



# 2011 Annual Clinical Care Report

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# Mission

Providing superior care and superior services  
to honor the lives of patients and families we  
have the privilege of serving.

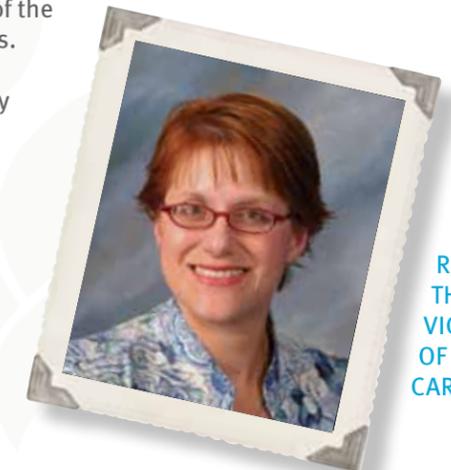
## MESSAGES FROM LEADERSHIP

The power of this team cannot be matched as it is driven by true passion for their work. Each clinical teammate lives our mission and strives for the goal of superior care and services for our patients and families. Together we are a strong team, a team of specialists in end-of-life palliative care with a high level of expertise that is connected in a quiet and gentle embrace. This embrace is one that drives us beyond average to superior care and supports the standards that frame our mission. We are inspired to a true calling, a calling of respect and reverence in serving the remembrance of the stories of our patients' lives. Through them we grow as one spirit of care. I am truly humbled and privileged to serve with this team of clinical professionals.

I am fortunate to be in a position where my personal and professional "calling" enables me to serve in both clinical and leadership roles with an amazing staff. This publication highlights the commitment our clinical staff brings to superior care and superior services. The dedicated team at Hospice of Dayton shares in serving patients and families at one of the most sacred times in their lives. We all feel blessed in this endeavor and share a passion for the mission of hospice and palliative care. It is with tremendous pride I call them friends and colleagues.



MARY MURPHY, RN, MSN,  
AOCN, ACHPN  
CHIEF NURSING CARE  
OFFICER



RUTH  
THOMSON, DO  
VICE PRESIDENT  
OF MEDICAL  
CARE

I am continually astonished by the care and services our incredible staff delivers. At Hospice of Dayton, we ask our teammates to embrace the two fundamental principles of servant leadership and permission-based hospitality. Servant leadership reminds us to never come from a place of position or title, but rather seek first to serve, then to lead. Permission-based hospitality ensures we always seek permission to serve and that the people we are privileged to serve feel good about receiving our care. We are pleased to share this publication, which highlights the professionalism and expertise of our clinical staff and demonstrates their exceptional commitment to these principles and our mission and its pursuit of providing superior care and superior services. Their passion is a source of inspiration and their strength continually energizes our mission as we are honored to serve more patients and families than ever before. Through the hands, hearts and will of our staff, Hospice of Dayton's mission has been sustained and flourished for 35 years. Each day, our staff celebrates the lives of the patients we have the privilege of serving and, with this publication, we are pleased to celebrate their essential role in supporting our mission.



**KENT ANDERSON**  
PRESIDENT/CEO

*Kent*

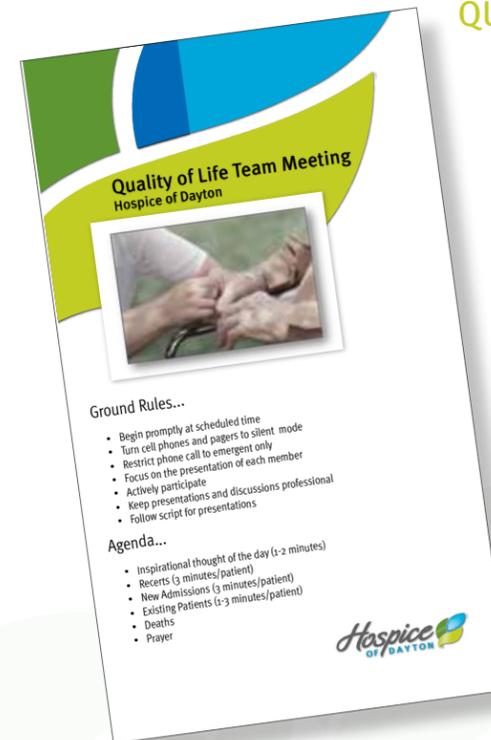
# Clinical Expertise

Fulfillment of our mission requires the highest standards of clinical expertise. Our commitment to professional advancement and education is reflected in a wide array of programs and support designed to enhance clinical outcomes.

## QUALITY OF LIFE TEAMS

Interdisciplinary teams are at the heart of hospice care. The combined skills and expertise of clinical professionals establishing goals in collaboration is essential to achieving individualized, holistic patient care.

Hospice of Dayton has always embraced this philosophy, but embarked on an evolution of the concept in April of 2011 with the appointment of a performance improvement team to evaluate the interdisciplinary team meeting process and make recommendations for incorporating a quality-of-life goal into care planning to ensure our process meets the needs of our patients and families. The performance improvement team spent several months reviewing literature, current tools and processes and recommended updating the ground rules, agenda and script for interdisciplinary team meetings to focus on quality of life. We must know our patients' personal goals for quality of life and empower them to achieve them. With quality of life at the center of every conversation about patients and an established expectation of determining a quality-of-life goal and documenting it, our care planning process has evolved to a new level. Our physicians, registered nurses, social workers, spiritual care, personal care specialists and volunteers share in developing and realizing the quality-of-life goals of our patients.



*CELEBRATING QUALITY OF LIFE STORIES*

*James, a 70-year-old patient with lung cancer with metastasis to the brain and spine, has become bed bound. James's size creates difficulties for ambulation. He has always enjoyed nature and defined a quality-of-life goal to be able to spend more time outside enjoying nature. To help fulfill this goal, Hospice of Dayton staff acquired special adaptive equipment to enable the patient to enjoy walks outside with a caregiver.*

*Sixty-three year-old Mary is a patient with COPD. She requires oxygen and has been bedbound. Mary's quality-of-life goal was to be able to attend a musical performance by her grandson at the Frazee Pavilion. Staff members arranged to transport and accompany Mary to the Frazee to realize this quality-of-life goal.*

*In his youth, 77-year-old Samuel had played semi-pro baseball for a team in the Negro League. Now suffering with late effect CVA, Samuel expressed a quality-of-life goal to be able to meet players from the Dayton Dragons and Cincinnati Reds. Representatives from both teams welcomed the opportunity to host Samuel and facilitate meetings with team players, fulfilling Samuel's quality-of-life goal.*

**MEDICAL CARE TEAM**

Offering exceptional expertise in hospice and palliative medicine, our team of medical directors consists of seven full-time physicians, all board-certified or board-eligible in the field of hospice and palliative care. Our full-time medical directors provide superior patient care in our Hospice Houses, offer expert palliative care consultation services through our Innovative Care Solutions services, provide care plan oversight, participate as members of our quality-of-life teams offer education to our staff and the community through a variety of educational offerings. In addition to our full-time medical directors, we also have nine physicians serving as associate medical directors and 11 advanced practice nurses providing direct patient care to our hospice and palliative care patients in various settings.



