



Hospice Volunteers of Hancock County

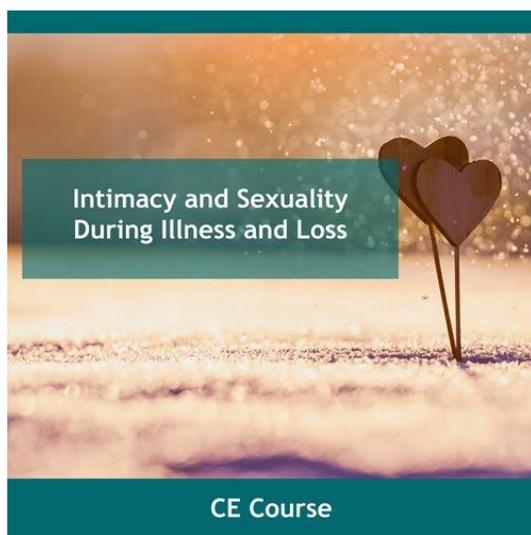
January 2021 Volunteer Newsletter

Hello HVHC Volunteers and Friends,

Please join us for our upcoming Hospice Foundation of America Conference, online this year on Thursday, January 7 from 9:30 a.m. - 1:00 p.m. (see below for details), as well as spreading the word about these other upcoming events:

Mark Your Calendars for these Upcoming HVHC Events:

- ❖ *New Year's Day, Friday January 1- HVHC office will be closed.*
- ❖ *MLK Day, Monday, January 18- HVHC office will be closed.*
- ❖ **Choosing Resilience: Developing a Healthy Approach to Aging** (formerly Aging & Loss): *Thursdays, Jan. 14 - Feb. 18, 1-3 p.m. offered online (see page 2 for more details).*
- ❖ **Winter Grief Support Groups:** *Registration period January 4-15, groups begin the week of Jan. 25, various times, offered online (see page 2 for more details).*
- ❖ **Hospice Myths Debunked- Hospice Offers More Than You Think, Adult Ed Program** *Thurs. February 4, 2021 from 10-11:30 a.m. via Zoom*
- ❖ **Supper & Cinema:** *Thursday, Feb. 11, 5:30 – 7:30 p.m. Planning for movie Clouds, contingent upon access. If necessary, substitution will be announced. Offered online.*



Hospice Foundation of America's Annual Living with Grief Conference: Intimacy and Sexuality During Illness and Loss will be offered online this year on Thursday, Jan. 7, 9:30 a.m. - 1:00 p.m with a Local Panel.

Holistic treatment of individuals who are terminally ill or bereaved should include the needs of the whole person. Yet the most basic of human desires, those that include intimate and sexual relationships, are frequently avoided, dismissed, or unaddressed by healthcare, social service, clergy and bereavement professionals.

In this *Living with Grief*® 2020 program, Hospice Foundation of America identifies barriers to intimacy and sexuality for terminally-ill persons and the bereaved. The program

emphasizes the knowledge and skills that professionals must have to sensitively address intimacy and sexuality and suggests interventions that can help dying and bereaved persons address these elemental human needs.

The Local Panel will be from 12 p.m. -1 p.m. and includes:

James K. VanKirk, MD, FACP, Medical Director at Northern Light Palliative Care, Eastern Maine Supportive Care, and Northern Light Home Care & Hospice.

Lenard W. Kaye, D.S.W., Ph.D., Director, UMaine Center on Aging. Professor, UMaine School of Social Work.

You can register by emailing info@hospiceofhancock.org or calling Hospice Volunteers of Hancock County at 667-2531 (Leave a message in the general mailbox if no answer).

Bereavement Groups starting in January:



Winter Grief Support Groups begin the week of Jan. 25, Registration January 4-15, offered various times online.

Hospice Volunteers of Hancock County is offering a free online grief support group for those who have lost a loved one. Meetings will take place on a weekly basis, with the weekday and time to be determined by the availability of registered participants. To register, click this link for our online [Support Group Registration](#), email info@hospiceofhancock.org or call 667-2531.

Aging and Loss is now Choosing Resilience: Developing a Healthy Approach to Aging Thursdays, Jan. 14 - Feb. 18, 1-3 p.m. offered online.

Expanding upon our popular Aging and Loss workshops, for those 62 and older seeking tips and strategies for incorporating healthy approaches to the myriad challenges of aging.

To register, email info@hospiceofhancock.org, or call 667-2531.

Hospice Myths Debunked- Hospice Offers More Than You Think

Thurs. February 4, 2021 from 10-11:30 a.m. via Zoom

(Make-up date in case of power outage is Thurs, February 25, 10-11:30 a.m.)



Join HVHC Program Director Lori Johnson and Executive Director Jody Wolford Tucker to learn more about what Hospice can offer:

- Uncover common myths about hospice care and learn about hospice services which extend beyond what many people realize.
- Volunteer hospice service will be explained with the goal of serving patients earlier in their journeys.
- Information about other hospice services such as assistance with Advance Care Directives and bereavement support for families will be provided.

To register for this program contact either Ellsworth Adult Ed or MDI Adult Ed, see below:

[Ellsworth Adult Education registration link](#), (207) 664-7110 or adultedinfo@ellsworthschools.org

[MDI Adult Education registration link](#), (207) 288-4703 or mdiae@mdirss.org

How COVID-19 Is Changing End-of-Life Care

By [Sherri Snelling](#), adapted from an article in [nextavenue.org](#), September 29, 2020.

