

HOSPICE *Happenings*



WINTER | 2018

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in this issue

HANNAH SHARP, RN, ON PALLIATIVE CARE COUNCIL



Hannah Sharp, RN was appointed to the State Palliative Care Advisory Council.

A bill—Senate File No. SF0088—information retrieved from <http://legisweb.state.wy.us/2017/Introduced/SF0088.pdf> (Web source: December 12, 2017), sponsored by Senators(s) Scott and Baldwin and Representative(s) Henderson, Kinner, Kirkbride, Pelkey and Schwartz, created a State Palliative Care Advisory Council. Members are appointed by the Governor of Wyoming.

Hanna Sharp, RN at CWHTP, has been appointed to the council.

Palliative Care is often thought of as comfort care for people in hospice, someone with a life expectancy of six months or less. And part of hospice treatment is palliative care.

However, Palliative Care is also for anyone with pain, emotional and spiritual suffering, who might have a condition for which they are still undergoing treatment, or have a life expectancy longer than six months. It encompasses all aspects of suffering: physical, emotional, spiritual and social. Improved quality of life is a goal for palliative care.

“The legislation created a committee for expanding palliative care in Wyoming,” said Sharp, “reaching more people with palliative care. There are only a few hospices in the state and we think the knowledge about palliative care is pretty low, even among doctors. The first thing we want to do is find out what people know about palliative care and then we can figure out what to do as far as public education, so people know they have choices about how their health care is administered.”

Among the 9-13 members specified for the State Palliative Care Advisory Council are Sharp (a bedside nurse), Representative Charles Pelkey, a chaplain, Pharmacist, sheriff and a physician, Greg Marino, MD, an oncologist who worked in Alaska. Marino is the chairman, said Sharp. “He has great experience getting palliative care into rural areas.”

“The council is not funded so is 100% voluntary,” said Sharp. The council plans to meet quarterly with their second meeting in January, 2018. She hopes to keep the council apprised of action by the National Hospice and Palliative Care Organization (NHPCO), and give her input as a nurse who provides palliative care to hospice patients.

Sharp said palliative care legislation will “provide a framework for patients to make decisions about their own health care and be empowered to make those decisions. It’s focusing on the patient and not the disease; we’re looking at their pain, their anxiety, their spiritual distress and not just the microscope. It’s holistic.”

The NHPCO states palliative care adds another support layer that may be missing in conventional medical treatment. 

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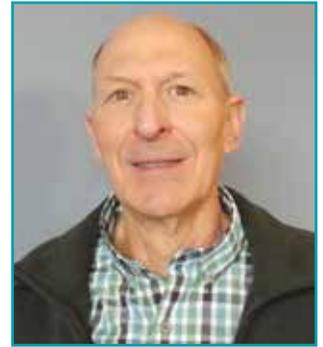
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MEET *the* PRESIDENT

JAY SWEDBERG, MD



President Jay Swedberg

Dr. Jay Swedberg is starting his last year as board member of Central Wyoming Hospice and Transitions Program (CWHTP). He accepted a position on the board six years ago because he felt it “an important time in people’s and their family’s lives”. He wanted this special transition to be as fulfilling as possible. “The board and hospice staff did a great job last year. I would like to continue in that direction and maintain that momentum,” said Swedberg.

In reviewing the board’s accomplishments, Swedberg noted that “it was a challenge when Marilyn Connor retired, because under her leadership the hospice program thrived, and we knew that it would be hard to replace her. Fortunately for the program, we were successful in recruiting a talented director, Kilty Brown, an RN, who hit the ground running. She is enthusiastic, compassionate and is able to analyze and organize effectively”.

“I am proud of what the board has accomplished. A couple of years ago, the program wasn’t in strong financial standing; this has been turned around in the past year, a huge undertaking. On top of that, we are excited to welcome three new board members that are going to be excellent additions with specialized talents,” said Swedberg.

Besides maintaining momentum, Dr. Swedberg’s goal is to expand people’s understanding of hospice. “I think most people think of hospice as palliative care during the process of dying. It’s about more than minimizing pain and suffering,” said Swedberg, “It’s about dignity and communication with friends and family.”

