still-life paintings and portraits, lovingly painted years ago. “My brother’s daughter posted a painting on Facebook the other day,” Tom said. “She said, ‘You painted this picture of me when I was a young girl.’” He wasn’t sure until he looked closely at the painting and realized that it was one of his. Another family in Middlebury commissioned Tom to paint portraits of their kids many years back. Members of that family have been taking pictures of those paintings to show Tom.

Although painting lasted for years, Tom’s creative pursuits found a new direction. Everett’s Grocery Store sold more than groceries, it also had a garden center. When Tom was ready to retire, a friend at Everett’s told him they were looking for someone to manage the garden center. Because Tom had always liked flowers and had dabbled with gardening while in Middlebury, he decided to try it. “We had a little makeshift garden center that didn’t amount to a whole lot. I think they did about $60,000-$70,000 in business a year,” Tom shared. “When I took it over, it started increasing. We moved the garden center across the street to a nicer facility and built a new building and added a greenhouse.” Tom had big plans. “A couple years later I talked the owner into putting in another greenhouse and business was really starting to boom,” Tom said. “The last three years we were open we were doing over a quarter of a million dollars worth of business each year. We sold a lot of flowers.”

When the garden center closed, Tom realized he didn’t want to buy and start up something new. However, another friend approached him regarding a new artistic endeavor – one that incorporated his love of gardening. “Goshen News is looking for someone to write a gardening column,” Tom shared. He had never written anything like...
that, but he drafted what he thought would make a good gardening column. “I took it in and met with the publisher and editor. I explained that I wrote this as a kind of introduction. They read it and said they would make it my first column.” That was in 2009. His first column began, “Well folks, here it goes, my first attempt at writing a column. No, I’m not a journalism major, nor do I have a degree in horticulture, but I do have a love for flowers.” With those words Tom grew a faithful following and had binders brimming with newspaper columns—all expertly organized by date. Tom was writing the column up until Christmas 2018. “I quit when I got cancer,” he said.

It’s evident that Tom takes great pride in the beautiful things that filled the room where we sat. He’s taken great joy in the work he's been involved in over his lifetime. As people approach him with copies of portraits he’s painted or comments about his popular newspaper column, Tom realizes how impactful his work has been on people around him. With Center for Hospice Care helping improve his quality of life, Tom has been able to enjoy these precious moments and to continue to share his talents with the new people he meets.

2018 Year in Review (cont.)

continues to be available to anyone dealing with the loss of a loved one anywhere in our service area at no charge. There were nearly 4,000 individual and group counseling sessions provided during 2018.

To emphasize the importance of advance care planning, Honoring Choices Indiana – North Central found a new home within our Hospice Foundation. We also continue to be privileged to operate Milton Adult Day Services and the international hospice and palliative care partnership program, Global Partners in Care (GPIC). GPIC has partnered 42 U.S. hospice and palliative care programs with similar programs in low-resource countries, primarily in sub-Saharan Africa.

We are joined in our work by a team of dedicated volunteers. During 2018, CHC hospice program volunteers worked 15,667 hours, the equivalent to over 7.5 FTEs who never call in sick or take vacations. In addition, they drove 49,760 miles. That’s more than 20% of the distance from the earth to the moon. Adding the last five years’ mileage together, our volunteers could have driven to the moon. These volunteers provided a dollar savings to CHC during 2018 totaling $407,225. Medicare requires our volunteers’ work to be calculated and reported each year.

Overall, 2018 was another wonderful year for Center for Hospice Care, Hospice Foundation, Milton Adult Day Services and Global Partners in Care. We appreciate whatever role you played in making it all possible. Our goal each day is a simple one: To Improve the Quality of Living, whether it’s in northern Indiana or across the globe in developing countries. Everything we do all comes down to a single best day of caring at the patient bedside. Thank you for your ongoing interest and support.
Understanding Hospice Care

Compassionate Support: Perinatal & Pediatric Palliative Care

By Kristiana Donahue

When I went in for my 20-week ultrasound, our family was full of excitement and anticipation. We made predictions on whether we were going to have a boy or a girl. What we didn’t expect was the news we received. Our little girl had problems, and the prognosis we received was grim. I was silent as the shock of the news absorbed every ounce of me. I continued to carry our daughter amidst all the uncertainty, and I found myself dreading each ultrasound visit.