According to a 2019 [National Hospice and Palliative Care Organization](#) report, nearly 1.5 million Medicare beneficiaries currently receive [hospice care](#), defined as compassionate care that replaces treatment for patients who have a terminal condition with less than six months of life expectancy.

However, a National Association for Home Care & Hospice (NAHC) [survey](#) conducted in May 2020 found that 95% of hospice agencies have had existing patients refuse visits due to fears of contracting COVID-19. And while two-thirds of hospice agencies are taking COVID-positive patients, they have lost overall clientele, forcing them to reduce direct-care staff. Some staff concerned about their own health and their families' health are reluctant or even refusing to help any COVID-confirmed patients.

"The agency said they couldn't risk staff getting the virus and having to be quarantined and out of commission. That was a blow."

Rebecca Bryan, a journalist for Agence France-Presse based in Los Angeles, realized that hospice care can be a blessing when her father spent eight months in hospice in 2004. But things were different when her 89-year-old mother, Margie, needed hospice before passing away during the pandemic. "Hospice is a wonderful program, but I never realized how hands on my mom must have been for my dad since I was only home the last month of his life," said Bryan.

When her mother was recently diagnosed with late stage leukemia and given three to six months to live, Bryan spent two months in Dallas caring for her. "Mom made a decision not to proceed with blood transfusions, so we secured hospice care for her at home," Bryan said. But while the small agency in Dallas helped deliver a hospital bed and did an initial inspection, it refused to send any staff to Bryan's mom's home when she showed an elevated temperature.

"She had just tested negative for COVID in the hospital and because of her cancer, she had not been outside. She was only at home alone but the agency said they couldn't risk staff getting the virus and having to be quarantined and out of commission. That was a blow," said Bryan. Bryan said she and her sister learned how to turn her mom to avoid bed sores, put on adult diapers, administer morphine and other paraprofessional caregiving tasks without any instruction. "That was hard, I wish we had more guidance, because you are constantly asking yourself, 'Am I doing this right?'" said Bryan.

Rebecca Bryan advises family caregivers facing hospice for a loved one to ask a lot of questions such as, "If my loved one tests positive for COVID or has one of the virus symptoms, does that affect your ability to come care for them?"

Hospice Telehealth

Robin Fiorelli, senior director of bereavement and volunteer services for VITAS Healthcare, a provider of end-of-life care, believes in-person hospice care can never really be replaced but that telehealth has become a solution to some hospice challenges during COVID-19.

“We can conduct a virtual tour of a home hospice patient’s living area so our nurses can assess whether a hospital bed, walker, patient lift or bedside commode should be delivered to the home,” said Fiorelli.

“COVID has magnified the strain on family caregivers, there is no relief.”

She also added that face-to-face conversations about goals of care are being replaced by video chats in which physicians, patients and family members explore care-related wishes and document difficult-but-necessary decisions about ventilation, do-not-resuscitate orders and comfort-focused care. This proves especially valuable for family members who live far away from the patient and who can be part of those conversations remotely.

The Centers for Medicare and Medicaid Services (CMS) has waived certain requirements for hospice care at home due to the pandemic, such as allowing health care professionals to recertify patients for another six months of hospice care via a telehospice visit, foregoing the mandatory two-week supervisory visit for home health aides and waiving the mandatory hospice volunteer hours, which normally have to meet 5% of total hospice hours delivered.

“COVID has magnified the strain on family caregivers. There is no relief,” said Vic Mazmanian, a dementia care expert who operates [Mind Heart Soul Ministry](#) to train faith-based organizations, provide support group services for senior centers and memory care communities and work with hospice chaplains.

“Not being able to take a loved one to adult day care or a senior center so you can get a break is accelerating the stress and impacting the health of caregivers,” said Mazmanian. “The 24/7 nature of hospice care, with most, if not all, the work being done by the family member without help from professionals or volunteers, is being derailed by the pandemic with many caregivers feeling increased anxiety, depression and loneliness.”

COVID-19 Sparks 'The Talk' For Families

When Next Avenue asked readers on our [Facebook page](#) how the pandemic has affected care for their loved ones, one shared that she recently lost her mom after home hospice care and worked hard to make sure COVID-19 wouldn’t be part of the end of her life.

“Eighty percent of people don’t make a will or have the family conversation about long-term care because they are afraid if they do, they will die,” said Scott Smith, author of “When Someone Dies — The Practical Guide to the Logistics of Death.” Smith, who is CEO of Viant Capital and sits on a hospice board, advises families to have “The Thanksgiving Talk” where older family members share not just their wishes but where all the important legal and financial documentation can be found.

Mika Newton said losing his dad galvanized him and his brother, Timo, to get all his mom’s end-of-life plans settled now, while she's still alive. “My mom was able to participate in the conversation. which I’m really grateful for. And my dad did a great job making sure she would be OK financially, so it wasn’t a huge burden. I’m glad we went the route with hospice, I feel at peace with it.”

[Sherri Snelling](#) is a gerontologist, consultant and national speaker specializing in caregiver wellness. She is CEO and founder of Caregiving Club and author of A Cast of Caregivers – Celebrity Stories to Help You Prepare to Care.



May the year ahead bring you “leaps and bounds” forward in health, happiness, joy and peace!