**DR. JULES SHERMAN AND  
KATE LITTLE, DIRECTOR OF  
CARE FOR HOSPICE HOUSES**



**MEDICAL STAFF OF  
HOSPICE OF DAYTON,  
LEFT TO RIGHT: DR.  
RANA PATEL, DR. CHIRAG  
PATEL, DR. ANNE REDDY,  
DR. WENDY SCHMITZ,  
DR. RUTH THOMSON, DR.  
JULES SHERMAN, ADVANCE  
PRACTICE NURSE CAROLYN  
KAROLYI, DR. ANNA  
ZIVKOVICH**

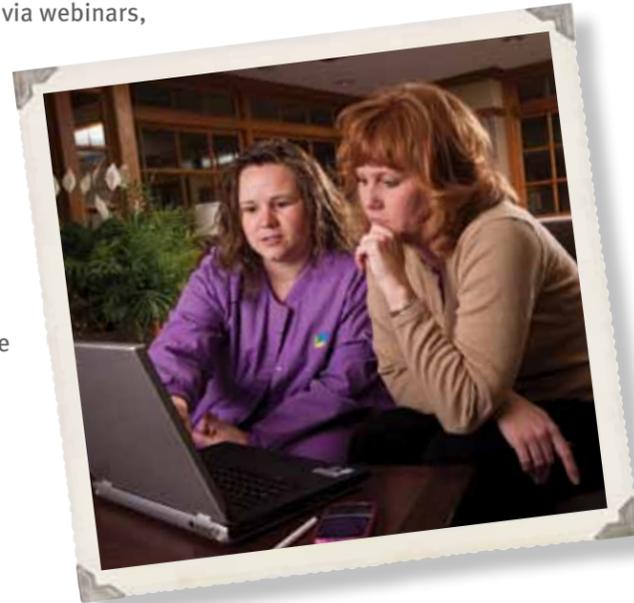
## TRADITIONS EDUCATION

Introduced in 2011, Traditions Education is designed to use a holistic approach to learning for all staff members. The goal of the program is to provide a means for adult learners to meet the mission and education initiatives to enhance the quality of care provided in the hospice and palliative care setting. Monthly, themed educational offerings and a rolling calendar enable staff members to access educational offerings throughout the year. Class offerings are provided in a variety of formats for the convenience of staff and individual learning preferences.

In 2011:

- 50 classes were offered via webinars, self-study, face-to-face lectures and computer-based learning.
- 551 staff members attended classes.

In addition, over 200 new staff members were provided a comprehensive orientation to the organization.



**CLINICAL EXCELLENCE MENTOR CAREY SHORT OFFERS TRAINING IN DOCUMENTATION.**

## CLINICAL EXCELLENCE MENTORS

To enhance the orientation program and assure success for new staff members, Hospice of Dayton introduced a Clinical Excellence

Mentor program in 2011 for each of the service areas of the organization — Coming Home (home-based patient care); Care Partners (extended- and assisted-living-based patients) and Hospice House (in-patient care). Working in the field and facilitating on-going education, the clinical excellence mentors provided education and support to 52 new clinical staff members.



**CLINICAL EXCELLENCE MENTORS JAN TILLINGER (ABOVE) AND ADELLE KESLER (RIGHT) OFFER CLINICAL EDUCATION AND SUPPORT.**



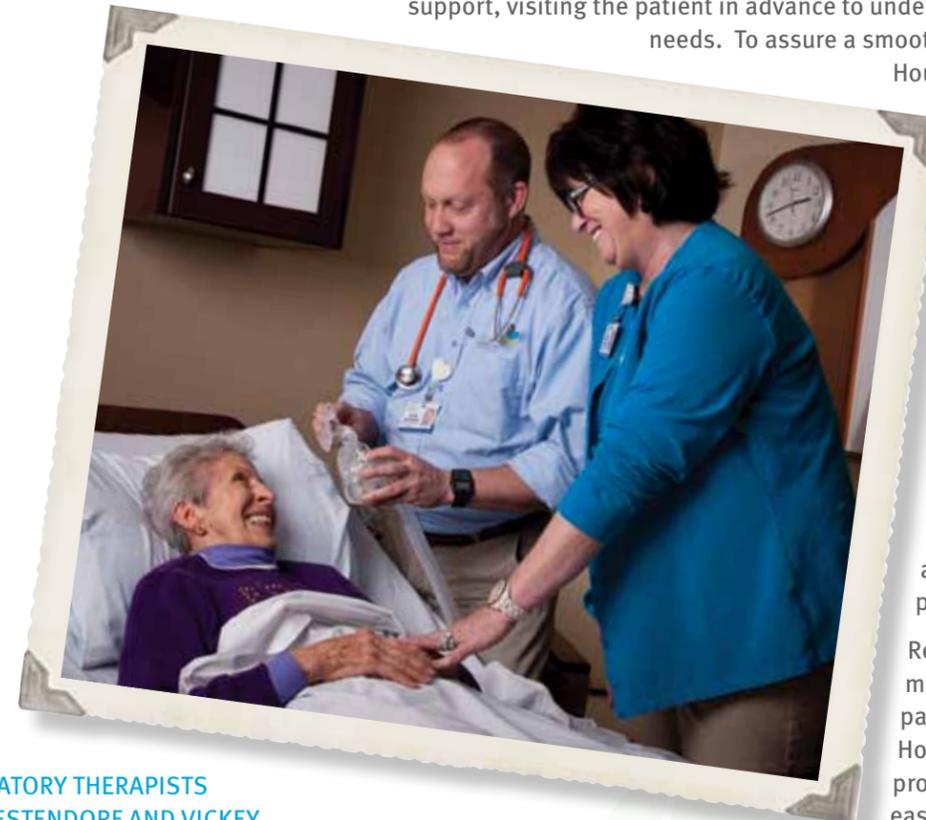
## RESPIRATORY THERAPY

Patients who are dependent upon ventilators, and their families, need a caring, supportive environment to transition off of ventilator support. To address this special patient need, Hospice of Dayton established a dedicated team for this role. Our respiratory therapists play a significant role in providing clinical support, visiting the patient in advance to understand their specific respiratory needs. To assure a smooth transition to our Hospice

House, a respiratory therapist accompanies the patient in the ambulance to our facility, reducing patient and family anxiety. The patient is admitted to our Hospice House a day in advance of ventilator removal, allowing our staff of physicians, nurses, social workers and chaplains the opportunity to give support and provide education. Before, during and after the ventilator withdrawal, the Hospice House staff provides clinical, spiritual and psychosocial support to the patient and family.

Respiratory therapy is also a major component of care for patients transferred to our Hospice House on a BPap machine which provides oxygen ventilation. To ease the anxiety often experienced by these patients and their loved

ones, our respiratory therapists accompany the patient by ambulance to the Hospice House, providing clinical assistance and reassurance while in transit. Upon arrival, the respiratory therapist coordinates patient care with the receiving nurse to ensure a smooth transition.



**RESPIRATORY THERAPISTS BOB WESTENDORF AND VICKEY FREMDER PROVIDE PATIENT CARE.**

## EXTENDED CARE AND ASSISTED-LIVING FACILITY SERVICES

Hospice of Dayton Care Partners is a team that provides hospice care in extended-care facilities and assisted-living communities. In 2011 the team established a goal to develop Service Promises, which would help in communication and collaboration with partnering care providers. Ten facilities each quarter are identified for the Service Promise process, in which hospice services and practices are tailored to the individual needs of participating facilities. Service Promise guarantees are developed and presented facility leadership. The purpose is to strengthen the partnership and understanding of the concerns of the facilities and communities when it comes to providing hospice care to their patients and residents.

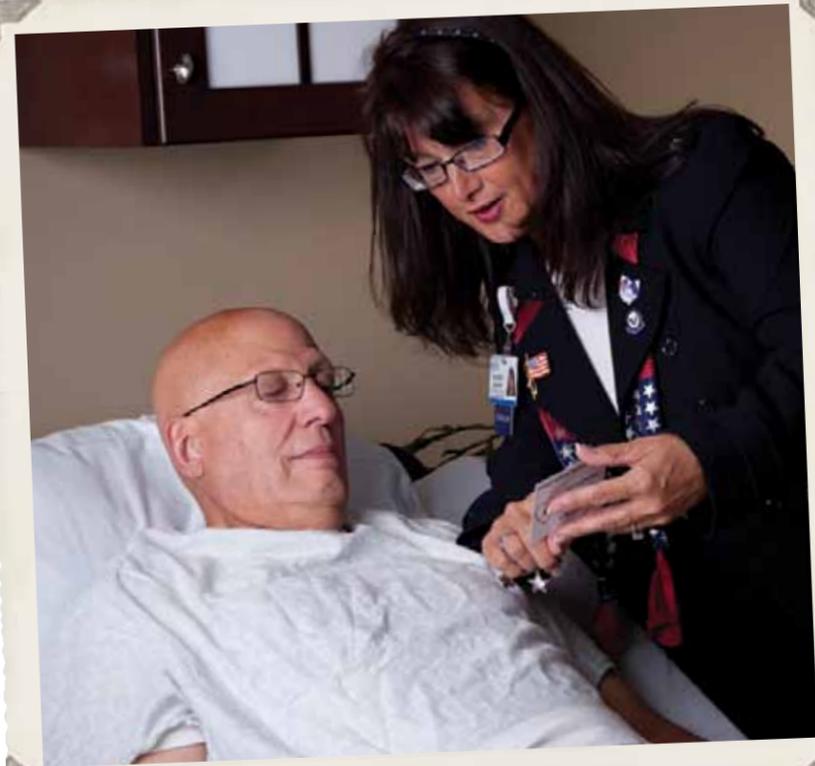
## AMERICAN PRIDE VETERANS PROGRAM

Hospice of Dayton was among the first in the country to achieve national recognition from the National Hospice and Palliative Care Organization and Department of Veterans Affairs (VA) *We Honor Veterans* collaboration for developing veteran-centric programs and integrating best practices for providing end-of-life care to veterans. By recognizing the unique needs of our nation's veterans who are facing a life-limiting illness, Hospice of Dayton is able to

accompany and guide veterans and their families toward a more peaceful ending. And in cases or other traumatic events, Hospice of Dayton has incorporated unique tools and expertise to help support those for whom they provide care.