Many of the lessons I learned along that difficult journey have helped me in my role as the Volunteer Recruitment and Training Coordinator at Center for Hospice Care. There is a Perinatal and Pediatric Committee that meets regularly to make sure we are providing the best support for families that are walking similar paths. Having a well-prepared and compassionate support network makes a difference. There wasn’t much I could do to change my daughter’s circumstances, but I found that such a network allowed me to ask my questions and to cry. It also equipped my husband and I to have hard conversations with each other and our other children. I have held hope in one hand and dismal realities in the other. I have fallen exhausted after hours of sitting bedside in the NICU. And while my story may not be everyone else’s story, we may share experiences. Please know that at Center for Hospice Care, you will be supported by a compassionate and empathetic team of individuals.

Center for Hospice Care provides perinatal and pediatric palliative care. Perinatal palliative care is compassionate support for parents and families who find out during pregnancy that their baby has a potentially life-limiting condition. Care focuses around the needs of the family in a holistic nature. This support is provided from the time of diagnosis throughout the baby’s life. Perinatal palliative care helps parents embrace whatever time they have with their child and make it meaningful, memorable and family focused. Pediatric palliative care provides quality of life for the child and support for the family. Children within our care can continue to receive treatment for their disease, and also benefit from palliative care, which focuses on enhancing quality of life.

Sarah Sieh, Social Worker
As a social worker, I seek to support our families in many ways. I create a safe space in which to share. I want to hear the family’s journey and the child’s story, to allow the family to share anything that may be hard for others to hear... I provide support to siblings, and I listen to the parent’s worries, hopes and fears. We discover ways to cope. I am a sounding board for families and loved ones as they make hard decisions.

Kathy Eash, Nurse Practitioner
I am part of the medical team, composed of a physician and two nurse practitioners, who care for our pediatric patients’ medical needs. I often work directly with the physicians and can perform developmental exams and also manage any new conditions that may arise. Many times office visits can be avoided with the involvement of the CHC team. The pediatric team has more than 30 years of experience working in the pediatric field.

Abby Eicher, RN Case Manager
Families get to know me well as I set a schedule with them and make visits to the home. My goal is to make sure the child is comfortable, and I will assess this each time I come. I will communicate with the child’s doctor or nurse practitioner to address any issues. I order
supplies and medications. I want to make sure the family is comfortable caring for their child at home, so I can provide any education needed to make sure they feel equipped to do so. I will support the parents and family in any way I can and I’m available 24/7 for questions or concerns. I am a Certified Hospice and Palliative Pediatric Care Nurse and have a passion to give these children the best quality of life we can.

Holly Farmer, Bereavement Counselor
I am a counselor who works with our perinatal palliative care families. I meet families where they are, offer support and I listen as they share their understanding of what is happening with their baby or babies. I will meet with them during their pregnancy to listen to their concerns, their fears, their sadness and at times their intense sorrow about their baby’s diagnosis. We can talk about the birth plan, looking at their different options, and we can talk about how to tell others about what is happening. Providing education on how to talk about the baby’s illness with siblings is another role of the counselor. When the family wants to create memories, I will encourage them to do so during the pregnancy and then offer ideas for how to do this when needed. Once their baby is born, I can provide support as needed during their baby’s life. After their baby dies, our support continues. We provide individual, family and group counseling for those families grieving the death of their baby or babies.

Kristiana Donahue, Volunteer Recruitment and Training Coordinator
I work with our volunteers to equip them for their role supporting families. We have a designated team of volunteers who have a passion for working with our pediatric patients and their families. Volunteers can support families in many ways, from being with the child while parents take a much-needed nap, to doing some light housework, to even walking the dog. Volunteers provide a listening ear, and can help with memory-making items and activities. Volunteers are an extension of the Center for Hospice Care team, as well as an extension of our own community. I know how important it was for our family to have individuals to walk with us on our journey. Our volunteers are willing to walk with our families on theirs.

Arlin Cochran, Chaplain
As a Chaplain, I care for the spiritual needs of our families. Spiritual care focuses on what is most important to the family and the child. I’m here to journey with the family as they find hope and meaning beyond their child’s illness. I am clinically and theologically trained and know that listening is the first step in learning from the child and the family. Genuinely hearing their spiritual needs allows me to help them work through their pain so they can find true peace within the context of their own belief system.

Notes From Our Families to Center for Hospice Care
I can only say good things about staff, volunteers, doctor, everyone. They treated my husband with respect and kindness. We were so thankful hospice care was available to us when we needed them. God bless all of them.

I could not have cared for my friend without hospice’s help. Thank you for being so supportive to me.

