Montgomery Hospice

is a nonprofit hospice serving residents of Montgomery County, Maryland. Our teams of doctors, nurse practitioners, nurses, spiritual counselors, social workers, certified nursing assistants, bereavement counselors and volunteers work with our patients and their families to provide quality end-of-life care in homes, extended care facilities, and at our acute care facility, Casey House.
commitment to excellence and consistency of service, coupled with the support of our many donors in the private and public sectors, are genuine hallmarks that make a difference at Montgomery Hospice.

Through stellar and stable leadership, competent and compassionate staff, Montgomery Hospice continues to make a difference to the patients we serve and their families. We continue to operate as a nonprofit, working in partnership with the community we serve and the many supporters of our work.

An array of healthcare providers and volunteers working as teams, provide excellent care to patients (and their families) in their residences, and at Casey House, the only all-hospice inpatient medical facility in our county.

In summary, our making a difference offers a distinctive healthcare service to the community; we seek to continue this trajectory as we move forward into the future.
You Make a Difference

With your donations in 2014, you made a difference to our terminally ill patients and their families. You also made a difference to our neighbors in Montgomery County who were grieving the death of a loved one and were helped by our bereavement services.

Your support contributed to the benefits highlighted in notes from thankful families. They told us that they were “so deeply grateful” for:

- exemplary care,
- professional support,
- help that was instrumental,
- empathy and concern,
- warmth and caring,
- moments of peace.

We are deeply grateful to YOU, our supporters, our extended team, for what you do to make a difference for our community and for the people in Montgomery County who need hospice care, or who need grief and loss support and education.

Montgomery Hospice Board of Directors
as of December 31, 2014

Sterling King, Jr., Dr.P.H., Chairman  ♦  Paul E. Alpuche, Jr., Esq., Vice Chairman
Lya M. Karm, M.D., Secretary  ♦  Debbie McGregor, Treasurer
Councilmember Beryl L. Feinberg, Immediate Past Chair  ♦  Michael G. Banks, Esq.
Brian A. Carpenter, M.D.  ♦  Senator Brian J. Feldman  ♦  Safia S. Kadir, Esq.
Elma M. Levy  ♦  Barry R. Meil  ♦  Ann Mitchell  ♦  German Parda
Sheriff Darren M. Popkin  ♦  Steven V. Roberts  ♦  Ronald J. Rubin
Kathy Torrence  ♦  Randall P. Wagner, M.D.  ♦  Dongmei Wang, M.D.

Montgomery Hospice Vital Statistics 2014
Founded 1981, Headquarters Rockville, MD

Number of Patients 2,064
Number of Patients at Casey House 513
Days of Charity Care 2,519
People educated in end-of-life topics 2,500
People receiving grief support 9,342
Active Volunteers 300
Employees 252

Clinical staff:
Physicians 6
Nurse Practitioners 5
Nurses (RN) 103
Nurses (LPN) 7
Certified Nursing Assistants 41
Social Workers 18
Spiritual Counselors 15
Bereavement Counselors 8
Massage Therapists 2
Clinical Aromatherapists 3
With your donations in 2014, you made a difference to our terminally ill patients and their families.

We also appreciate those of you who wrote letters to the Washington Post, holding up Montgomery Hospice as an example of a hospice doing things right. The negative articles that were printed in the first part of the year about unscrupulous hospices in other parts of the country were balanced somewhat by the Post printing my letters to the editor, and including Montgomery Hospice as an example of a quality hospice in an article published at the end of the year. That article also emphasized the importance of our donors, saying, “Montgomery Hospice is better able to afford [expensive care] because, like other nonprofits, it receives a large portion of its operating budget from donations.”

Some highlights of 2014 include our celebration of the 15th anniversary of Casey House, and having one of our bereavement counselors quoted in Essence magazine, where she shared her expertise with a national audience. Also in 2014, we made an operational change. We merged the activities of the Montgomery Hospice Foundation into Montgomery Hospice, Incorporated. This decision was made after a six-month study, followed by a recommendation from a steering committee representing both boards. The merger not only streamlines our operations, but also facilitates a culture that supports robust philanthropic efforts.

