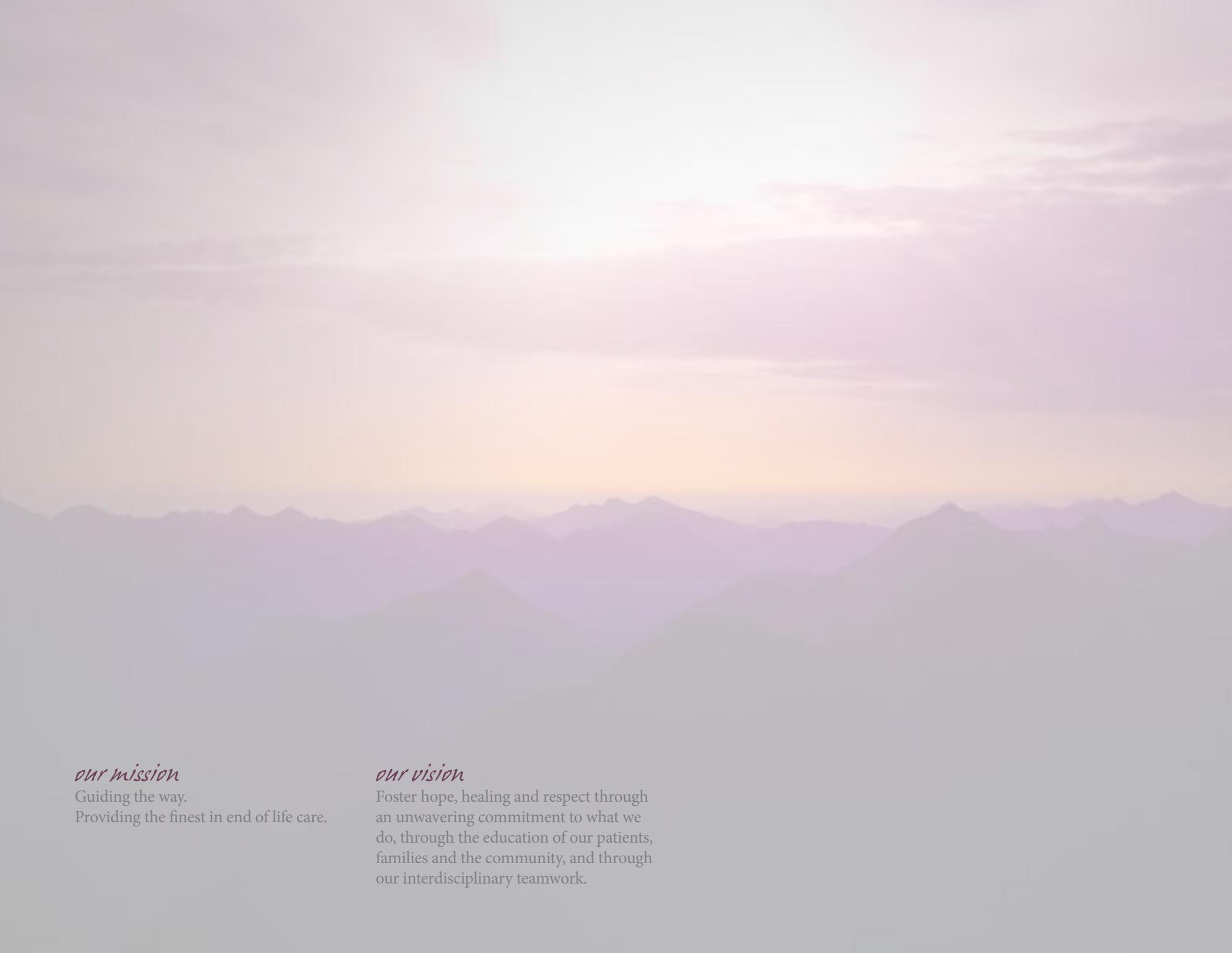


expanding our horizons



2011 year in review



our mission

Guiding the way.
Providing the finest in end of life care.

our vision

Foster hope, healing and respect through an unwavering commitment to what we do, through the education of our patients, families and the community, and through our interdisciplinary teamwork.

expanding our horizons

It's easy to provide traditional hospice care for a traditional hospice population of mostly older adults. During the brief time many of our patients are with us, our teams of clinicians and volunteers provide care in homes and long term care facilities, addressing patients' medical needs while helping them come to terms with the final phase of their lives.

