

Companion

Winter 2008

Hospice of the Rapidan is a not for profit community based organization providing medical care and social, emotional, spiritual and grief support for people with a limited life expectancy and their caregivers

Serving Fauquier, Culpeper, Orange, Madison and Rappahannock counties

Virginia Licensed, Medicare & Medicaid Certified

Founded 1983

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Caring is Contagious

Like any healthcare provider, *Hospice of the Rapidan* is in the business of caring. We apply our skills and experience to enhance the comfort of those entrusted to us by family and loved ones.

But over the years we have noticed something special about how people respond to our care. As we come into people's homes at a very difficult time in their lives to provide compassionate care and help create a dignified environment for our patients' last stage of life, others respond in kind. A quiet dignity descends on even the most raucous home. Family members in conflict find a way to put their differences aside for a while. People are more willing to lend a hand or make an effort. It sometimes seems that caring, the kind that comes from the heart, is infectious.

Over the years we have also found that this extends beyond the homes of our patients to the communities we serve. Area residents and businesses have responded to us with a generosity of spirit that helps us and our patients in many ways. Whenever we host educational programs about end-of-life issues and at the community events we either host or participate in, we consistently find that people respond to what we do and how we do it with kindness, compassion, and a desire to help. Most of these people have never experienced the comfort hospice can provide, but everyone instinctively understands how

difficult facing the pending loss of someone they love can be.



Patients and families appreciate visits from our volunteer Beverly Christiana and her therapy dog Tempe.

Responses take many forms. Some people become interested in volunteering with us. Some support our work with donations. Others respond with warmth in their heart when they receive a copy of *Companion* or an invitation to one of our events. For many people, being part of their community involves supporting organizations that, like *Hospice of the Rapidan*, work hard to enhance the quality of life for all who live there. This too seems to be contagious. Communities, like families, develop their own personality, and we have

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Join us at one or more of the following events!

January

Lunch 'n Learn, Warrenton, Tues, 10th
Lunch 'n Learn, Culpeper, Tues, 17th
 Topic: Coping and Caring From Afar

Grief Support Group

Tues, Jan 22nd–Feb 26th
 2:00-3:30pm, 6 consecutive Tuesdays
 Hospice of the Rapidan–Community Room

February

Lunch 'n Learn, Warrenton, Tues, 10th
Lunch 'n Learn, Madison, Thurs, 12th
 Topic: Reaching Out to Our Community

March

Grief Support Group
Tues, March 4th–April 8th
 2:00-3:30pm, 6 consecutive Tuesdays
 Warrenton Visitor Center
 33 North Calhoun Street, Warrenton

New Volunteer Training

Mon and Thurs, 10th–31st
 1:00-4:00 pm
 Hospice of the Rapidan–Community Room

April

Advance Directives Day & Estate Planning Lunch & Learn - Two locations - Limited seating
 RSVP required 540-825-4840

Lake of the Woods Country Club
Wed, April 16th, 11:30am-1:30pm
 Hosted by the Law Offices of Getty & Associates

Fauquier Springs Country Club
Wed, April 16th, 11:30am-1:30pm
 Hosted by Thomas Tucker, Investment Representative, Edward Jones

Hospice Foundation of America Teleconference
 "Living With Grief: Children & Adolescents"
Wed, April 16th, 1:30-4:00 pm
 The Joe Daniels Technology Center, Culpeper
 Call Valarie Diamond to register at 540-825-4840

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Letter From the Executive Director



Kathy Clements

Hospice of the Rapidan's care is focused on meeting the individual needs of every patient, every time, to help them maximize their quality of life, even at the end of life. Every member of our staff

believes in the hospice work that we are called to do and our commitment to the communities we serve. Each of us is also deeply thankful for the support of our community, for without your generosity we could not offer the depth and quality of care we strive to provide every day.

Here is an example of the difference your support makes. One of our patients suffered from uncontrollable pain when he first came under our care. Conventional attempts to relieve his pain were ineffective. Despite this his physician, his hospice nurse and the hospice medical director did not give up; they continued to actively pursue every available measure to control his pain until they found one that worked. Unfortunately, the medication he needed was very expensive. Under Medicare, a hospice bears the cost of all medication relating to hospice care, and the cost of this patient's medication was thousands of dollars higher each month than the amount we were reimbursed.