We continue to be deeply grateful for the very generous support of the Eugene B. Casey Foundation. The income from the Casey House Endowment for Nurses and Nursing Aides is being spent on salaries for nurses and nursing aides at Casey House. This is truly vital because Medicare again cut reimbursement rates for patient care at Casey House. The Endowment’s income underwrites nursing salaries at a time of decreasing insurance revenue. Casey House, a treasure and a local resource, serves more than 500 patients each year.

I invite you to review this annual report to learn more about how Montgomery Hospice made a difference in the community this year, and how your support made it possible.

Ann Mitchell, M.P.H.
President & CEO

Ann Mitchell

3
Montgomery Hospice Core Programs

Hospice at Home

Montgomery Hospice helps people live out their lives in dignity and comfort in their own homes. We work to support quality of life at the end of life by supporting people wherever they live. In 2014, we provided hospice services to more than 1,800 patients in their homes, while also supporting their families.

As a nonprofit hospice, we are committed to providing hospice care to everyone in our community who needs it, including those who have no insurance or Medicare coverage. In 2014, we provided 2,519 days of charity care, an eleven percent increase over 2013.

Casey House

In 2014, we celebrated the 15th anniversary of the opening of Casey House.

Casey House is a unique resource in our community, being the only all-hospice, acute care inpatient medical facility in Montgomery County. More than 7,200 patients have been cared for at Casey House since it opened in 1999. In 2014 alone, we cared for 513 patients—and their families—in this comfortable, home-like facility.

Bereavement

Montgomery Hospice’s bereavement department is staffed by trained professionals, each of whom has a Master’s degree. We support patients’ family members through phone calls and mailings for 13 months after the death, and through workshops and support groups. Grief and loss support and education is also provided free of charge to the Montgomery County community.

In 2014, we helped 4,169 hospice family members and 5,173 community members. During the course of the year, we made 15,000 phone calls and visits to family members of Montgomery Hospice patients, and 1,000 phone calls and visits to grieving community members. We ran more than 60 grief workshops and support groups, and provided grief and loss education to 3,700 high school students.
Other Exceptional Programs

Montgomery Kids
Montgomery Hospice provides compassionate, professional care for children who have a life-limiting illness through our Montgomery Kids program. In 2014, Montgomery Hospice cared for 22 patients, and also actively supported their families and friends. The Montgomery Kids team goes above-and-beyond to coordinate care with other physicians and care providers. We collaborate closely with all who have been part of the support team for the child.

Complementary Therapies
In addition to conventional medical care, Montgomery Hospice uses holistic therapies and services for comfort and symptom relief. Complementary Therapies are available to patients at home, in facilities and at Casey House. In 2014, licensed massage therapists provided 1,144 massages, more than double the number provided just three years ago. Patients received 2,270 lavender oil hand massages, and 900 “music by the bedside” visits (including harp and violin, singing and selected recorded music). Certified pets (and their owners) made more than 600 visits to patients. Last year was the first full year for our Reiki program; Reiki practitioners made 217 visits. Also during 2014, our three nurse aromatherapists implemented an aromatherapy pilot project at Casey House.

Center for Learning
As a nonprofit, Montgomery Hospice is committed to sharing our clinical expertise and end-of-life experience. In 2014, The Center for Learning educated professionals and community members through many different programs, including The Good News About Breaking Bad News, a panel of physicians moderated by Steve Roberts; several multicultural educational presentations and panels (including Adventist Healthcare’s Conference on Cultural Competencies at the End of Life); and our bereavement conference, The Practice of Presence: Using Compassion-Based Practices in Loss and Grief.

The Center for Learning provided 64 educational programs, and educated more than 1,500 clinicians and close to 1,000 people in the general community. We also provided information to 3,000 people at community health fairs.
She lived with her mother, father and two sisters in an apartment with a shared bathroom on the Lower East Side. Pearl worked as a dental hygienist, before marrying Daniel Sobel in her 30s. Devoted to her husband and marriage, Pearl was also a committed mother, raising three sons and a daughter.