What's far more difficult for us as a hospice organization is making certain that we reach all those who need us when they need us most – no matter how old they are, where they live or how complex their prognoses may be.

In my 30-plus years as a physician, I have found that the best care is personal and comprehensive. It is care that prepares patients with chronic illnesses for what lies ahead so that there are as few surprises as possible along the way. And it is care that is honest, offering patients the information they need early enough so that they can make the best decisions for themselves.

As a physician who specializes in the care of older adults, I've followed many patients for a decade or more. Along the way, I've helped them recover from medical crises and held their hands when it was time to have the conversation about the need for the comfort care hospice provides. And then I have followed them on their journeys through hospice.

I hope, in the process, that I have helped them access the right care at the right time for them and their families.

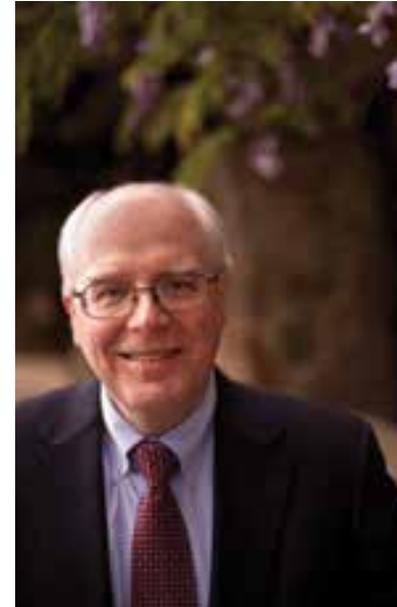
Each year, only a fraction of the individuals who die benefit from hospice. At Gilchrist Hospice Care, it is our goal to overcome those barriers that have kept so many from the gentle comfort and support that are the hallmarks of our care. And so, we will continue to expand our horizons, adding needed programs and services so that anyone in Central Maryland in need of hospice services will have the access they deserve.

As always, thank you for your support. It is your continued generosity that helps us fulfill our mission of providing the finest in end of life care.

Sincerely,



W. Anthony Riley, M.D.
Medical Director, Gilchrist Hospice Care
and Gilchrist Greater Living



On the following pages, you will see stories about initiatives undertaken by Gilchrist Hospice Care in the past year. Each program is designed to broaden our reach to ensure that all patients and their families have access to the finest in end of life care.

p. 3
Gilchrist Kids offers care to the youngest patients with life-limiting conditions – infants, children and teens.

p. 5
Our new inpatient center, **Gilchrist Center Howard County**, provides new access to quality inpatient services closer to home for our patients in Howard and southern Baltimore counties.

p. 7
And our revamped physician practice, **Gilchrist Greater Living**, is working to create care for elderly patients with chronic or life limiting conditions that is coherent, coordinated and comprehensive.



Evan's team:

- During evening visits, nurse Brenda Blunt checked on her young patient and learned to read his discomfort by the expressions on his face.
- Social worker Briana Shirey spent time helping family members work through the day to day stresses that accompanied Evan's decline.
- Chaplain Don Hohne focused many of his visits on Evan's grandfather, who cared for the little boy most afternoons after school and was having a particularly difficult time with his grandson's decline.
- Child Life Specialist Beth Kreyling stepped in to help Evan's father and stepmother, Shawn and Danielle Casey, answer the tough questions about death and dying posed by their 5-year-old son, Hunter.



Top: Evan rests in his crib. Bottom Left: Chaplain Don Hohne, Evan's mother Stacy and social worker Brianna Shirey watch nurse Brenda Blunt as she playfully kisses Evan's feet. Bottom Right: Child Life Specialist Beth Kreyling helps Hunter, Evan's half brother, sled down a grassy hill as his brother and sister watch.

fulfilling a need for young patients and their families



In the little room, where bright decorations mingle with the trappings of medical care and therapy, Brenda Blunt holds up a pair of pajamas for her young patient: “I picked your superhero today. Is that OK?” she coos to 8 ½-year-old Evan Casey as he squirms, his eyes shifting toward the new clothes.

Yesterday, Evan might have been Superman or Batman – or any of the many Superheroes whose powers

his family has assigned to their beloved little boy who has, inexplicably, never walked or talked. But today, thanks to the night clothes that Brenda, his Gilchrist Kids nurse, has brought, he will be Optimus Prime, the brave and wise Transformer whose image is emblazoned on the cloth.