Hospice of Dayton's American Pride program for veterans pairs the services of Hospice of Dayton and the Dayton VA Medical Center in addressing the needs of veterans in the Miami Valley. The VA and Hospice of Dayton share a common goal to provide the best possible care specifically tailored for Veterans, meeting their goals of care in their preferred setting. Both endeavor to address the needs of area veterans and strive to serve the large population of veterans affiliated with Wright Patterson Air Force Base. The American Pride effort enables the VA and Hospice of Dayton to concentrate combined strengths directly to Veterans — wherever they are receiving care, whether it be in the Dayton VA Medical Center or another hospital setting, in their own home, in an extended-care or assisted-living facility. The American Pride program takes a holistic approach to address all aspects of veteran care — physical, emotional

and spiritual — to best address and provide comfort to veterans facing end-of-life. Family bereavement support is also a key component to the American Pride program.



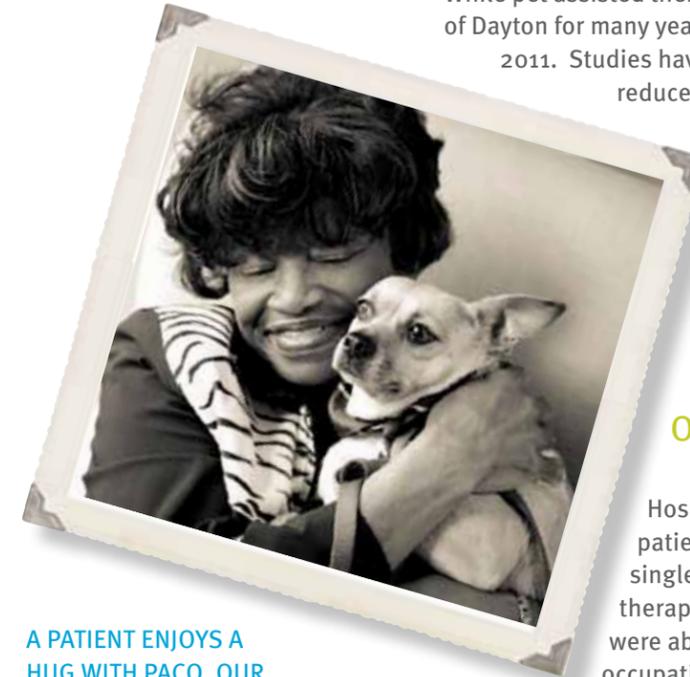
VETERAN CARE LIAISON ROBIN MCCARTHY HONORS A VETERAN PATIENT AS PART OF AMERICAN PRIDE PROGRAM.

## RESPITE CARE

Respite care is short-term inpatient care provided to relieve family members or other persons who are caring for a loved one. With a goal of assuring a smooth transition for patients to and from respite care, a team was formed in October of 2011 to evaluate and make recommendations for improving the process of respite stays for patients. The team developed a Respite Care Checklist and tool with information related to Extended Care Facilities which partner with us in providing respite support. The new process was fully implemented in January of 2012.

## PET-ASSISTED THERAPY

While pet assisted therapy has been provided by volunteers for patients at Hospice of Dayton for many years, in-residence pet assisted therapy was introduced in 2011. Studies have shown that simply cuddling or petting an animal can reduce anxiety, lower blood pressure and heart rate, reduce agitation and ease depression. Animals also help provide socialization and supportive listening for patients and, in some cases, assistance with symptom management. With the placement of Paco at Hospice of Dayton and Lucy at Hospice of Butler & Warren Counties, animal-assisted therapy became available to patients and families for more extended visits and repeat interactions.



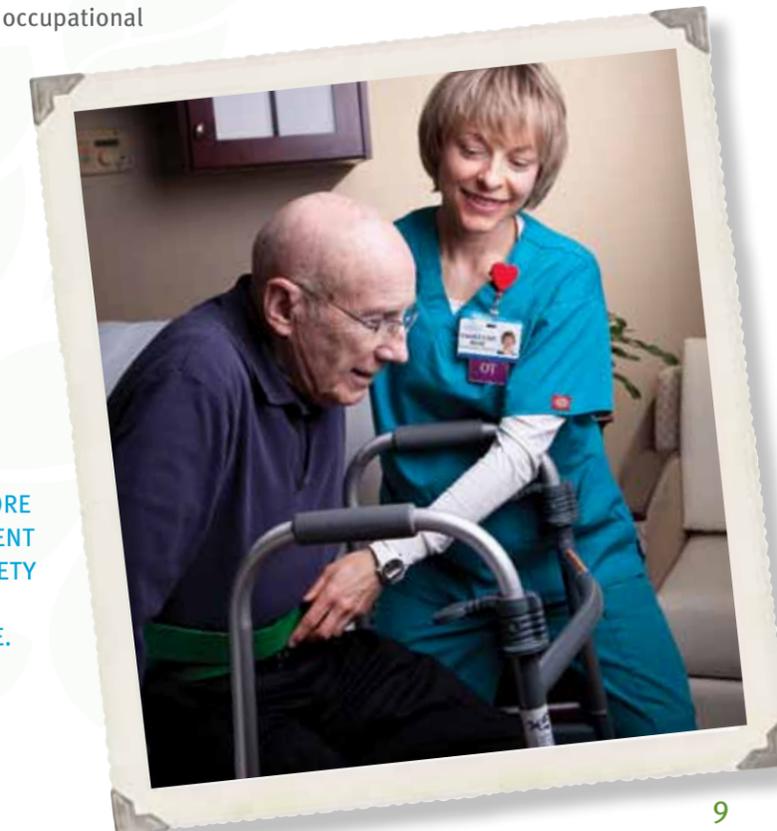
A PATIENT ENJOYS A HUG WITH PACO, OUR PET-ASSISTED THERAPY DOG.

## OCCUPATIONAL THERAPY

Hospice of Dayton noted a 50 percent reduction in the number of patients discharged to skilled care from the Hospice Houses in a single quarter of 2011 following the introduction of occupational therapy support to clinical services. Hospice of Dayton patients were able to successfully transition to homecare through the occupational therapy implementation of functional status plans of care. Patients were followed by occupational therapists both in the

Hospice Houses and then to the home care setting, working with both patients and caregivers. None of the patients seen by occupational therapy experienced falls with injury after a functional/safety plan of care was initiated. Occupational therapy services also impacted patient quality of life with the use of PARO seals and pet-assisted therapy interventions. Patients reported a reduction in symptoms of anxiety or pain in 98 percent of reported interactions.

Staff training by occupational therapists included gait belt, Hoyer lift and sit/stand/lift machine usage and the addition of monthly body mechanics classes.



OCCUPATIONAL THERAPIST ANGELENE MOORE ASSISTS A PATIENT TO ASSURE SAFETY AND IMPROVE QUALITY OF LIFE.



## BEREAVEMENT CARE AND GRIEF SUPPORT

Pathways of Hope grief support addresses bereavement needs of the communities we serve with individual and group counseling services. Accessible not only to the families of hospice patients but to anyone in the community who has sustained a loss, these services are available at no cost, thanks to the generous support of community members. The expansion of programs in 2011 included the addition of new locations for counseling services and the addition of new offerings.