Pearl’s daughter, Janet Goldman, remembers picnics and sunrises and games outdoors—Pearl loved nature. Their house was the one that the neighborhood kids wanted to come to because it was so much fun. Pearl loved being a mom. She could be tough—she had high expectations for her children, and no tolerance for them not doing the right thing. She raised her children in a conservative Jewish home, went to synagogue regularly, and observed the Jewish holidays and traditions. She had a strong commitment to moral values.

After her children were grown, she and her husband moved to Florida. Unfortunately, he died of a heart attack at age 61. Pearl remained in bed for several days after, devastated by the loss. But Pearl was a strong person. She was also a practical person. She was accepting of things as they were. She stayed in Florida, where she loved the warmth and the water, and from there continued planning the yearly family reunion—“Sobelfest”—that she and her husband had started years before. She liked being independent and was “always game” for the next adventure, including going on her son’s family hiking and camping trip when she was in her 80s. She had no fear. She loved life.

At age 96, Pearl moved to Maryland to be near Janet. She continued to be physically active, and resisted using a walker until she knew she needed it to keep moving. Even in her late 90s, she continued to be who she always had been: gracious, polite, and regularly looking for ways to be helpful to neighbors and family.
At age 99, Pearl began having memory problems. She was embarrassed when she would arrange to meet someone and forget to go. She tried to find work-arounds, writing notes to herself and putting them about her room. She also began suffering health issues, eventually leading to an emergency surgery. Although the surgery was successful, her doctor warned her family that she might be nearing the end of her life. Janet, who was familiar with hospice, had honest discussions with her mother. She explained that enrolling in hospice did not mean that you were about to die, but that instead it would provide access to professional support and helpful services that could be used for many months. When Pearl agreed to hospice care, she turned to Janet to help her select a hospice organization. They used several criteria, including the availability of Jewish support. They wanted to choose a hospice that understands the importance of spiritual care and has experience with Jewish tradition.

Janet is thankful for the many different ways that Montgomery Hospice supported her mother, and her whole family, during the six months that her mother was a patient. She describes the social worker as “warm, wonderful, comfortable,” someone who listened calmly, offered up help and information but never intruded. She tells how her mother found great pleasure in the chaplain visits. The chaplain would ask Pearl questions about herself and her life, and would listen carefully to the responses, with a genuine caring. Pearl found comfort in the chaplain praying and singing with her.

Janet did not think that her mother would be interested in volunteers but they became an important part of her mother’s life. Although Janet tried to visit almost every day, she was also balancing a part-time physical therapist practice. Knowing that her mother had friendly volunteers visiting gave Janet peace of mind. She was amazed at how patient and kind the volunteers were. Pearl would say, “I had the most lovely guest with me today.” The volunteers and Pearl would talk, or sit quietly. They would look through photo albums together. Their time with Pearl allowed her to review her life and to tell the story of her childhood, her marriage and her family. She relished being able to describe her life to people who had never heard the stories before.

As Pearl neared the end, she told Janet, “When I die, don’t be sad. I’ve had a long and wonderful life.” Pearl and her children had many honest conversations, Pearl sharing, “I want to be buried next to your father.” Janet credits Montgomery Hospice for allowing her to step away from caregiving, so that her time with Pearl was spent as mother and daughter together. Pearl’s family visited regularly, and she was able to continue to do things for them, putting out placemats, offering cookies and tea. Because so much was taken care of, they could sit together and chat. Pearl Sobel died on October 13, 2014 at the age of 101. Janet appreciates having had that time of transition, that time to wrap things up and say goodbye.
One day in October, my mother told me she was feeling tired. I suggested she might feel better if we took a little walk. She said all she wanted to do was sleep. I was upset to see that she hadn’t eaten lunch and I encouraged her to eat. The hospice chaplain, who was also visiting at the time, looked me straight in the eyes, and told me to “Listen.”

“Listen to what your mother is telling you. You need to let your mom rest.”

She told me so gently and clearly, that I couldn’t help but understand. The next day, when my mother again mentioned how tired she was, I told her, “Mom, you’re such a high-energy person. If you feel that all you want to do is sleep then maybe you are tired and you want to rest. It is okay to rest.”

My mother took my hands, looked at me and said, “Thank you for understanding.” She died three days later.

I will always be grateful for this chaplain sharing her wisdom and education, allowing me to connect so deeply with my mother all the way to the end.