The nurse was an angel and really understood my brother who was mentally challenged. The chaplain was a blessing. Thank you and God bless!

Everyone we dealt with was wonderful. Mom’s primary nurse was great. We would highly recommend CHC to anyone needing help with their loved one. Thank you.

All the staff was so kind and wonderful in helping my mother in every possible way and always on top of things.

The nurse was so good and informative to me and my mom. And she sent a card after my mom’s passing. Their care was excellent and professional. Thank you/ them for their service.
Advance Care Planning

By Elleah Tooker

Advance care planning has been a hot topic among end-of-life professionals for a long time... but what exactly does advance care planning mean and why is it so important? Advance care planning is the process of making and documenting decisions about the healthcare you would want to receive if you are unable to speak for yourself. Advance care planning includes discussions related to end-of-life wishes; advance care directives are the documents that will help you record those wishes. Many people hold the misconception that advance care planning is solely for older adults; however, adults of all ages need to communicate their wishes. Healthcare emergencies, whether an accident or sudden onset of illness, isn’t a respecter of age. We are all susceptible.

In the state of Indiana, advance care directives are forms that record your wishes, as well as who you designate as your healthcare representative. These documents typically include a healthcare representative form, a DNR (do not resuscitate) or life-prolonging form, and a living will. Having the appropriate documents in place is important because they extend your choices beyond your ability to speak for yourself. Each of us has the right to have healthcare choices honored.

Decisions regarding your care preferences at or near end-of-life are yours to make. Discussing these decisions with your loved ones, and documenting them will help your loved ones know what to do, should the need arise.

If you do not have any documents in place yet, starting the conversation is an important first step. Often times, when plans are not in place, family members are worried about having to make decisions for you, or there may even be disagreements within the family about what you would want. For example, if you were in a serious accident and couldn’t speak, who would make those decisions for you? Having plans in place can allow family members to focus on being there for you in your time of need.

Here are some points to consider when beginning the planning process:

- Focus on choosing a healthcare representative who will honor your wishes if you are not able to speak for yourself. Not everyone can do this. Having discussions with your loved ones can help determine who is best able to be your representative.
- Document your wishes with a living will. This details your wishes regarding medical treatments and gives your healthcare representative direction should they have to make decisions on your behalf.
- Consider completing a DNR or life-prolonging document as well. Many people believe CPR will result in a successful outcome; however, this may not be the case, particularly when it’s done outside a hospital setting, or on elderly people or those with a serious illness. The choices you make in your 30s or 40s may be very different than those you may make when you’re in your 70s or 80s. As you have children or as they grow up, your decisions may change. By beginning the conversation, you are allowing yourself to share with your loved ones your wishes at that time in your life. These documents are something to be revisited every few years or when major life events happen so you can be sure the care you have outlined still fits your end-of-life care wishes.

Having these conversations can be difficult but there are local resources that can help facilitate them, including Center for Education & Advance Care Planning (CEACP) – the educational arm of Center for Hospice Care. Because of the generous support of the Vera Z. Dwyer Charitable Trust, CEACP is able to hold family-friendly events throughout the year that are geared towards normalizing conversations about end of life. “Death by Chocolate” and “Cupcakes to Die for” combine information and fun to help make these hard-to-initiate conversations easier. Participants answer trivia questions and discuss possible answers with others at their table while enjoying decadent desserts. These events can be modified for companies to offer to their employees or clients.

The Vera Z. Dwyer Charitable Trust also supports panel discussions throughout the communities we serve. These sessions bring together area experts such as financial advisors, elder law attorneys, bankers, funeral home directors and others to discuss the full range of end-of-life issues. These discussions allow community members to ask questions about a wide-range of topics in a comfortable, non-threatening setting.

Each of these events is designed to help guide participants towards having conversations with their loved ones. One avenue available is facilitated conversations with an Honoring Choices® Indiana – North Central certified facilitator. This non-profit organization is housed at Center for Hospice Care and is dedicated to promoting and sustaining advance care planning. The organization provides facilitators (at no charge) to make conversations about advance care planning easier. Honoring Choices facilitators can work with individuals to complete their advance directives or lead group conversations about end of life.

For more information and resources regarding advance care planning, please visit educate4life.org.
Many of us who have had pets, know what an important part of the family they can become. For some, the bond with their pets is similar to their bond with people. Pets are treated and loved like family members and can comfort their owners much like a close friend or relative. It is no surprise that during one of the most important and challenging life stages – the end-of-life journey – pets can play a critical role.