Highlights include:

**Grief Support Groups:** In 2011, over 467 bereaved individuals found understanding and support in one or more of our support groups, which are designed to meet a wide variety of bereavement needs. Adults grieving the loss of a parent found support in the *Memories of MOM* and *Fatherless Child* groups which were introduced in 2011. *The Living With the Loss of an*

*Adult Child* group continues to be the only area group designed specifically to support parents grieving the death of their grown "child." Particularly popular have been our *Walking Through Grief* support groups, which provide widows and widowers with the support, understanding and opportunities to connect with others who are making the unwanted adjustment to life as a single person.

**Camp Pathways 2011:** Camp Pathways, our three-day grief camp which is held annually on the fourth weekend in June, is Pathways of Hope's most visible event for bereaved children and teens. The weekend, which in 2011 provided 47 bereaved youth the opportunity to meet with other bereaved children/teens, was once again held at the Joy Outdoor Education Center in Warren County. Swimming, hiking, high ropes, a climbing wall, talent show and nightly campfire activities were interspersed with opportunities for support that were designed specifically for children and teens. In the words of one of our campers, "It was awesome!"

**Pathways Breakaway:** Building on the success of Camp Pathways, our annual three-day summer camp for bereaved youth, a one-day mini-camp experience, Pathways Breakaway, was offered for the first time in January of 2012. Held at the beautiful Vandalia Recreation Center, 36 bereaved children, ages 7-12, found fun and support in a day filled with fun activities such as swimming and a climbing wall, as well as opportunities to acknowledge and explore the impact of loss in their lives through music and art therapy, grief education and support activities. The event, which was directed by Jonathan Haag, was staffed by a mix of staff, including Bonnie Orlins and Caitlin Nicholas, as well as experienced volunteers.

CAMP PATHWAYS INCLUDES TRADITIONAL CAMP ACTIVITIES AS WELL AS GRIEF SUPPORT.



## MAJOR 2011 PROGRAM ACHIEVEMENTS

- Advanced Practice Nurse Orientation Program Development
- Good Samaritan Hospital CAPC National Palliative Care Registry Participant
- Atrium Medical Center CAPC National Palliative Care Registry Participant
- End of Life Nursing Education Curriculum (ELNEC) Training: 100% of full-time APNs are trainers
- Clinical outcomes measures demonstrate improved quality of life

## MAJOR INPATIENT HOSPITAL PALLIATIVE CARE SERVICES PROVIDED IN 2011

- 71% Goals of Care
- 11% Discharge Planning
- 9% Terminal Withdrawal
- 9% Symptom Management

## INNOVATIVE CARE SOLUTIONS

As part of Hospice of Dayton's mission to provide superior services and superior innovative personalized care to the community we serve, Palliative Care Consultants was established in 2008 to provide palliative support to hospital patients. In 2011, renamed Innovative Care Solutions, the team of board-certified physicians and specialty-certified advanced practice nurses provided inpatient hospital palliative care to over 1,100 new patients, making over 2,300 total patient visits.

A relatively young medical specialty, the term "palliative" has evolved over the last decade from a philosophy of care commonly associated with hospice care into a medical and nursing subspecialty that provides early interdisciplinary care to patients and families experiencing chronic, progressive or serious illness. Innovative Care Solutions support is not limited to end-of-life care or care associated with a terminal diagnosis; it is simultaneously offered with all other appropriate medical treatment with an emphasis on managing the symptoms of illness. Innovative Care Solutions provides transitional support for the patient and family to gain a better understanding of their illness. It supports and involves the patient and family in care decisions. Current hospital partners include Kettering Medical Center, Sycamore Medical Center, Good Samaritan Hospital and Atrium Medical Center.

The Innovative Care Solutions team continues to work on models for earlier assessment and treatment of distressing symptoms, development of care plans that align goals of patients and families, and facilitate timely discussions that anticipate needs and transition care to the most appropriate level.



INNOVATIVE CARE SOLUTIONS TEAM MEMBERS INCLUDE (LEFT TO RIGHT): MARIANNA SUNDERLIN, RHONDA KONICKI, DR. RANA PATEL, DR. ANNA ZIVKOVICH, DR. JULES SHERMAN, JACKIE MATTHEWS, DR. RUTH THOMSON, DR. CHIRAG PATEL, LISA WHITE AND MARK CURTIS.

## CARE COORDINATION CENTER, CRISIS CARE, EXTENDED HOURS AND TRIAGE

The capability of addressing the needs of patients and families 24 hours a day, 7 days a week relies on a special team charged with meeting the 24/7 emergent needs of patients. The Care Coordination Center is responsible for providing scheduled weekend visits, extended hour clinical services, triage response and crisis care support to patients and families. Over the past year, there has been a significant increase in the average number of extended hours field visits from 250/month to now 600/month. The extended hours team provides support for all departments and teams after 5 pm. Extended hours staff visit emergency rooms to provide support, facilitate admissions and attend to a wide variety of needs of patients and families. These versatile and skilled nurses support the Crisis Care staff as well as attend all deaths after 5 pm, with the average response time approximately 75 minutes from family contact to nurse arrival.

Triage nurses (all RN's) are part of the Extended Hours Team, providing 24-hour nursing support for field staff. The ability of our patients and their families to receive immediate response to their urgent needs has a major impact in reducing anxiety and eliminating unnecessary hospital visits.

The Crisis Care team provides bedside care in times of extreme needs. They partner with caregivers to provide skilled monitoring, guidance and medical administration. The average time, from time of call to staffing of Crisis Care cases, is three and one-half hours. This time is consistently improving thanks to the diligence of the Crisis Care schedulers and team work of all involved.

The Care Coordination Center is just that. It is staffed with patient services coordinators that take all incoming calls and provide compassion and assistance for many different types of calls. They are skilled and trained to be able to answer questions and meet immediate needs. They are the first contact for all customers and understand that their interactions can make all the difference to the person on the other end.

**CRISIS CARE TEAM MEMBERS INCLUDE SEATED (LEFT TO RIGHT): CHRIS HENRY, HENRIETTA SULA, LISA DAVIS, E'RYONE ALLEN, JENNY LIEW; STANDING (LEFT TO RIGHT) DENISE JACKSON, JAN KOEHL, LOUIS MCKINLEY, DAPRISHA REESE, STEVE GRISSOM, SANDY CUNNIGAN.**



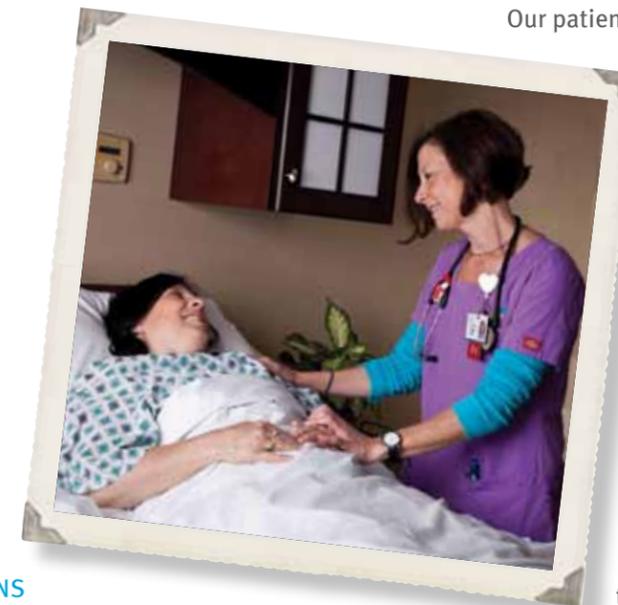
## HOSPICE HOUSES

Hospitality is the primary component to patient satisfaction in our Hospice Houses. The Dayton Hospice House refresh has provided an attractive, serene environment for the patients and families, as well as staff. All patient rooms have been completely refurbished with new window coverings, furnishings and paint. The patient bathrooms are bright with new tile, vanities and flooring. Hallways are tastefully done with new flooring, wall coverings and pictures. The entire unit has taken on a spa-like appearance. The nurses' station is now open and spacious, allowing the staff privacy and room to complete their documentation. Upon completion, the Butler Warren Hospice House (Lorelei's Place), will receive a refresh and piped-in oxygen, eliminating the need for oxygen concentrators in patient rooms. Lorelei's Place will have a beautiful garden next door that will provide patients and families a beautiful spot to spend restful moments.