Granted, Evan has never had superhuman strength, or strength of any kind, during his short life. In fact, in the past year, his health has taken a precipitous decline. With no answers from doctors about why the boy his mother calls “Evan from Heaven” is the way he is – or why his body is rejecting his feedings – the Casey family sought out the support of Gilchrist Kids, Gilchrist Hospice Care’s pediatric hospice program.

“Gilchrist Kids staff told us the truth about what was happening to Evan,” said Stacy Casey, Evan’s mother. “They gave me the information I needed to realize that the only way my little boy would stop suffering is to focus on keeping him comfortable – to let him go.”

In a large nuclear family split by divorce into two homes in two different counties (Evan lives with his mother in Halethorpe, while Evan’s father and his family live in Hampstead), the

Gilchrist Kids team focused on everything from hands-on care to education to counseling to unifying the family behind a common goal – Evan’s comfort.

With the family’s work and school schedules to contend with, the team members visited after work and on weekends. They set up meetings with the extended family to explain what was happening to Evan and why he would not be getting better. They helped his older brother Alex, who witnessed Evan’s decline daily, understand that it was okay to be angry or sad. And, perhaps most importantly, they talked to the family honestly about what was happening to their sweet little boy.

And when Evan died in the early morning hours of June 19, Brenda was there immediately. She stayed until the sun was just about to come up, talking with the family and offering as much comfort as she could.

“They talked about how he was up in heaven, running and playing and doing all the things he couldn’t do down here,” said Brenda. “It’s a comfort to know that we were able to make a difference for Evan and his family – and for all of our families.”

Since July 2010, Gilchrist Kids has provided care for infants, children and teens and their families, as well as emotional support for parents-to-be who learned their children would be born critically ill. Funds are being raised to support a \$5 million endowment to help cover the cost of care.

care closer to home:

Dr. Danielle Doberman, the medical director of Gilchrist Center Howard County, said that family members who live in the county appreciate the fact that they now have quality inpatient care nearby. Likewise, Gilchrist's home care nurses and social workers are more easily able to visit their patients once they transfer to the new center for pain control or symptom management.

"The nurses have had the ability to come and have closure with the family," she said.

"Our Howard home care patients are also coming in for inpatient care a little earlier when they're in greater discomfort. They're accepting the care they need when they need it."



Dr. Danielle Doberman converses with Mr. Blasingame's daughters Cynthia and Rebecca.



The new center was designed with all the warmth and comfort of the original Gilchrist Center in mind. Each room has an individual veranda with doors wide enough to push a hospital bed through, and those rooms look out on beautifully landscaped gardens. Much of the evidence of medical care is hidden within the room's design. And the hallways and doors to the rooms reflect warm colors, unlike those in many health care facilities.

But, perhaps most importantly, there is a certain peace about the place. It is a peace that comes from a center that is dedicated to comfort and designed to allow families to just be in the moment so that they may savor the time they have left together.

extending inpatient hospice care to Howard County

When, after a year and a half battle against pancreatic cancer, Walter Blasingame and his family realized that the time had come for “comfort” care to help him through his last weeks and days, the former physicist began his hospice journey at Gilchrist Center in Towson.

It was there that the nurses and doctors worked to control his pain, where his wife of 49 years, still suffering the debilitating effects of a stroke, could sit by his bedside, where his young grandchildren could spend precious hours both visiting and playing amid the flowers in the beautiful gardens.

But while the care there was extraordinary, the distance between Gilchrist Center and the home Mr. Blasingame and his wife shared with their daughter Cynthia Baker in western Howard County created a bit of a logistical problem for his family. So when Gilchrist Hospice Care opened its new inpatient center in Columbia a week and a half later, Cynthia and her sister, Rebecca Blasingame-White, were quick to ask for a transfer.

“Having the center here has really been a blessing for our family,” said Rebecca. “It has really helped to ease the running and allowed my mother to stay by Dad’s side longer, instead of being at the mercy of our schedules.”

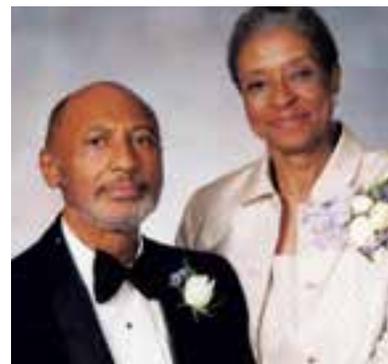
The creation of Gilchrist Center Howard County, a 10-bed acute care inpatient hospice center, came after years of discussion and study about how best to serve Howard County patients and families. The answer was simple: Duplicate the expert, compassionate comfort care that has distinguished Gilchrist Center in Towson for the past decade and a half and, in the process, create a center that is located close enough to the family home to allow family and friends to gather by the bedside of a dying loved one.

