

Continuing life to the fullest

2013 YEAR IN REVIEW

Gilchrist
HOSPICE CARE 

Guiding the way.



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.

Continuing life to the fullest

It all starts with a simple question – one seemingly out of place when death is approaching, but one so important to those last moments, whether they are measured in days, weeks or months. What, the Gilchrist Hospice Care team asks, do you want to do with the time that remains?

For those who have sought out Gilchrist's compassionate care precariously close to the end of their lives, the answer is often tied to the most basic of needs: to die peacefully and in comfort, surrounded by those dearest to them.

But for those who have made the decision to opt for hospice sooner, the answer is often tangled up in ambitious plans and future goals – to visit a favorite spot, to watch a daughter get married, to lunch with friends or return to school...to live.

On the following pages are the stories of five extraordinary Gilchrist patients, ranging in age from 10 to 80, who, with a bit of time on their side, the help and guidance of their hospice team and the support of their wide circle of family and friends, made a "bucket list," or simply chose to look past their prognosis and make the most of the time that remained.

"I just wanted to live my life. That's all. And I got to."

Marlene Pototsky, Gilchrist patient



Continued to do more and more

Libby Younglove was supposed to have three, maybe four weeks to live. There was a tumor growing in her heart and no medical options to heal her. Instead, her doctors encouraged her to go home, call hospice, do what you can, while you can.

Libby did all that and more. She created a bucket list so long that when she crossed off one item, two more took its place. And so it was that those four weeks passed – and then another three months. She rode in a Corvette, had a dinner party with her childhood friends, played dominoes with her family, sewed costumes for her grandchildren. She traveled to the Boonsboro Inn, owned by one of her favorite authors, Nora Roberts. She helped with the 2013 Symphony Decorators' Showhouse and even attended the opening and closing parties.



Libby and Bob Younglove with Gilchrist nurse Andrea Katz.

Through it all, her Gilchrist nurse, Andrea Katz, was there, changing her medications to help manage her shortness of breath, supplying her with a portable oxygen concentrator for her trips and showing her ways to conserve her limited reserve of energy.

Finally, she headed to Ocean City with her beloved family. It was there, in the light of the super moon, that Libby died peacefully on June 24.

"Libby was given the gift of time unexpectedly and it was awesome."

Andrea Katz, Gilchrist nurse



Continuing to find joy

By the time *Ian Scher* came home from a 10-week hospital stay in March, he had lost most of the use of his limbs and was dependent on a ventilator to help him breathe. But that didn't mean he'd lost the desire to be as typical a 10-year-old boy as he could.

Within a month, he was back at school and finding new ways to do all of the things that a rare degenerative neuromuscular condition had robbed him of doing.

Instead of pressing the buttons on his video games, he directed others, including his Gilchrist Kids volunteer and Child Life Specialist. He built Lego sets using the hands of family and friends for the actual construction – after he'd figured out where to put the pieces.

As summer rolled around, he found himself with almost as packed a schedule as his twin sister, Becca. He went to several camps, including a sleepover camp for medically



Ian reviews Lego directions with Gilchrist volunteer, Michelle Schwartz.

fragile children. And on August 17, he threw out the first pitch at a Baltimore Orioles game; his father, Brian, was with him on the field to make the actual throw.

Through it all, his parents, Marci and Brian, have relied on the support and guidance of the Gilchrist Kids team to help keep Ian out of the hospital and to help them talk through important decisions about his care. Ultimately, watching Ian continue to be able to do the things he loves is validation that they made the right choices in his care.

"Ian wants to do as much as possible. We know he's still getting a lot of joy."

Brian Scher, Ian's father



Continued on her own terms

Marlene Pototsky had seen death before. As a caregiver, she had watched as it crept up on both her parents and husband, sending them to the hospital over and over again.

So when, in January, Marlene got the terrible news that her cancer was Stage IV – aggressive and surely fatal – she decided then and there that she wouldn't spend her precious last months sick from treatments. Instead, she made a vow to live her life, on her terms.

With Gilchrist's help, she learned how to manage the latest aches and pains. She leaned on her nurse, her social worker and her chaplain when she got worried or depressed. And she made plans – lots of plans.