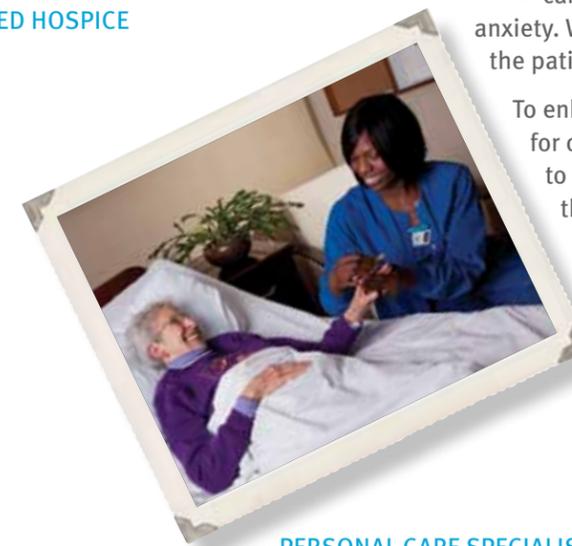
Our patient/staffing ratio is designed to enable focused attention to patient needs and quality of life. Our team leaders make daily rounds visit patients and families to assure they are receiving outstanding care and services. Their interaction with patients and families enables us to identify and address needs immediately. Follow-up phone calls to patients within 48 hours after transferring out of our Hospice Houses enable us to thank the patient or family member for entrusting us with their care and to ask if our services exceeded their expectations. The response has been overwhelmingly positive and has given us the opportunity to be proactive in exploring new patient care initiatives.

One of our successes in the past year was to create an admission nurse position for the Dayton Hospice House. She will meet the ambulance at the door and accompany the patient and family to the room. The admission nurse can immediately access medications to relieve pain and anxiety. When initial assessments are completed, she hands off the patient to their primary nurse.

To enhance our services and provide a spa-like experience for our patients, personal care specialists were trained to provide simple nail care, hand massaging and aroma therapy. Nail care involves cleaning the nails, buffing and applying a neutral polish. Hand massages provide comfort and allow the personal care specialist more opportunity to interact with the patient.

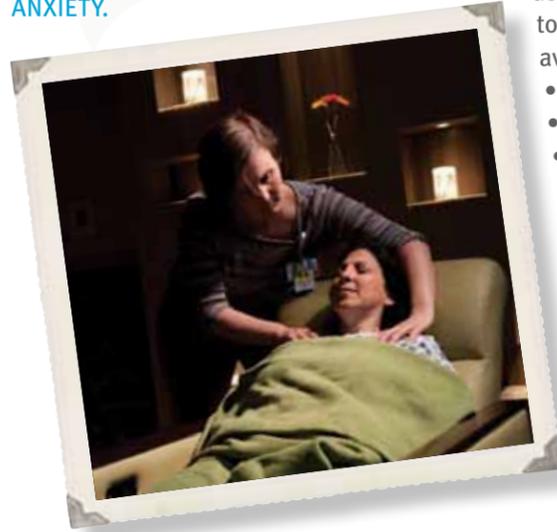


**ADMISSIONS NURSE LISA SHIMP WELCOMES A NEWLY ADMITTED HOSPICE HOUSE PATIENT.**



**PERSONAL CARE SPECIALIST KRISTI SPEARS PROVIDES HIGHLY PERSONALIZED CARE FOR PATIENTS.**

MASSAGE THERAPIST AMANDA BANASZAK OFFERS ALTERNATIVE TREATMENT FOR PATIENT ANXIETY.



## MASSAGE & AROMA THERAPY

Non-pharmacological interventions that successfully address symptoms are a welcome addition to conventional medicine. As leaders in end-of-life care, Hospice of Dayton and Hospice of Butler & Warren Counties have expanded the use of these complementary therapies to give care teams more resources to benefit our patients and families. Fulltime massage therapists are now available to service patients, providing an effective therapeutic tool for:

- pain relief
- restlessness
- anxiety
- sleeplessness
- depression
- stress

In studies, patients asked to rate pain and anxiety before and after massage therapy show significant improvement in levels of anxiety, pain and sense of peacefulness. Research has also indicated the need for less analgesic medications and decreased physical and emotional symptom distress.

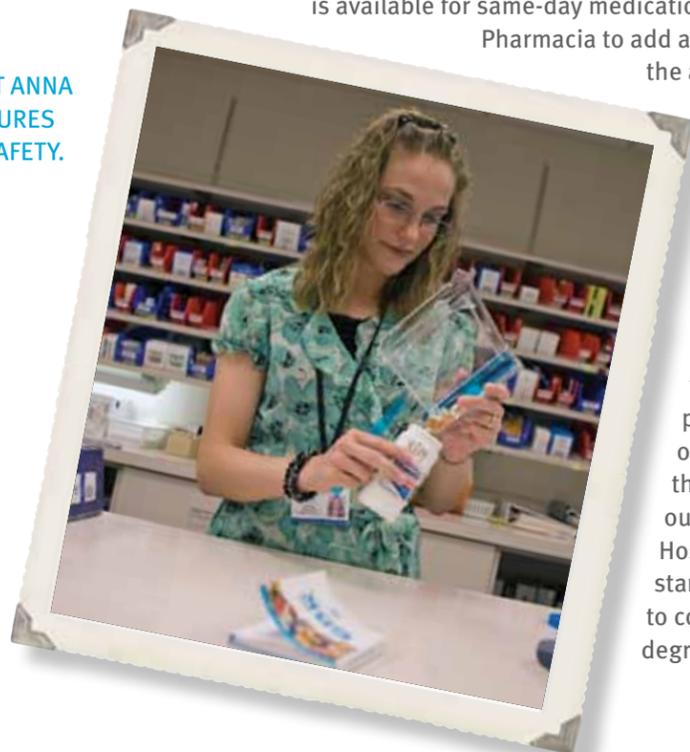
Aroma therapy is gaining increasing use as research supports its effectiveness in relieving anxiety and stress, and alleviating related symptoms such as hypertension, depression and insomnia. Use of the intervention reflects the focus on comfort and exemplary care that is central to the mission of Hospice of Dayton and Hospice of Butler & Warren Counties.

## PHARMACY

We pride ourselves in our expertise in pain control and symptom management. To achieve quality of life for our patients, we partner with Hospice Pharmacia to provide care planning and pharmacy oversight. Clinical pharmacists specially trained in hospice care play active and vital roles in our patient care, conducting regular reviews and medication management interventions for each patient. Medications are delivered next day for routine needs, and local pharmacy access is available for same-day medication needs. In 2011, we worked with Hospice Pharmacia to add a new first-dose response service that offers the ability to deliver urgently needed medications directly to the patient's home the same day.

Tapping into technologies to improve patient care and outcomes, our nursing staff is now using smart-phone applications to order refills from Hospice Pharmacia for our patients, enabling them to spend more time providing direct patient care and less time on the phone calling in refills to the pharmacy. Hospice of Dayton maintains an on-site pharmacy with a dedicated pharmacist that works closely with Hospice Pharmacia and our clinical staff to coordinate services at our Hospice Houses. In 2011, our on-site pharmacist started precepting pharmacy students working to complete their Doctor of Pharmacy (Pharm.D.) degrees.

PHARMACY TECHNOLOGIST ANNA GRESHAM ASSURES MEDICATION SAFETY.



## SHORT STAY PROTOCOL

While the overall length of stay in hospice has been increasing over the past few years, close to 35 percent of patients die within a week of being admitted. The reasons for short stays in hospice are complex and varied. The consequences of short stays are many, including inadequate symptom management, poor care coordination and insufficient emotional support resulting in poor patient outcomes and lower satisfaction with hospice care. Hospice of Dayton and Hospice Pharmacia collaborated in 2011 in development and implementation of a Short Stay Patient (SSP) plan of care. An admission template was developed to capture the SSP criteria which are then reviewed by team members. Symptoms are assessed and managed by the admission nurse who communicates any active issues during the handoff to the care manager and enters symptom scores into the electronic medical record system so that outcomes can be tracked. The SSP admission is noted in the electronic medical record by a simple code, that sends an alert to quality-of-life team members. The hospice's call center is notified of the admission and arranges a nurse visit that evening. In addition, joint visits by the RN and the social worker are made within 24 hours of admission. Spiritual care follow up is arranged within 24 hours if a need is identified on admission. Hospice aide services begin within 24 hours to provide personal care. The entire team implements a plan of care that focuses on the immediate needs of these patients. Outcomes of this approach appear positive and will be measured and evaluated.