For Mr. Blasingame’s family, Gilchrist Center Howard County offered the best answers for their difficult new reality. He could receive the care he needed, and his daughter and primary caregiver, Cynthia, could more easily manage two equally critical needs – spending precious time with her ailing father and caring for her young children aged 3 to 9. She could also feel comfortable leaving her mother, Geraldine, by her father’s bedside if she needed to leave for an appointment or pick up her children.

For their father, there was an added bonus unique to his time with Gilchrist. The same hospice aide cared for Mr. Blasingame both at Gilchrist Center in Towson, where she spent time training for the opening of the new center, and at Gilchrist Center Howard County.

“The aide had his room all set up the way he liked it when he arrived. Everything was as it should be, and that was complete peace of mind,” said Rebecca. “That first day, he was seeing familiar faces.”

“That was good for him and good for all of us,” she said.



Walter Blasingame died at Gilchrist Center Howard County during the early morning hours of June 7, surrounded by his loving family.

a day with Dr. Laura Patel:

Dr. Laura Patel is everywhere – or so it seems – on a recent Tuesday. From the cozy home-like setting of Gilchrist Center in Towson to the more traditional hospital rooms at GBMC to the hybrid of hospital and home that is skilled nursing care at Lorien Mays Chapel, she examines patients, holds family meetings and gets updates on recent health changes.



10am:

Dr. Patel visits her patients at Gilchrist's premier inpatient center in Towson, a place where many come to spend their last days. Part of her morning, on this Tuesday, has been spent counseling a family struggling with a loved one's impending death.



11am:

Dr. Patel makes the brief trip from Gilchrist Center to GBMC's sub-acute unit, where she visits first with patient Margaret Mitchell (center, with technician Neemah Thomas). Then, it's on to the unit's dialysis room where she checks on a patient and discusses the need to change his pain medicine.



2pm:

The last part of her day is spent at Lorien Mays Chapel nursing home. There, she sees patient Claudia Hornatko, who is receiving rehab services. While there, she also evaluates patients who have recently been admitted for care.

developing a special physician practice for chronically-ill patients

Through communication and a team approach to care, Gilchrist Greater Living (GGL) offers its patients a “medical home,” providing comprehensive, coordinated and compassionate care throughout the health care continuum.

As a physician in the year-old Gilchrist Greater Living geriatrics and palliative medicine practice, Dr. Laura Patel is part of the latest chapter in the movement back to an older, gentler and more complete way of providing medical care for her mostly elderly patients.

The recent consolidation of all aspects of physician care for older patients -- from preventative office visits to nursing homes and assisted living facilities to emergency hospital care and hospice -- within the same primary care geriatrics practice based at GBMC, allows Dr. Patel and her colleagues at GGL to more easily follow their patients wherever they are, physically and medically.

For the physicians at GGL, it offers the opportunity to see their mostly chronically ill patients in multiple medical settings. It also allows the more than two dozen physicians and nurse practitioners to work closely as a team to provide care -- communicating about their patients' conditions regularly and often, particularly during times of transition from setting to setting or physician to physician.

“I can follow my patients through different stages,” said Dr. Patel. “It’s gratifying for me, but most importantly, it’s of great benefit for my patients.”

For the patients, it offers peace of mind that their “stories” - - their medical history and wishes for treatment -- will not be lost when they need to move, for example, from hospital to rehabilitation facility or to Gilchrist Hospice Care.

GGL physician and GHC associate medical director Dr. Aaron Charles noted that the ability to follow his mostly chronically or critically ill patients throughout the medical community allows him to better understand where they are in their medical journeys and to have the tough discussions about their prognosis and care early and often.

“We’re able to see where our patients live and how they live. All of that provides insight into how best to care for each individual patient,” said Dr. Charles. “There’s a confidence that we’ll be there: When they’re sick and need to go to the hospital or hospice, they know that someone from Gilchrist Greater Living will be there to take care of them and that the lines of communication are wide open.”

a visit with Dr. Aaron Charles:

For patients like Ethel Page, a physician practice like GGL can be a lifeline during medical crises. When Mrs. Page, a GGL patient, recently suffered from an infection that required an emergency room visit, Dr. Charles was able to coordinate and follow her care from hospital to rehab and back to home.