There was never any question about providing this patient with the medication

and pain management treatment he needed. *Hospice of the Rapidan* has always believed in providing the best possible care to every patient. We were able to do this for this particular patient, and for all our patients, because of the financial support we receive from the communities we serve.

This story is not unique. A while ago we cared for a two year old who was dying of a congenital illness. The child and her family fought with everything they had, but were concerned because they had limited resources. From time to time she needed emergency room care. Again, due to the regulatory environment in which all hospices operate, we had to cover the emergency room costs, which were many thousands of dollars more than the reimbursements we received. Because of your support of *Hospice of the Rapidan*, this little girl got the care she needed and her family never received a bill.

As these cases illustrate, your support of *Hospice of the Rapidan* has tangible benefits right here in our community. Your contributions have quite possibly helped one of your own neighbors to make it through one of the most difficult experiences someone can go through. We often ask you for your support because it is so vital to our mission. But today, in the spirit of the holidays, I just want to say thank you. You make our work possible, and our entire community benefits. To some, you even seem like angels.

Kathy Clements, RN, CHPN

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Caring is Contagious

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been fortunate to find that we serve communities characterized by caring, kindness, and strong values. Year after year this has made our job easier and allowed us to serve patients and families more effectively.

This is a time of year when many of us count our blessings. The Christmas season and the beginning of a new year are times for taking stock, adjusting our priorities, and giving thanks for that which is good in our lives and community. We do the same thing at *Hospice of the Rapidan*. As we host the lighting of our Trees of Lights, attend holiday parties throughout the five counties we serve and join with neighbors to sing carols, we pause to reflect on how fortunate we and our patients are to

have the support of the communities we serve. This is particularly true as we put together the winter issue of *Companion*, in which we list those in the area who have supported the care we provide. The list is long, as you can see in this issue, and we are deeply grateful to everyone who has demonstrated their belief in the value of care and compassion by making a donation.

The words "thank you" hardly seem adequate. Without your support we simply could not provide the quality care so many families need. Your generosity enables us to provide all the care each patient and family needs even when it exceeds the level of care for which we are reimbursed. It makes it possible for us to be

there for patients, overwhelmed caregivers, and their loved ones whenever they need us, as well as live up to our longstanding commitment to care for every patient in need of hospice regardless of their ability to pay. Yes, as we look back on the year now ending and forward to the one about to begin, we are touched by the kindness and support we have received from our community. If our kind of care has inspired others, like you, to care just a little more, then we must be doing our job. Thank you for caring.

If you would prefer not to receive future issues of *Companion*, please call Elaine at 540.825.4840 or e-mail her at info@hotr.org.

An Evening of Song at *Tea, Lace & Roses* to Honor Stan Karas



From left to right, Mike Byrnes, Kathy Clements, Joan Byrnes, and Karen Henderson.

In September Joan and Mike Byrnes, owners of *Tea, Lace & Roses* in Culpeper, hosted an evening of jazz in memory of their good friend Stan Karas, a beloved member of our community who lost his long battle with cancer earlier this year. Stan was a larger than life presence in Culpeper, where he was station manager of Channel 21 and was involved in many aspects of the area's business and cultural life. Proceeds from the evening benefitted *Hospice of the Rapidan*, which cared for Stan during his final illness. Karen Henderson, a well known vocalist and close friend of Stan's who serves as president of the Fauquier County Chamber of Commerce, sang a variety of standards and songs from her current CD "Luminous".

Tea, Lace & Roses was filled to capacity and many people came and went throughout the evening to honor Stan, hear Karen's music, and support *Hospice of the Rapidan*. The entire *Hospice of the Rapidan* community is deeply thankful to Joan and Mike Byrnes and Karen Henderson for arranging this tribute to Stan and for their support of our work. We also wish to thank all those who attended the event.

Thank you Dr. Chander

Hospice of the Rapidan's Board of Directors and staff are grateful to Nivedita Chander, M.D., who recently finished her service as an active member of our Board of Directors for 5 years. Dr. Chander lives with her husband and children in Fauquier County. She practices with Bluemont Nephrology Associates, PC, in Warrenton and treats patients in Warrenton and Culpeper.