The human-pet bond can take on deeper meaning during a life-limiting illness, and pets may serve as the primary – or even sole – source of companionship, comfort and love for some. Loving and caring for their pet can give a patient solace, and even a reason to get up every day. Unfortunately, as their illness progresses, patients can become unable to adequately care for their pets. The problem is then two-fold – the pet is obviously not being cared for, and the patient often feels additional stress, guilt and grief and their inability to care for the pet.

Some patients are fortunate to have a strong support network and receive all the assistance they need. Unfortunately, as some families deal with grief and loss surrounding the patient’s illness, beloved pets may be overlooked or treated as an afterthought by family members who are unfamiliar with the patient's bond with a pet.

To help further support our patients in their time of need, Center for Hospice Care has committed to becoming a Pet Peace of Mind partner. Pet Peace of Mind is a national program that relies on a coordinated group of volunteers to fulfill requests for pet food delivery, dog walking, litter box cleaning, or even pet transportation. Volunteers can also help with administrative needs such as making phone calls and scheduling of vet appointments. By helping care for a patient's pet, the volunteer is easing the burden that can create anxiety and stress on a patient and their family.

Dianne McGill, Pet Peace of Mind’s president, has overseen programs that work to keep older adults and their pets together and knows first-hand the many health benefits of the human-pet bond.

I know of countless patients who have said that their pet is their lifeline. Pets are great medicine for coping with the anxiety the comes from dealing with a serious medical condition. For many patients, keeping their pets near them during the end-of-life journey, and finding homes for their beloved pets after they pass is one of the most important pieces of unfinished business. – Dianne McGill

If you’re interested in becoming part of this fulfilling new volunteer opportunity, please contact Marlane Huber, CHC’s Volunteer Coordinator in Elkhart, at huberm@cfhcare.org or call 571-970-0401.

"Pet Peace of Mind” Helps Our Patients Keep Their Pets

TWO GREAT EVENTS, ONE SPECIAL DAY

Hospice Foundation is excited to once again present Bike Michiana for Hospice and Walk for Hospice on the same day at our Mishawaka Campus. Join us for a great day filled with fun, friends and food. Bike Michiana for Hospice will offer four routes (3 miles, 26 miles, 51 miles and new this year, a metric century). SAG stops will be at Jimtown High School and Pringle Park in Goshen, hosted by 523 Tap and Grill and Navarre Catering & Events. Walk for Hospice will take place along the beautiful Mishawaka River Walk. All participants will be treated to a post-event celebration at Center for Hospice Care featuring food from Yesterday’s of Granger.

Registration Information

Registration for either event is $75 for adults, $45 for students, and kids 12 and under are free, with adult registration. Registration must be done in advance – no day-of registration!

Your registration includes the ride or walk, an event t-shirt, and the post-event celebration.

Register at FoundationForHospice.org/bike or FoundationForHospice.org/walk

Questions?

Call 574.243.3119 or email NicholsH@FoundationForHospice.org

SUNDAY, SEPTEMBER 8

Center for Hospice Care’s Mishawaka Campus

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Please call for dates, times & locations. Services are free but registration is required.

Call 574-255-1064 for more information if interested in any of the following groups.

**Children’s and Teen’s Services**

**Children’s Grief Support Group:** A once per week time-limited group providing education and emotional support to children, ages 6-12, dealing with the death of a loved one.

**Teens Grief Support Group:** This is an ongoing group for teens, ages 13-17 (18 if still in high school), who have experienced the death of someone significant in their lives. The group provides grief education and the opportunity for grieving teens to share with and be supported by their peers.

**School Groups:** Time-limited grief support groups are offered at area schools. Please call for locations.

**Camp Evergreen:**
- A weekend grief camp in early summer for youth and teens ages 10-17 (18 if still in high school) who have experienced the death of a significant person in their lives.
- A Saturday workshop in the fall for parents/guardians and their children, ages 6-9, who have experienced the death of a significant person in their lives.

**Grief Support for Adults**

**Living With Loss:** A once per week, time-limited group providing education and support for individuals who have experienced the death of a significant person in their life. Offered periodically at each office location.

**Finding Resilience Group:** An ongoing support group for individuals who have completed a Living with Loss group and are early in their grief journey.

**Rebuilding Our Lives:** An ongoing support group for those who are further along in their grief journey and are focused on building a new life.