“It’s such an ordeal to have to endure a hospitalization when you’re 89,” said Beth Greenland, Mrs. Page’s daughter. “How lovely it is to have your care well-coordinated.”



Beth Greenland (left) is relieved to have the coordinated care by Dr. Aaron Charles for her mother Ethel Page.

fiscal year 2011

by the dollar...

the campaigns

\$5 million campaign launched to support the Gilchrist Kids endowment

\$2.5 million campaign started for Gilchrist Center Howard County

the costs

\$2.6 million in non-compensated care costs including:

- **\$947,189** for Gilchrist Center in Towson
- **\$783,286** for Bereavement Care: group and individual counseling, group memorials and other support
- **\$557,761** for Gilchrist Center Howard County
- **\$312,660** for Financial Assistance, or care provided for patients with no or limited insurance

\$165,985 in costs that exceeded insurance reimbursements for Gilchrist Kids

the events

\$711,865 raised for patient care through The Holly Ball

\$207,536 raised to support Gilchrist Center Howard County through Taste & Auction of Howard County

by the number...

4,120 patients received quality, compassionate care at home, in a long-term care facility and at one of our two acute care inpatient hospice centers

575 patients were cared for each day

400 volunteers offered additional support to patients and families

by the percentage...

99% of families would recommend hospice

55% of patients had non-cancer primary diagnoses

21% growth in patient population

by the way...

Selected as a recipient of the 2011 Circle of Life Award from the American Hospital Association

Began Palliative Medicine program at Howard County General Hospital

Received Healthcare Heroes Award for End of Life Doula program

Recognized nationally by FHSSA for partnership with Nkoaranga Lutheran Hospital's hospice and palliative medicine program in Tanzania

expanding our horizons – even farther

It's a bit humbling to think about how far we've come.

In our 17 years, we've gone from a fledgling home hospice program serving a few dozen adult patients a year to the largest hospice organization in the state – serving nearly 600 patients, adults and children at home, in care facilities and at our two inpatient hospice centers on any given day.

During the first 16 of those years, we spent time figuring out what worked and what didn't and perfected our team-oriented care to ensure that each and every one of our patients receives care tailored to their individual wants, needs and goals for the time they have remaining.

All of which left us, in this last year, to begin to fill in the gaps. With our adult program well-received and growing, we turned our attention to those communities that were underserved or needed extra attention.

Each of these new or revamped programs, all detailed in the previous pages, has met with much early success, which leaves us with this one question: Where do we go from here?

The answer comes in two parts: We continue to refine our existing programs, working to ensure that the care our patients receive is seamless. But we also continue to seek out communities that are underserved by hospice and to address issues and concerns that will better complete the hospice experience for our patients and their families.

This summer, we began partnering with Howard County General Hospital to offer palliative medicine, which shares the hospice philosophy of holistic care but is designed to help anyone suffering from a serious illness or condition, and not just those who are terminally ill.

We are also looking for new ways to better address the psychological and social needs of our families while their loved ones are receiving our compassionate care – and not just after a devastating loss.

These new programs, as well as the traditional care we provide, require the ongoing support and funding of the community we serve. Last year, thanks to your generosity, was a record-breaking fund-raising year, even in these challenging economic times. We ask that you continue to be there for us, as you have in the past, so that we may provide the finest in end of life care for many years to come.

Sincerely,



Cathy Hamel
Executive Director, Gilchrist Hospice Care



we ask you to give...

so we can continue to touch the lives of others.

cash,
appreciated securities,
bequests,
and other planned gifts [real estate, life insurance]...

for more information, please contact Lori D. Mulligan at 443.849.8214 or lmulligan@gilchristhospice.org.



Guiding the way.

443.849.8200

gilchristhospice.org

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Hunt Valley, Maryland 21031

For referrals call: 1.800.HOSPICE
(1.800.467.7423)

HOWARD COUNTY
5537 Twin Knolls Road, Suite 434
Columbia, Maryland 21045
phone 410.730.5072

TTY Maryland Relay Service: 1.800.735.2258

Gilchrist Hospice Care provides services without regard to race, color, creed, sex, sexual orientation, disability, religion, ability to pay or national origin.

A *GBMC* AFFILIATE

*where
will our
path
take us
next?*