We were privileged to have had Dr. Chander's expertise and her warm and friendly manner on our Board for so long. She was instrumental in helping *Hospice of the Rapidan* live up to its mission to provide the best possible end-of-life care to all who need it in our area. We wish her and her family the best for the future.

Hospice of the Rapidan Celebrates The Plains Days



From left to right, Pam Oakley-Whiting & Patricia Newton, two of Dr. Bickel's nurses, having some fun at The Plains Days

Hospice of the Rapidan was delighted to participate in The Plains Days on October 6th. We were invited to be part of this annual outdoor community festival in The Plains in

Fauquier County by the nurses and staff of Dr. Rudolf Bickel, whose genuine concern for the well being of terminally ill patients and their families is clearly evident.

Many families and community members visited our table and we were able to answer questions about hospice care and hand out literature with important information. *Hospice of the Rapidan* takes part in fairs and similar events in many towns throughout all five counties we serve each year, which gives us the opportunity to meet people one on one and answer questions directly. Talking about the possible death of a loved one is always difficult, so we strive to make information about

care options easy to access. Dr. Bickel's nurses and staff understand the value of bringing this kind of information to the community. We were grateful to them for both their invitation and their compassion for patients and families facing end-of-life issues.

Dr. Rudolf Bickel maintains a family practice in The Plains, Virginia. He is a graduate of the University of Michigan and Harvard Medical School. Dr. Bickel served in the Air Force for 20 years as a flight surgeon and retired as a colonel.

Hospice of the Rapidan Speaks to Germanna Community College Nursing Students

As part of our outreach program, Deena Lohmann, RN, one of our hospice nurses, gave a presentation to nursing students at Germanna Community College School of Nursing on October 22. As part of their curriculum nursing students learn about advance directives, pain management, hospice, postmortem care and dealing with grief. Deena addressed these topics and others from the viewpoint of a hospice nurse.

Marie Messier, Associate Professor of Nursing, has a representative from *Hospice of the Rapidan* speak to her nursing students every year. "I believe hearing from a practicing hospice nurse provides valuable insight for our students. This presentation has always been a favorite of our students."

Hospice of the Rapidan's outreach program is available to speak to groups about a variety of end-of-life care topics. If you know of an organization, church, professional or civic group that is interested in having a presentation on any subject related to hospice care, please call Valarie Diamond at 540.825.4840.

Remembering Patsy Tuffy

Working in a hospice does not make us immune to grief. So the news that Patsy Tuffy, RN, a former Executive Director of our organization, died recently brought profound sadness to many *Hospice of the Rapidan* staff members. Patsy passed away on November 1, 2007 at home surrounded by her family whom she loved deeply.

Patsy Tuffy came to *Hospice of the Rapidan* in 1996 from Hospice of the Piedmont in Charlottesville. She brought with her a wealth of knowledge in nursing, hospice, leadership and management combined with her own special flair. Many of us have fond memories of her including her love for afternoon tea, her quirky little sayings, and most importantly her intense focus on what was best for our patients and families.

Patsy's legacy was to transform *Hospice of the Rapidan* into a substantial, fiscally sound, quality driven organization. She instituted many practices that we still use today. When she retired in 2000 it was with her strong encouragement that I took over the reins of this agency.

Patsy had a love for life that she infused everywhere she went. She loved traveling, music, plants and gardens, but most of all her family and friends and her strong faith in God. We extend our sincere condolences to Patsy's family and her wide circle of friends. Good-bye friend! Our memories of you will live in our hearts until we meet again on the other side.

Kathy Clements, RN, CHPN
Executive Director

A Hospice Story



Volunteer Pat Harlow visiting with Craig Wilt, *Hospice of the Rapidan's* grief Care Coordinator

Having worked in the medical profession for 40 years I felt that I could handle any health issue. However when my soul mate, my husband of 40 years, was diagnosed with end stage lung cancer I was devastated. My husband fought a very courageous battle with chemotherapy, gamma knife twice and radiation therapy, but the cancer was too strong.

When my husband asked me why I was prolonging his life, I spoke with my pastor who put me in touch with another member of our congregation who was a nurse with *Hospice of the Rapidan*. She immediately realized that I needed help as much as my husband did. I was exhausted. She rearranged her schedule and was at our home in half an hour. She checked on my husband and calmly explained how *Hospice of the Rapidan* could help keep him comfortable, how they could help relieve some of my stress, and how they could help both of us and our children deal with the emotions surrounding his impending death so we could make the most of our remaining time.