**Yoga Grief Support Group:** An ongoing grief group using gentle mat yoga to help you focus on and cope with your physical and emotional grief. Facilitated by Bereavement Counselor Annette Deguch RYT200 (Registered Yoga Teacher) and offered at our Mishawaka office. Open to current clients of the Bereavement Department.

**Forget Me Not:** An ongoing support group for parents who have experienced the death of a baby during pregnancy, childbirth, or infancy. Offered at our Mishawaka office.

**Young Widows and Widowers Support Group:** An educational and ongoing support group for widows/widowers age 55 and under who have recently experienced the death of their partner or spouse. Offered at our Mishawaka office.

**Good Grief Gals Tea:** An ongoing support group for women whose partner/spouse has died.

**Good Grief Guys:** A monthly breakfast for men dealing with the death of a partner/spouse.

**The Hero Within:** An ongoing experiential grief group that explores how the human spirit is not defeated by suffering and even in the face of death can grow stronger with honesty, courage and love. Offered at our Plymouth office.

**Loss After Addiction Group:** An ongoing educational and grief support group for people who have experienced the death of a loved one to overdose and/or abuse of alcohol/drugs. Offered at our Mishawaka office.

**Suicide Survivor’s Support Group:** An ongoing support group for anyone who has experienced the death of a significant person from suicide. Offered at our Plymouth office.

**Crafting Memories:** A monthly group that supports healthy memory work through crafts. Completion of a Living with Loss group is required. Call to register each month. Offered at our Mishawaka office.

**Additional Grief Services**

Please call for more information.

**Memorial Service:** A service of remembrance is offered once a year.

**After-Images Art Counseling Program:** Provides an opportunity for individuals to explore grief through the use of art, painting and drawing in an expressive counseling program. No art experience is needed. Offered at our Mishawaka office.

**Daughters Remembering Retreat:** An overnight retreat for women who are at least six months out since the death of their mother. It provides a supportive grief experience with facilitated group sharing and time for individual reflection.

**Grief Forum:** A series of educationally focused sessions focused on ways to cope with the holidays.

**Handing the Holidays:** Educational and supportive sessions offered in the summer.

**Movie & Chat Events:** Join other bereaved in viewing a movie with grief themes and then participate in an optional roundtable discussion. Offered regularly throughout the year.

**Presentations:** Bereavement Counselors are available to do presentations on issues related to grief and loss and death and dying.

**Dreams and After Death Experiences:** A time-limited group designed to explore and share encounters with loved ones in dreams and events post death. Offered periodically in Mishawaka.

**Pen & Paper Group:** A time-limited writing group that provides opportunities for the expression of thoughts and feelings through guided writings and group support. No writing experience needed. Offered periodically in Mishawaka.

**Individual and Family Counseling for all ages is also available.**

For more information:


CFHCare.org

• 1.800.HOSPICE
Name: _____________________________________________________________________________  Date: _________________________________
Street Address: _____________________________________________________________________________________________________________
City/State/Zip: ______________________________________________________________________________________________________________
Home Phone:_________________________  Cell Phone: _________________________________________
Email: _____________________________________________________________________________________________________________________
Did you serve in the military?  Yes  or  No   If yes, which branch: ___________________________________________________________________
Emergency Contact Person: _________________________________________________________  Phone #_________________________________
Do you have a valid driver's license/current auto insurance and a car for use as a volunteer? __________________________________________
Volunteer Position Desired: Patient Care _________    Bereavement Phone Caller _________    Office _________
Community Relations _________    Fund Raiser _________    Complementary Techniques: _________    Vet to Vet _________
List Specialty (such as interpreter, licensed hair dresser, massage, pet therapy ,etc.) __________________________________________________
___________________________________________________________________________________________________________________________
Intern: (indicate field desired): ______________________________________________________________________________________

Days and Hours You Are Available: ______________________________________________________________________________________
__________________________________________________________________________________________________________________________
Volunteer & Work History: (List most recent)  ___________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________
Do you have any physical conditions, health problems, or allergies which we should consider before placing you as a volunteer? __________________________________________________________________

References: Please list two persons other than family members who have known you for at least one year:

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<th>Name</th>
<th>E-Mail Address</th>
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Authorization:
I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to be considered for volunteer placement. I authorize Center for Hospice Care to contact the above references.

_________________________________________  __________________
Signature                          Date
It’s **QUALITY**
not **QUANTITY**

Just a few hours can make all the **DIFFERENCE**!

**Be A PART OF SOMETHING AMAZING**

Be A Hospice Volunteer

- Companionship
- Inpatient Unit
- Respite
- Pet Visitation
- And More!