Marlene, with her youngest son Richard (front row) and her Gilchrist team: nurse Chris Carver, social worker Mel Moschel and chaplain Sara Diehl (l to r).

During the next six months, she had her hair done each week. She celebrated her 75th birthday at Sabatino's in Little Italy. She went to a great nephew's bar mitzvah, a family reunion, the wedding of her only daughter. She checked out the slots at Arundel Mills – twice.

Marlene Pototsky died July 29 at Gilchrist Center surrounded by her family.

"I'm a firm believer that when you have something to look forward to, you get there. I have a lot of things going on, and I'm in it for the ride."

Marlene Pototsky



Verna Mae Cann has spent her entire life pushing past expectations – a high school dropout who returned a decade later to earn her diploma and graduate from college, a single mother who started on welfare and worked her way up to better jobs, all while raising a family.

So, it should be no surprise that even as her end of life approaches, even as her heart disease saps her strength and makes it tougher to move around, Verna Mae is still reaching new heights.

Decades after her skin color barred her from her dream of attending art school, she illustrated her first book, a children's book written by her granddaughter. It did not matter that she was already a hospice patient, or that she had days when her pain could be excruciating. She still pushed through.

Continuing to reach new heights 



Verna Mae with Gilchrist aide April Johnson.

In the months after the book's publication, she has continued to quilt and paint, edit videotapes and play around with the latest technology. She has befriended the Gilchrist aides who come to tend to her most personal needs every day, always enjoying the companionship they offer. And, perhaps most importantly from her perspective, she has resumed going to her long-time church. With volunteer by her side, she has also spent time watching her daughter, a minister, preach.

"It's a privilege from God to leave a legacy. I want to be as active as I can until the day I die."

Verna Mae Cann



Exercising with Gilchrist aide Diane Wilkins.

Continued to keep punching

Daron Fisher counted as one of his most prized possessions a media kit from the second Rocky movie, personally autographed by its star, Sylvester Stallone, with a bit of advice to “Keep punching.”

For Daron, whose house included a weight room in the basement, that bit of wisdom was a motivating force during his three-year fight against brain cancer. It also became a mantra of sorts for his family; earlier this year, Daron and his wife, Beth, started their non-profit, “Keep Punching,” to raise money for brain cancer research. For Daron, the drive to stay as active as possible was what propelled him forward, even as his body grew weaker.

He spent the spring months outside at his children’s lacrosse games and watched his daughter graduate from elementary school.



A recent sketch Daron made for his daughter.

The summer months proved quieter, with him mainly at home but still doing many of the things he loved, from sketching famous personalities to reading and training the family’s new puppy, Crimson.

He tried to stay as limber and mobile as he could; to that end, his Gilchrist hospice aide helped him with an exercise and stretching program twice a week, freeing up his wife to do other things, and his Gilchrist volunteer provided gentle massage. It was his hope, he said, that he would one day be able to play the guitar again.

Daron Fisher died at Gilchrist Center on August 9, surrounded by his family.

“We tried to keep things as normal as we could and keep Daron a part of everything we did.”

Beth Fisher, Daron’s wife

Continuing to make strides

We've made tremendous strides in our care of the terminally ill – from the turn of the 20th century, when loved ones became sick and died suddenly at home, to the decades that followed, when medical advancements and breakthroughs began extending life while moving the place of death from home to hospital. Ultimately, the last part of 20th century saw a movement back to home, under the compassionate and watchful eye of the hospice team.

Unfortunately, most of our patients still come to us just a short time before their death, but for those who are physically, emotionally and spiritually able to make the choice earlier, those extra weeks and months can provide so many opportunities – to create a “to do” list, to make memories, to find new ways to live well even in the most difficult of circumstances.

I think you'll agree that the five incredible people featured in this Year in Review have found new ways to inspire and create and complete their life's journeys. Along the way, they have sought out the help of our hospice professionals to guide them, to encourage them, to tend to their many needs and to celebrate their forward progress.

Our patients and their families have high expectations for the care we provide, and we remain committed to meeting those expectations even as regulatory pressures and budget cuts threaten to overwhelm us and undermine our efforts. The last fiscal year saw two separate cuts to the reimbursements we receive from



Medicare, one long expected and the other due to sequestration. What that means is that we're being asked to do more with less – and we are.