My husband died only twelve days later. During that time Chaplain Danielson visited and sang *The Old Rugged Cross* and *Amazing Grace* with my husband. A social worker kept track of how our children and I were coping. And our nurse was superb! In addition to everything else she patiently helped me learn how to administer the multiple medications my husband needed to remain comfortable and pain free.

I am grateful that my husband was coherent until just 5 hours prior to his death. Our nurse recognized what was happening and helped us prepare for the end. She arrived shortly after my husband's death and took care of all the arrangements so my children and I could comfort each other.

Craig Wilt visited me after the funeral and helped me put the pieces together. After my husband's death I experienced a new fear of being in my own home, which I overcame with help from one of his Support Groups. Craig stayed in touch with me throughout the first year after my husband's death, which was both a comfort and very helpful.

A year ago I spoke with Craig about volunteering for *Hospice of the Rapidan*. I want to give something back for the generous support my family and I received during my husband's illness and death, and this has proven more rewarding than I expected.

Looking back, I wish I had known more about what hospice can do for patients and families before I needed it, so I could have accessed this caring support earlier. As a volunteer, I now do what I can to help others realize this too.

As told by Pat Harlow, a *Hospice of the Rapidan* volunteer

Hospice Q&A

Since Medicare and insurance cover hospice care, why do you need donations?

Hospice care has been covered by Medicare since 1983. Medicaid in most states, including Virginia, and most insurance policies added coverage shortly thereafter. While the reimbursements we receive are our largest source of revenue, our ability to provide the best possible end-of-life care depends heavily on financial support from individuals and businesses in the communities we serve.

First, Medicare's reimbursement rate is based on the costs of a minimum level of care. *Hospice of the Rapidan* is committed to providing all the care each patient needs, which often exceeds the minimum covered by Medicare. We never bill patients for this difference. Second, donations make it possible for *Hospice of the Rapidan* to live up to its promise to never turn away any patient because they are unable to pay for hospice care. Third, *Hospice of the Rapidan* offers a comprehensive range of grief care services, for which we receive no reimbursement from Medicare or insurance. We never charge families or surviving loved ones for any of these services.

Just as hospitals depend heavily on donations even though they receive payment for their services and universities depend on donations even though they charge tuition, not-for-profit hospices like *Hospice of the Rapidan* are able to provide the best possible end-of-life care each patient needs, regardless of their ability to pay, because of the generosity of people like you.



VOLUNTEERS NEEDED!

Contact us at www.hotr.org
or call 540.825.4840

Clinical Corner

A Column for Health Care Professionals

Between Comfort and Care, a Blurry Line



Dr. Sandeep Jauhar

Sandeep Jauhar, M.D. is the Director of the Heart Failure Program at Long Island Jewish Medical Center. Since 1998 he has been writing regularly about medicine for

The New York Times. He is the recipient of a South Asian Journalists Association Special Recognition Award for outstanding stories about medicine.

As a heart failure specialist, I often take care of patients near the end of their lives. I am sometimes asked to predict how long someone is going to live. On rare occasions, I have even been asked to assist in someone's death.

I once took care of an 84-year-old woman with end-stage heart failure who told me she couldn't bear feeling short of breath and pleaded with me to help her die. "Is Nov. 15 a good day for you?" she asked.

I explained that I could not assist in her death, though I could give her morphine to relieve her suffering. "If you were like me, you'd say the same thing," she said ruefully. "I'm half gone. Nobody wants to bother with you when you're like this."

With her permission and her family's, she was enrolled in a hospice program. But she never made it out of the hospital.

I recently cared for a man in his late 30s whose heart failure, a result of severe coronary disease, had progressed to the point where his kidneys had nearly stopped working. Michael

spent most of his days sitting in a chair, head resting on his palm, unable to complete a sentence because of shortness of breath. Intravenous drugs dripped into catheters in his arms, which were so waterlogged that a hospital ID band dug a deep furrow into his wrist.

Because of inadequate social and family support, Michael had been deemed ineligible for a heart transplant or an artificial assist device. Given the dearth of available organs, cardiologists feared that if he didn't take his medications properly and rejected a donor heart, the result would be two deaths, not one.