Janet
Hospice is a positive/heartening story. Montgomery Hospice allowed us to acknowledge what was happening, and make the most of the time. Otherwise we would have pushed it aside. I was able to have real conversations with my mother. I was able to say goodbye, with peace of mind then and now. That time I spent with her was a gift.

Janet Goldman, daughter
In 2014, Montgomery Hospice cared for more than 2,000 Montgomery County families. Through your generosity, our financial position remains strong, despite Medicare sequestration and insurance rate cuts. We continue to provide highly-valued programs, including grief counseling, specialized and compassionate pediatric hospice, and inpatient care at our Casey House. We also continue to provide hospice services to those who have no insurance or who are under-insured. We are deeply grateful to our donors—we could not maintain these mission-driven programs without your support!

I am proud and honored to serve as Chairman of the Finance Committee of Montgomery Hospice. I am thankful and inspired by the work of the Montgomery Hospice staff and volunteers, and rejoice in the outpouring of gratitude expressed by the families we serve.

Debbie McGregor, Treasurer
Montgomery Hospice Board of Directors
Partner, Snyder Cohn, CPAs and Business Advisor
Not all of our volunteers work directly with hospice patients. Some work with professional counselors to provide grief support, some do office work, and others do community presentations and represent us at health fairs.

Volunteers who donated 80 hours or more in 2014

Sarah Adams
Carolyn Almen
Cindy Arno
Abigail Baines
Barbara Beadles
Arlene Belman
Nancy Birner
Joyce Botkin
Anne Bouhour
Joanne Bowman
Judy Brown
Lily Butler
Lucie Campbell
Patrick Carlson
Annie Chang
Elizabeth Cheng
Carole Clem
Linda Corey
Sandy Danoff
Judy Davis
MaryAnn Demarco
Bill Dietrich
Deborah Dodrill
Connie Dove
Doris Drees
Nancy Elmgren
Lois Fischbeck
Susan Foord
Jenny Geiger
Juline Glaz
Janet Goldman
Catalina Gomez
Beth Gorski
Sarah Hanson
Maggie Hayes
Meredith Horan
Karen Hughes
Diane Jackson
Stella Johnson
Nick Keller
Arlene Kiely
Susan Kramer
Margaret Lanthier
Jane Lewis
Mary Jane Lubore
Ute Main
Mary Anne Marcot
Julia Mark
Nan Marks
Ann Marshall
Zoeeann Millard
Valerie Pabst
Carolyn Patterson
Anneke Pleisier
Niki Popow
Meigs Ranney
Julie Ritz
Louise Ritz
Suzanne Robinson
Janet Roby
Beverly Rollins
Florence Rossel
Joseph Rychlec
Donna Selig
Denny Shaw
Cathy Shier
John Smallwood
Marianne Smyth
Bonnie Tarone
Susan Thomas
Kathleen Thompson
Shelagh Van Saanen
Joe Walshe
Susan Ward
Kat Weixel
Penny Winder

In 2014, the 300 Montgomery Hospice volunteers
• donated more than 17,000 hours,
• made close to 13,000 patient visits and
• drove more than 10,000 miles
in order to help our patients.

Montgomery Hospice volunteers are carefully screened, attend an extensive three-day volunteer training, and participate in educational events throughout the year. Volunteers go to patient homes, to nursing homes and to Casey House.

Montgomery Hospice patient care volunteers do a wide variety of things, including:

• visit patients in their homes
• read aloud
• provide lavender oil hand massages
• play the Reverie Harp
• have conversations with patients
• help families
• allow caregivers to take a break
• run errands
• assist with simple chores
• work on genealogy research
• help patients with letter writing
• create memory books
• visit patients with trained pet
• play an instrument
• provide companionship
• provide Comfort Touch® palliative massage
• listen to patient’s favorite music
• sing to patients
• sit quietly with a patient

Not all of our volunteers work directly with hospice patients. Some work with professional counselors to provide grief support, some do office work, and others do community presentations and represent us at health fairs.

Editorial: Susan Burket | Design: Paul Jutton
Thank you to John Whitman Photography, and the Goldman & Sobel Families