## CLINICAL EXCELLENCE GENIUS BAR ALGORITHMS

To improve access and clinical resources to our nursing staff, we implemented the Clinical Excellence Genius Bar in November of 2011. This dedicated phone line is manned by one of our medical directors. The Clinical Excellence Genius Bar offers real-time access for our nursing staff to the expertise of our medical directors. The nursing staff is encouraged to call the Clinical Excellence Genius Bar with any questions related to a patient's plan of care, symptom management, eligibility, etc. They may also call for authorization of medication refills or new prescriptions.

To promote consistent care delivery and outcomes, we are in the process of developing and rolling out evidence-based clinical algorithms in 2012. These algorithms will serve as a clinical guide to our medical and nursing staff. They will integrate current evidence-based assessment and treatment plans with our pharmacy's medication formulary. The goal is to improve consistency of care, which will lead to consistent positive outcomes for patients and their families.

## LASER STAR THERAPY

Imagine lying back in your recliner on a warm summer evening looking up at a beautiful night sky filled with stars and soft puffy clouds. The galaxy with its pinpoints of brilliance is immense before you. Imagine the peacefulness and

comfort this brings to you. This is what Hospice of Butler & Warren Counties and Hospice of Dayton are providing patients with laser star projectors. The laser star projectors are part of the ongoing expansion of complementary medical approaches used as adjuncts to conventional medicine. Early use of light therapy with patients in the hospice setting resulted in positive patient response to the use of star projection in alleviating patient distress, restlessness and anxiety. The use of light therapy was expanded into a research project in 2011 to track and monitor outcomes and establish collaboration with other healthcare providers to measure the impact of light therapy on symptoms of anxiety, pain and restlessness among patient populations. Hospice of Dayton spearheaded the research in conjunction with Dayton Miami Valley Hospital, Dayton VA Medical Center and Dayton Children's Medical Center.



**NURSE KATHY EMERSON CONDUCTS A LIGHT THERAPY SESSION WITH A PATIENT.**

# Professional and Organizational Achievements

## PROFESSIONAL SERVICE APPOINTMENTS

**President, Ohio Nurses Association District Ten**  
Mark Curtis, CNS, BC, LMT, Innovative Care Solutions

**Quality and Standards Committee of the National Hospice and Palliative Care Organization**  
Terri Gross, RN, CHPN, Director of Quality and Informatics

**CEU Reviewer, Midwest Care Alliance**  
Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer

**Outreach Ohio Liaison, Archivist, Political Advocate  
West Central Ohio Chapter, Oncology Nursing Society**  
Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer

**Board of Trustees, The Renal Network**  
Bonnie Orlins, MS, LISW, Pathways of Hope

**Board of Directors, Midwest Care Alliance**  
Ruth Thomson, DO, Vice President of Medical Care

## CERTIFICATIONS

### Certified Hospice and Palliative Nurses (CHPN)

Rachel Adams  
Kimberly Adkins  
Janet Allen  
Karmen Arnett  
Sherry Arvin  
Carla Becker  
Julie Blasberg  
Lana Blosser  
Susan Boesch  
Kristy Brock  
Betty Brown  
Donna Burkett  
Kathleen Carrigg  
Bethany Clem  
Rebecca Collins  
Jessica Conger  
Heather Copen  
Linda Cox  
Lauren Coyle  
Craig Craggette  
Linda Cummins  
Teresa Cunningham  
Lesley Delcamp  
Christy Dempsey  
Renee Denton  
Geneva Dillon  
Joanne Dole  
Linda Everhart  
Katherine Fox  
Karina Fulwiler  
Susan Gabringer  
Sarita Gale

Ann Gant  
Tina Gifford  
Carol Goodpaster  
Terri Gross  
Donna Guzelgunler  
Kate Hagenbuch  
Domenica Hall  
Vickie Hartke  
Rachel Hoover  
Annette Hoskins  
Kathryn James  
Melodie Jamison  
Alisa Janz  
Milli Jefferson  
Deborah Kaehler  
Adelle Kesler  
Terri Knopp  
Tonya Kuntz  
Jena Langford  
Connie Leraas  
Kate Little  
Jeanne McAleer  
Bethany McClain  
Kelly McCokran  
Diane McCoppin  
Patricia McKee  
Darlene McKiddy  
Diane Miranda  
Teresa Mumma  
Mary Murphy  
Barbara Nohacs  
Leslie Norton

Jayne Ormberg  
Linda Osterday  
Janet Petry  
Jennifer Powell  
Brittani Pratt  
Linda Quinlin  
Abigail Riley  
Dixie Roberts  
Cynthia Robinson  
Gail Satterthwaite  
Carrie Schroder  
Elva Schweizer  
Diane Scott  
Mary Sell  
Lisa Shimp  
Janet Shinkle  
Carey Short  
Kathryn Smith  
Cynthia Snook  
Harrietta Sommer  
Sharon Spruill  
Carmen Sterner-Watkins  
Linda Susong  
Krysta Swartz  
Jan Tillinger  
Yvonne Turner  
Carol Wasyk  
Shannon Watson  
Dena Wenzler  
Debra Whiteman  
Pamela Winkle

### Certified Hospice and Palliative Nursing Assistants (CHPNA)

E'Ryone Allen  
Kimberly Allen  
April Artz  
Thelia Barker  
Andrea Binkley  
Theresa Blankenship  
Sharon Bostick  
Jenny Bunnell  
Daun Cheslock-Bishop  
Maria Clapp  
Rebecca Coffey  
Angela Collins  
Lisa Collins

Lorena Cravens  
Judy Dahlinghaus  
Darlena Daniels  
Angela Dunlap  
Shasta Dyer  
Gloria Entela  
Jamie Estes  
Stacey Evans  
William Finch  
Hannah Gardner  
Chasity Garman  
Afia Green  
Frankie Gunter  
Talena Hager

Deborah Hayes  
Susan Heinz  
Christine Henry  
Anita Hibbs  
Bethany Hodge  
Ma-Keshia Hodges  
Dianna Irven  
Denise Jackson  
LaTonya Jefferson  
Peggy Jenkins  
Jessica Johnson  
Diane Jones  
LaToya Jones

*continued*

### Hospice and Palliative Care Nursing Assistants Continued

Tena Kimaiyo  
Maleaia Kolodzick  
Linda Koth  
Diane Kovacs  
Martha Laforte  
Leslie Lindsey  
Jessica Long  
Vicky Ludlow  
Sabina Madrid  
Stephanie Martin-Green  
Jaine McGraw  
Louis McKinley  
Barbara Meadows

Erika Moreland  
Connie Pappas  
Nicole Perdue  
Michele Peters  
Erin Richards  
Brooke Riedel  
Katrina Ross  
Julie Rowe  
Aubrey Schlemmer  
Lois Seibel  
Kelly Smith  
Deborah Snow  
Kristi Spears

Candice Strietz  
Erica Sturgell  
Johnathan Thomas  
Terri Thompson  
Rhonda Tibbs  
Craig Turner  
Jennifer VanZandbergen  
Michael Vaughn  
Melissa Walton  
Summer Watts  
Karl Whisman  
Shirley Wick  
Gina Zieseemer

2011 HEART OF OUR HOSPICE RECIPIENTS INCLUDED (SEATED, LEFT TO RIGHT) ORLA FOLARIN, RN, CLINICAL HOSPICE HOUSE NURSE; SARITA GALE, RN, CHPN, DIRECTOR OF CARE COORDINATION CENTER; CYNTHIA BOWLING, HOSPITALITY & FACILITIES; (STANDING, LEFT TO RIGHT) DEBBIE HOLT, MS, PCC-S, PSYCHO-SOCIAL/SPIRITUAL/COMPLEMENTARY SERVICES, AND PAMELA TURNER, OFFICE/SUPPORT STAFF. NOT PICTURED ARE: KRISTY BROCK, RN, CHPN, CLINICAL COMMUNITY BASED NURSE; DIANE KOVAKS, STNA, CHPNA, HOSPICE HOUSE NURSING ASSISTANT; CAREY SHORT, RN, CHPN, CLINICAL COMMUNITY BASED NURSE; CANDICE STRIETZ, STNA, CHPNA, HOME HEALTH AIDE.