Michael wanted to live out his remaining days at home with his family. He understood that his condition was terminal and that the end was near. So we discharged him from the hospital.

It is always difficult to see a patient die, especially one as young as Michael. We doctors are not trained for it. Once, as a resident, I took care of an elderly man with drug-resistant leukemia and fungal pneumonia. When death was imminent, his son tried to put restrictions on blood draws. "I know my father, and he did not want to live this way," he said. "The one thing he always prayed for was that he would go in his sleep."

But we quickly discovered that it was almost impossible not to draw blood from a cancer patient. Some reason or another always came up. Eventually his family instructed us to provide "comfort care," which meant no needle sticks and a steady infusion of morphine. For a while, his condition seemed to improve. My first instinct was to turn off the morphine drip, but the attending physician, more experienced in these matters, dialed it up even further. I was afraid he might stop breathing, but of course that was

By SANDEEP JAUHAR, M.D.

the whole point. It is called the law of double effect. It was O.K. for us to hasten his death in the service of treating pain and discomfort.

One evening just before leaving the hospital I received a phone call from Michael's visiting nurse. He told me that Michael's blood pressure was dangerously low and that his complexion was pallid, even a bit blue.

Hospice care was supposed to have been set up, but the hospice nurse had not yet come to the house. So what did I want to do, the nurse wanted to know. He said he did not feel comfortable providing narcotics to relieve Michael's discomfort. I wasn't sure what to do, so I told him to send Michael to the emergency room.

In the United States, patients with terminal illnesses often spend a large part of the end of their lives in the hospital. In Newark, for example, a dying patient spends an average of three weeks in the hospital before death. At the institution where I trained in Manhattan, patients spend nearly 30 days of the last six months of their lives in the hospital. Nearly every doctor I've talked to recognizes that this wastes precious resources and prolongs suffering. But they - I - have not been taught a different way.

In the hospital, Michael's condition was stabilized with powerful medications. Once again, hospice care was put in place and he was discharged home.

A few days later I got a call at 6:45 in the morning from the microbiology lab telling me that blood cultures, drawn while Michael was in the E.R., were positive for a particularly virulent bacteria. Did I want to prescribe antibiotics to treat the underlying infection? Or simply tell the hospice nurse to

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2006/2007 Honor Roll of Supporters

On behalf of our patients, their families and the communities we serve, *Hospice of the Rapidan* extends its sincere gratitude to our generous donors for their support of compassionate and dignified end-of-life care in our area. We are delighted to recognize the many individuals, corporations and foundations who supported *Hospice of the Rapidan* during fiscal year that ended in June, 2007.

We have made every effort to accurately recognize all those who have generously supported our work. If your name has inadvertently been omitted, misspelled, or incorrectly listed, we apologize in advance. Please contact us at 540.825.4840 or email us at info@hotr.org. **Thank you!**

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Annual Service of Remembrance Comforts Families Who Have Recently Lost A Loved One



Craig Wilt, Hospice of the Rapidan's Grief Care Coordinator, Nancy Fertig, one of our registered nurses, and Denise Vogt, our Chaplain, looking on, as a dove of remembrance flies off.

Hospice of the Rapidan held its 25th annual Service of Remembrance on Sunday, October 14th at Culpeper United Methodist Church. The private service was attended by over 150 family members and friends of patients who died under our care during the last year. They were joined by staff members and volunteers of *Hospice of the Rapidan* who had helped care for their loved ones. Grief Care Coordinator Craig Wilt arranged and managed the program.

This year's Service of Remembrance included opening remarks by Executive Director Kathy Clements, an invocation by Pastor Randy Orndorff of Culpeper United Methodist Church, a message on "The Gift of Tears" by *Hospice of the Rapidan's* Chaplain, Denise Vogt, and readings and songs led by staff and volunteers. The Three Angels' Chorale of Hartland College in Rapidan sang The Life of Praise, Come Unto Me and The Blessed Hope, and volunteer Dawn Bartlett played the harp. At the conclusion of the service doves were released to signify freedom and peace.

We wish to thank Candy Treadway for donating the flowers, Betsy Meyer, director, and Seth Lucas, accompanist, of Three Angels Chorale, Collis Jenkins who provided the doves, and the many volunteers whose dedication and compassion make this event so special every year.