During the past year, we started a new music therapy program and expanded our We Honor Veterans partnership. For the upcoming year, we plan to focus on increasing our outreach to and education in nursing homes and assisted living facilities, where far too many patients still die without the extra support and help that hospice can provide. We will also continue looking into ways to meet the growing need for “residential” hospice care – inpatient care for patients who do not need acute pain and symptom management, just a safe and comforting place to stay.

All of these initiatives have been and will be made possible through the generous support of our donors, who have proven, time and again, that they are committed to helping us achieve our mission of providing the finest in end of life care.

We thank you again and again.
We won't let you down.

Sincerely yours,

A handwritten signature in black ink that reads "Cathy Hamel".

Cathy Hamel
Gilchrist Executive Director

Continuing to grow

Growth is hard. Over the last five years, Gilchrist has continued to provide exceptional care and support to increasing numbers of patients and families while being asked to shoulder more and more of the costs of care. Most of our non-compensated costs come from four components of Gilchrist's programs – inpatient care, Gilchrist Kids, bereavement support and financial assistance for families with inadequate insurance.

TOTAL PATIENTS SERVED



TOTAL NON-COMPENSATED CARE



Growth is necessary. Even in the face of these financial realities, we are constantly looking for new ways to expand and refine our program to ensure that we are able to meet the many and varied needs of our patients and families. Below are programs that were added or significantly expanded during the 2013 fiscal year:



PERINATAL CARE

Care and support for parents-to-be who have received the devastating news that their unborn child suffers from a life-limiting condition has always been a component of our Gilchrist Kids pediatric hospice program. However, the last fiscal year saw increased outreach and education for this program. As a result, more and more families have sought out this small but important part of Gilchrist Kids, which is completely non-reimbursed by insurance.



MUSIC THERAPY

In Fall 2012, Gilchrist launched our new Music Therapy Program. To date, about 200 patients have benefitted from this new service, which helps relieve pain and other symptoms and reduces stress, anxiety and agitation in patients through the use of music in all its forms – from listening to performing to writing and recording music. Music Therapy is not reimbursed by insurance and is made possible by the generosity of our donors.



WE HONOR VETERANS

During the last fiscal year, Gilchrist made significant strides in its efforts to identify and recognize the contributions of veterans receiving hospice care through the We Honor Veterans partnership. The hospice team actively works to identify veterans among our patient population, and to work to meet their unique needs, all while acknowledging their service and sacrifices on behalf of our country.



Board of Directors

Our Board of Directors supports Gilchrist Hospice Care by spending countless hours discussing new ways to expand and enhance our award-winning programs, while at the same time continuing to be stewards of our precious resources – your generous contributions. We would like to acknowledge the hard work of the following Gilchrist board members:

Board Officers

Benjamin F. Lucas II, Esq.
Chairman

Jana C. Burch
Vice-Chairman

W. Lee Thomas
Treasurer

John A. Spilman IV
Assistant Treasurer

Elizabeth B. Richardson
Secretary

Board Members

Theodore W. Bauer
John B. Chessare, M.D.
Gary I. Cohen, M.D.
Kevin R. Dunbar
Ronald L. Eyre
Catherine Y. Hamel

Richard D. Huether
Jo Ann C. Jolivet
James W. Lee
John Mangione
Redonda G. Miller, M.D.
Mary M. Mullan

Constance Pitcher
Mary Stuart Rodgers
Reverend Philip B. Roulette
Stuart Archer Smith III
Mary Ellen Thomsen

Emeritus

Douglas Huether
Joseph S. Keelty

"We were able to continue making memories — without any regrets."
Bob Younglove, husband of Libby Younglove

As you can see, Gilchrist's steadfast commitment to helping our patients with

"Continuing life to the fullest"

allows them to create new memories to share with their families.

Help us help our patients make the most of the time that remains by making a gift to Gilchrist Hospice Care.

For more information contact:

David Drake

Director of Development

443.849.8241

ddrake@gilchristhospice.org

gilchristhospice.org



Guiding the way.

443.849.8200

gilchristhospice.org

11311 McCormick Road, Suite 350
Hunt Valley, Maryland 21031

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.



WE HONOR VETERANS

A NON-PROFIT HOSPICE

A *GBMC* AFFILIATE