### End-of-Life Care Nursing Education Consortium (ELNEC)

Karmen Arnett  
Mark Curtis  
Cheryl Dunlap  
Karina Fulwiler  
Rachel Hoover  
Carolyn Karoli

Rhonda Konicki  
Jennifer Bloom Long  
Jackie Matthews  
Mary Murphy  
Linda Quinlin  
Karen Schindler

Kathy Smith  
Marianna Sunderlin  
Jan Tillinger  
Nancy Trimble  
Lisa White

### Eye Movement Desensitization and Reprocessing (EMDR)

Brenda Wolfe, MS, PCC-S

## AWARDS

### 2011 Heart of Our Hospice Recipients

Cynthia Bowling, Hospitality & Facilities  
Kristy Brock, RN, CHPN, Clinical Community Based Nurse  
Orla Folarin, RN, Clinical Hospice House Nurse  
Sarita Gale, RN, CHPN, Director of Care Coordination Center  
Debbie Holt, MS, PCC-S, Psycho-Social/Spiritual/Complementary Services  
Diane Kovaks, STNA, CHPNA, Hospice House Nursing Assistant  
Carey Short, RN, CHPN, Clinical Community Based Nurse  
Candice Strietz, STNA, CHPNA, Home Health Aide  
Pamela Turner, Office/Support Staff

*continued*





# Community Outreach

## SPONSORSHIPS

- Sponsor, Plant It Pink, Dayton Chapter, American Cancer Society
- Media sponsor, Clemens Cycle for Cancer Benefit, Miami Valley Hospital Foundation
- Title sponsor, Champions of Hope, Miami Valley Hospital
- Sponsor, Women of Influence Awards, YWCA
- Sponsor, Alzheimer's Association Walk, Dayton
- Sponsor, Ohio Mathematics Contest with Asian American Council, Dayton
- Advertising and sponsor, Victoria Theater-Broadway Series, Dayton Opera, Dayton Ballet, DCDC, Dayton Philharmonic Orchestra

*continued*

*AWARDS continued*

**2010 Nurse of the Year, District 10, Ohio Nurses Association**

Nancy Trimble, PhD, RN, CNP, Clinical Team Liaison

**2011 Roberta Scofield Memorial Certification Award, Oncology Nursing Society**

Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer

**Good Samaritan Hospital Annual Medical Staff Recognition**

**2011 Physicians Make a Difference Award**

Chirag Patel, MD, Director of Innovative Care Solutions

**Cameo of Caring, Wright State University School of Nursing**

Jessica Conger, BSN, CHPN, Team Leader, Lorelei's Place Hospice House

**2011 Nurse of the Year, District Ten, Ohio Nurses Association**

Mark Curtis, CNS, BC, LMT, Innovative Care Solutions

## COMMUNITY PARTNERSHIPS

Clinton Memorial Hospital Regional Health System

Dayton Children's Medical Center

Department of Veterans Affairs Medical Center

Health Alliance of Greater Cincinnati

- West Chester Hospital
- University Hospital

Kettering Health Network

- Kettering Medical Center
- Grandview Medical Center
- Greene Memorial Hospital
- Fort Hamilton Hospital
- Southview Medical Center
- Soin Medical Center
- Sycamore Medical Center

Mercy Health System-Western Ohio

- Springfield Regional Hospital

Premier Health Partners

- Good Samaritan Hospital
- Miami Valley Hospital
- Atrium Medical Center
- Upper Valley Medical Center

Wayne Hospital

Wright Patterson Air Force Medical Center

# Publications and Presentations

## PUBLICATIONS

“Telephone Triage for Oncology Nurses.” *DVT and Anxiety*, Pittsburgh: Oncology Nursing Press

[Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer](#)

“Hospice Questions & Answers.” Ask the Expert, *Seniors Guide Publication*

[Ruth Thomson, DO, Vice President of Medical Care](#)

“Making the Most Out of your Healthcare Provider Visit.” Ask the Expert, *Seniors Guide Publication*

[Nancy Trimble, PhD, RN, CNP, Clinical Team Liaison](#)

## PRESENTATIONS

“Music Therapy and Comfort.” Holistic Nursing Conference, Miami Valley Hospital. Dayton, OH

[Teresa Edingfield, MSA, MT-BC, Music Therapist](#)

“Music Therapy: Effects of Music.” Life Cycles Group. Dayton, OH

[Teresa Edingfield, MSA, MT-BC, Music Therapist](#)

“The Star Effect — Star Therapy & Application Research.” Annual Conference, Midwest Care Alliance. Columbus, OH

[Kathy Emerson, LPN, Hospice House Clinical Staff](#)

[Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer](#)

[Linda Quinlin, MS, RN, ACNS-BC, C-NP, Innovative Care Solutions](#)

*PRESENTATIONS continued*

“Bereavement and Hospice Services.” University of Dayton. Dayton, OH  
[Mary Gamage, MSW, LSW, Bereavement Counseling Associate](#)

“A QAPI Approach to Improving the Care of Short Stay Patients.” National Hospice and Palliative Care Organization. Washington, DC  
[Terry Gross RN, Director of Quality & Informatics](#)  
[Mary Murphy RN, MS, AOCN, ACHPN, Chief Nursing Care Officer](#)  
[Terri Maxwell PhD, APRN, Hospice Pharmacia](#)

“Art and Healing.” Dayton Children’s Medical Center. Dayton, OH  
[Jonathan Haag, MSW, LISW, ATR-BC, Bereavement Counselor and Art Therapist](#)

“Art Therapy: Beyond Words.” American Cancer Society, Dayton, OH  
[Jonathan Haag, MSW, LISW, ATR-BC, Bereavement Counselor and Art Therapist](#)

“Mandalas and Art Therapy.” Kettering Medical Center Cancer Support. Dayton, OH  
[Jonathan Haag, MSW, LISW, ATR-BC, Bereavement Counselor and Art Therapist](#)

“When Caring Hurts.” Graceworks Senior Companion Program. Dayton, OH  
[Deborah Holt, MS, PCC-S, Bereavement Counseling Associate](#)

“Spousal Loss in Mid-Life.” Cedarville University. Cedarville, OH  
[Deborah Holt, MS, PCC-S, Bereavement Counseling Associate](#)

“Development of a Veteran Performance Improvement (PI) Project.” Midwest Care Alliance. Columbus, OH  
[Miriam Morrison, BA, MA, CVA, Director of Volunteer Services](#)  
[Kathryn Smith, RN, MSN, CHPN, Community Care Liaison-Veterans Affairs](#)

“We Honor Veterans.” Clinical Team Conference, National Hospice and Palliative Care Organization. San Diego, CA  
[Miriam Morrison, BA, MA, CVA, Director of Volunteer Services](#)  
[Kathryn Smith, RN, MSN, CHPN, Community Care Liaison-Veterans Affairs](#)

“Conversations that Matter: Fostering Conversations with Patients and Families about End of Life issues.” Third Annual Medical-Spirituality Conference, Boonshoft School of Medicine, Wright State University. Dayton, OH  
[Mary Murphy, RN, MS, AOCN, ACHPN, Chief Nursing Care Officer](#)

“Music Therapy and Aging: Practical Applications for Caregivers.” Lavender Home Health. Dayton, OH  
[Caitlin Nicholas, MT-BC, Music Therapist](#)

“Preparing Your Students and Interns to Work in a Hospice Setting.” American Music Therapy National Conference. Atlanta, GA  
[Caitlin Nicholas, MT-BC, Music Therapist](#)

“Use of Music and Self in Grieving.” Young Widows Support Group, Normandy United Methodist Church. Dayton, OH  
[Caitlin Nicholas, MT-BC, Music Therapist](#)