Hospice of the Rapidan offers a broad range of support services for area residents grieving the loss of a loved one. Many families receiving grief

support have experienced the death of a family member who was not under *Hospice of the Rapidan's* care, including families who did not have the opportunity to say good-bye because their loved one died suddenly. All grief care is offered free of charge. More information is available from Craig Wilt at 540-825-4840.

While most of our grief programs are available to anyone who has suffered a loss, the Service of Remembrance serves a smaller community—family and loved ones of patients of *Hospice of the Rapidan*. In many respects, this service is a continuation of the very personal relationship that grows between caregivers and those receiving care. A strong bond often develops between patients' families and the nurses, social workers, certified nursing assistants and dedicated volunteers who come into their homes to provide dignified and compassionate end-of-life care not just for the patient, but also for families members dealing with their emotions, fears and grief even before they lose their loved one.

alleviate any fevers with Tylenol and ice packs?

I called the nurse and explained the situation. "We do give antibiotics," she assured me. "Sometimes we view it as a comfort measure, and sometimes people want everything done."

"You still accept patients into hospice if they want everything done?" I asked.

"Well, it usually doesn't start off like that," she said, "but sometimes the nearer some people get to death, the more desperate they get. We try to discourage some things, but in the end you have to decide on a case-by-case basis."

So, after consulting with Michael and his family, I ended up ordering an IV antibiotic. But then an infectious-disease specialist told me it wasn't safe to administer the drug without drawing blood for certain tests - an electrolyte panel, a complete blood count and a drug level - at least once a

week. At first I resisted. Wasn't this something to be avoided? But in the end I acquiesced, convincing myself that giving the drug without proper monitoring might lead to greater discomfort.

A couple of days later the nurse called to tell me that the antibiotic was causing Michael to develop chest pain. The infectious-disease doctor suggested another antibiotic, nearly \$150 a dose. A couple of days later I got a call from a hospice physician rebuking me for using such an exorbitant drug when Michael only had a few weeks to live anyway. She said I might have to decide between the antibiotic and hospice care. So I stopped the drug.

Doctors need better training in how to help patients end their lives with dignity. The trend is in the right direction. The number of hospitals offering palliative medicine has nearly doubled since 2000, growing to 1,240 programs. Today, pain, nausea and shortness of breath are properly rec-

ognized as scourges of the terminally ill, and are aggressively treated. But the medical profession still has a long way to go.

Michael was readmitted to the hospital once more before he died. His family decided they did not want him to die at home, so they sent him back to the E.R. Eventually, he was discharged to a hospice facility, where he died a week later. Managing end-of-life care, I have learned, is never straightforward. When I think of how Michael died, I remember what an elderly woman with terminal heart disease once told me in the hospital. "My husband said the hardest thing to do is to die; I always thought it would be easy."

Sandeep Jauhar is the author of a memoir, "Intern: A Doctor's Initiation," to be published in January by Farrar, Straus & Giroux.

Letter from the Community Relations Director



Nancy Walbridge

This is a special time of year for everyone. For most it is joyous. For others, especially those who have recently lost a loved one, it can be bittersweet. During the holidays we tend to be generous and thankful, reflective and hopeful, and self indulgent and community spirited all at the same time. Isn't it wonderful?

The Christmas season and the beginning of a new year mean many of the same things to us at *Hospice of the Rapidan* as they do for most of you. We tend to look back at the good we have done during the past year—one patient and one family at a time. We count our blessings, including the support of so many in the communities we serve who share our belief that everyone is entitled to compassionate and dignified care at the end of their life. We miss those who are no longer with us. But mostly we feel such a strong sense of connection to our friends and neighbors that we are filled with the warmth of the season.

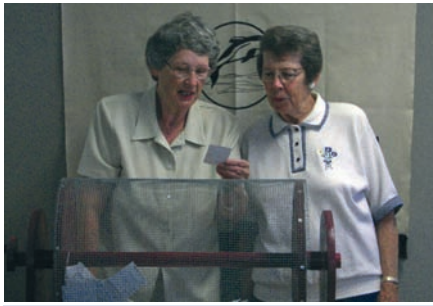
Hospice of the Rapidan, like any locally based healthcare provider, is a member of the community we serve. Our profes-

sionals and staff live here. We know many of the families we are called to care for. We share the joys and pains of our neighbors just like everyone else. So at this time of year, when we pray as well as celebrate, the connection to those we care for is especially strong. The families of our patients have welcomed us into their homes at a very difficult time. We have shared deeply personal moments with people who, but a few weeks or months ago were strangers, but who we will never forget. And with your continued support, we will do this over and over again for every patient and family who needs our special kind of care.