“The Costs of Caring.” Miami Valley Hospital Spirituality, Beliefs and Values Conference. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“The Costs of Caring.” Kettering Medical Center Quality of Life Conference. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“The Costs of Caring.” Kettering Medical Center Staff Social Workers. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“Cultural Considerations at End of Life.” Miami Valley Hospital, Staff Social Workers. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“The Devil Isn’t in the Details: Strategies for Divine Documentation of Spiritual Care.” National Hospice and Palliative Care Organization Clinical Team Conference. San Diego, CA  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“End of Life Issues, Options and Interventions.” Wright State University. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“The Process of Dying: Understanding Patient and Caregiver/Family Behaviors.” Stephen Ministers. Brookville, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“Sudden Death: Responding to and Supporting Survivors.” Epilepsy Foundation of Western Ohio. Dayton, OH  
[M. Bernadine Parks, MS, PCC-S, Director of Pathways of Hope](#)

“The STAR Effect — Star Therapy and Application Research.” American Academy of Hospice and Palliative Medicine and the Hospice and Palliative Nurses Association Convention. Columbus, OH  
[Linda Quinlin, MS, RN, ACNS-BC, C-NP](#)  
[Kathy Emerson, LPN, Hospice House Clinical Staff](#)

PRESENTATIONS *continued*

“What You May Not Know About Hospice.” Miami University, Oxford, OH  
Lisa Rucker, Community Information Liaison

“Dos and Don’ts of Dementia Care: How to Keep Yourself and Your Patients Safe.”  
Midwest Care Alliance, Columbus, OH  
Nancy Trimble, PhD, RN, CNP, Clinical Team Liaison

“Using Pathophysiology of Disease for Effective Documentation.” Midwest Care  
Alliance, Columbus, OH  
Nancy Trimble, PhD, RN, CNP, Clinical Team Liaison

# Clinical Leadership



CLINICAL LEADERSHIP TEAM (PICTURED) BOTTOM ROW (L TO R): SARITA GALE, RN, CHPN, DIRECTOR OF CARE COORDINATION CENTER; SHERI GIBSON, RN, CRISIS CARE TEAM LEADER; PACO, THERAPY DOG; LANA BLOSSER, RN, CHPN, DAYTON HOSPICE HOUSE TEAM LEADER; GAYLE SIMMONS, CHAPLAIN TEAM LEADER; BETTY BROWN, RN, CHPN, ASSISTED LIVING TEAM LEADER; RACHEL ADAMS, RN, CHPN, COMING HOME TEAM LEADER; JAYNE ORMBERG, RN, CHPN, COMING HOME TEAM LEADER. TOP ROW (L TO R) KATE LITTLE, RN, CHPN, DIRECTOR OF CARE, HOSPICE HOUSES; LISA BALSTER, DIRECTOR OF CARE, PATIENT AND FAMILY SUPPORT SERVICES; REBECCA BLEDSOE, DIRECTOR OF PHARMACY; AMANDA BANASYAK, LEAD MASSAGE THERAPIST; TERRI GROSS, RN, CHPN, DIRECTOR OF QUALITY AND INFORMATICS; JESSICA CONGER, RN, BSN, CHPN, LORELEI’S PLACE HOSPICE HOUSE TEAM LEADER; RACHEL HOOVER, RN, CHPN, CARE PARTNERS TEAM LEADER; TIONDA HUGHES, PATIENT SERVICES COORDINATOR; LAUREN COYLE, RN, CHPN, CARE PARTNERS TEAM LEADER; JULIE WICKLINE, RN, CHPN, DIRECTOR OF EDUCATION AND STAFF DEVELOPMENT; CARL GILL, DIRECTOR OF CARE, CARE PARTNERS

Rachel Adams, RN, CHPN  
Team Leader, Coming Home

Lisa Balster, MA, LSW, CHA  
Director of Care, Patient and Family Support Services

Amanda Banasyak, LMT  
Lead Massage Therapist

Rebecca Bledsoe, PharmD  
Director of Pharmacy

Lana Blosser, RN, CHPN  
Team Leader, Dayton Hospice House

Kristy Brock, RN, CHPN  
Team Leader, Extended Hours

Betty Brown, RN, CHPN  
Team Leader, Assisted Living

Jessica Conger, RN, CHPN  
Team Leader, Lorelei’s Place Hospice House

Lauren Coyle, RN, CHPN  
Team Leader, Care Partners

Renee Denton, RN, CHPN  
Team Leader, Admissions

Sarita Gale, RN, CHPN  
Director of Care Coordination Center

Sheri Gibson, RN  
Team Leader, Crisis Care

Carl Gill  
Director of Care, Care Partners

Terri Gross, RN, CHPN  
Director of Quality and Informatics

Rachel Hoover, RN, CHPN  
Team Leader, Care Partners

Tionda Hughes  
Patient Services Coordinator

Kate Little, RN, CHPN  
Director of Care, Hospice Houses

Janet Longman, RN  
Director of Hospital Care and Services

Diane McCoppin, RN, CHPN  
Team Leader, Dayton Hospice House

Jackie Matthews, RN, MS, AOCN, APRN-CNS  
Director, Innovative Care Solutions

Mary Murphy, RN, MS, AOCN, ACHPN  
Chief Nursing Care Officer

Jayne Ormberg, RN, CHPN  
Team Leader, Coming Home

Chirag Patel, MD  
Medical Director of Innovative Care Solutions

Gayle Simmons, MDiv  
Chaplain

Steve Tahy, RN  
Team Leader, Care Partners

Ruth Thompson, DO  
Vice President of Medical Care

Yvonne Turner, RN, CHPN  
Director of Care, Coming Home

Carol Wasyk, RN, CHPN  
Team Leader, Coming Home

Julie Wickline, RN, BSN, CHPN  
Director of Education and Staff Development

“Each day our staff celebrates the lives of the patients we have the privilege of serving and we are pleased to celebrate their essential role in supporting our mission.”

KENT ANDERSON, CEO  
HOSPICE OF DAYTON

*JACQUELINE celebrated every holiday season by making Buckeye candies for the neighbors, the mailman, her relatives, the newspaper boy and more. She was known as the “Buckeye Lady” in the neighborhood, making over 1,000 sweet treats to give as gifts. What was her secret ingredient? Jackie always answered, “They’re Jackie’s 3-2-1 Buckeyes, made with loving hands.” When Jackie was admitted to hospice care, her family and the hospice staff prepared Buckeyes in her room to share with visitors and staff. It’s hard to say whether those Buckeyes were the last thing on her “to do” list, but Jackie slipped away a few short days later. Her legacy of candy made “with loving hands” lingers in the recipe she left behind.*



*DAVID was a Viet Nam War veteran who we enabled to take part in an Honor Flight visit to U.S. war memorials in Washington, D.C. It was his first time at the wall. A flood of emotions overwhelmed him. David began to cry, connecting emotionally and spiritually with soldiers he served with 40 years ago. As David’s escort wheeled his chair up the ramp, they were stopped by a man and his wife. The man reached out his right hand to David saying, “Welcome home, Marine, welcome home.” The man’s wife knelt in front of David and said, “Thank you for all you’ve done for this country.” “The trip,” said David later, “brought me closure that I never had or ever thought I’d find. This was a trip I’ll never, ever forget.”*

*THELMA served for two years as a Navy WAVE (Women Accepted for Volunteer Emergency Service) during World War II. Enlisting at age 24, she worked in the Brooklyn Navy Ship*



*Yard. After the war, Thelma returned to Ohio and worked in a factory, where she met her husband. They raised two children, and had four grandchildren. Now a widow and the only surviving member of her group of Navy friends, Thelma has written a memoir. She is one of many comrades-in-arms to be recognized by Hospice of Dayton for military service through American Pride, a veteran care program designed to support veterans with services tailored to their needs and honoring their sacrifices for their county.*



**Hospice of Dayton**

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Dayton, Ohio 45420

[www.hospiceofdayton.org](http://www.hospiceofdayton.org)

**Hospice of Butler & Warren  
Counties**

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Franklin, OH 45005

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[www.hospiceofbutlerco.org](http://www.hospiceofbutlerco.org)

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