So as we raise our glasses in cheer this season all of us at *Hospice of the Rapidan* are filled with an overwhelming sense of gratitude to those of you who make our work possible and the firm belief that we are doing God's work, right here at home. Of course there is one difference between us and our neighbors. Our new year's resolution is always the same—to always provide the best possible end-of-life care to all who need it in our community. With your help, we know we will continue to honor this sacred promise.

Nancy Walbridge
Community Relations Director

Redskins Raffle Ticket Winners



Nancy Garrett and Claire Saint Jacques pulling the winning tickets

Sydney White and Peggy Simmons, both of Culpeper and both *Hospice of the Rapidan* volunteers, were the two lucky winners of this year's Redskins ticket raffle, each receiving four tickets on the 40-yard line, nine rows back from the

Redskins bench to the home game of their choice. Nancy Garrett and Claire Saint Jacques drew the two winning tickets and join all of us in congratulating Sydney, Peggy and their lucky friends.

This is the 9th year Nancy, Claire and Ann Mattingly have generously donated these tickets and we are genuinely thankful for their support. This is their way of honoring the difference hospice made for a dear friend of theirs who passed away 9 years ago. We would also like to thank the many staff members, volunteers, and local merchants in all five counties we serve who helped sell raffle tickets throughout the summer. The raffle raised more than \$5,500 which will help us provide the best hospice care possible to all who need it in our area regardless of their ability to pay.

Hospice of the Rapidan Welcomes Dr. Julia Connelly to the Board



Dr. Julia Connelly, newest Board member

We are delighted to welcome Dr. Julia Connelly as the newest member of our Board of Directors. Dr. Connelly comes to us with a wealth of experience and both our organization and the communities we serve are fortunate she has agreed to serve. Dr. Connelly is a Professor of Medicine at the University Of Virginia Medical Center and Medical Director of Orange County Nursing Home.

Dr. Connelly has previously served on a number of other boards including the American College of Physicians and the American Society for Bioethics and Humanities.

Dr. Connelly lives with her family in Orange and enjoys travel, photography and giving back to her community.

From the Development Office

Throughout this issue of *Companion* are articles offering heartfelt thanks to the many friends and neighbors who support the work we do. Some describe the things, both large and small, your donations allow us to do for patients and families that would not be possible without your help. Others, in the spirit of the Christmas season, reflect on how mutual support—our care for dying patients and their families and your generosity—has strengthened our community and enhanced the quality of life for all of us here in central Virginia. Reflection on the past and hope for the future is natural at the beginning of a new year. As an organization of people caring for people, we do the same thing. And this year, as in years past, we have much to be grateful for.

Each of us at *Hospice of the Rapidan* can honestly look in the mirror at the end of the day and say "Yes, I have done everything possible to provide comfort, compassion and dignity for every patient. I never had to cut a corner, take a shortcut, turn a patient away or make a compromise in caring for any patient, because we had the resources to do what was necessary in every case." We receive thank you letters all the time, but we simply would not be able to do this without your support. Thank you for making this possible.

Many people start supporting us after *Hospice of the Rapidan* has cared for a family member or friend. Others innately

understand the importance of compassion and dignity at the end of life. However it starts, virtually everyone who starts giving to support our work continues to give as the years go by. As I look at the names on this year's honor roll of donors and compare them to those on rosters from years past I am struck by the sense of loyalty and commitment so many members of our community have shown. Caring for each other is part of the fabric of life here, where tradition and community are words of substance. We try to do our part every day. Putting this issue together reminds me that so many of our neighbors live by these values too.

You can be part of this tradition too. By making a donation today, either by returning the card in this issue or by calling us at 540.825.4840, you can help ensure that no one in need of hospice care is ever turned away because they cannot afford our care, and that every patient receives the best possible end-of-life care unfettered by limits imposed by insurance companies or the government. By continuing your generosity even after gifts have been exchanged you can put your belief that everyone is entitled to die pain free and with dignity into action, and earn the undying gratitude of an entire community.