“We provide hospice care in the patient’s home and when necessary, in the hospice home. We also have the Transitions Program for people with life limiting conditions but with a probable life expectancy of more than six months. They can continue aggressive therapy but get in the program and receive some of the benefits. A third aspect we offer is our Respite Program which gives caregivers a chance to take a break, leave town, or take care of their own needs and know their loved one is going to be cared for in the hospice home.”

“As people understand what hospice can provide, they will also understand they get the most benefit if they enter the program at end of life when they have a few weeks [for a prognosis], instead of a few days. It will give them time to repair relationships, ask forgiveness, give forgiveness, share things they are grateful for with their friends and family, or share family history. There are so many things that are important at the end of life that work better if you start them before the final days. Hospice also provides bereavement counseling for patients and families. They help promote conversations between family members and friends.”

“In addition, the community is essential to our mission, and we need to do a better job with our acknowledgement of donors. We also need to do a better job of engaging with our staff to learn from them, as they are the front line to our excellent care” added Swedberg.

“We want to inform the community by putting together a short presentation and make it available to churches, social workers, and other professionals who will be working with people who are approaching the end of their life. We also want to bring various groups through hospice to introduce them to what we provide.”

Swedberg retired in May 2017 from his full time position as an on-site physician at Lifecare Center of Casper, but remains as the facility medical director. This “allowed me to increase my involvement and focus on the needs of the hospice patient.” He stays current by working two half days a week in the University of Wyoming Family Practice Residency program with the focus on geriatrics.

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Kilty Brown, RN



NEWSLETTER EDITOR

Neva Bodin





“Now that I am retired, I am able to focus on things that I wasn’t able to while working full time, like hospice, exercise and reading,” Swedberg said. In keeping with his goal of expanding knowledge about hospice and end of life issues, he recommends two books for people to read: *Being Mortal: Medicine and What Matters in the End*, by Atul Gawande and *When Breath Becomes Air*, by Paul Kalanithi.

Being on the board is a voluntary position. CWHTP staff thanks Dr. Swedberg and all the board members for their time, expertise, and willingness to govern this important service for the community. 

MEET LOURA HEUER F.N.P.



“I wanted to make a difference in people’s lives,” said Laura Heuer, a registered nurse who became a Family Nurse Practitioner. Her experience as a hair dresser for eight years (“Hairdressers are the best counselors on earth,” she adds), and a registered nurse working in an Emergency Department prepared her for the profession, and made her realize she “wanted more tools to be able to help people.”

Heuer has long had the desire to be helpful. “When I was in fourth grade, I wanted to be a nun or doctor, and we weren’t even Catholic!” she said.

Born in Cleveland, Ohio, Heuer arrived in Casper in 1990. She had recently become a single mother of two, needed a home and profession. She received help from Interfaith of Natrona County to obtain an apartment. She attended nursing school at Casper College, graduated in 1999, and began her career at Wyoming Medical Center, which included thirteen years in the Emergency Department.

Still wanting greater ability to help people, she went through Walden University to obtain her Masters of Science in Nursing, and began her year of clinical practice for nurse practitioner. Training at Western Medical Associates, the Glenrock Clinic and a women’s clinic in Casper, she became a certified Family Nurse Practitioner (F.N.P.) in 2015.

She can now give her patients a higher level of care. She is an advocate for giving patients information about their health. “I hate when doctors don’t talk to their patients and tell them what’s going on,” she said. “This shouldn’t be a secret. It’s about ‘you.’”

Family Nurse Practitioners in Wyoming have full independent practice authority. Hospice patients may be followed during their hospice experience by a nurse practitioner without a physician affiliate. Heuer has been a provider for patients at CWHTP.

Heuer began working with hospice when she had patients experiencing end of life.

“I can’t say enough good things about the hospice experience and how it works,” said Heuer. “I am so impressed with hospice. The majority of patients want to do end of life at home. But a lot of times, families are completely overwhelmed physically or emotionally, and it’s a huge ease of the burden.” CWHTP has inpatient facilities for those times.

Heuer remembers a patient who was very unhappy and suffering from an end stage disease making her lash out at people and “hospice caused a 180 degree turn. That’s just one [example], and I’ve seen many over the years with the same scenario.” A patient’s husband told her hospice “was a wonderful experience.”

Heuer starts a conversation with patient and family who are hospice eligible by asking what they want as far as treatment. “I ask what their expectation is. What are your goals? Then I work with the patient and I work with the family. I have a very specific conversation. I haven’t had a single family member say no. They always want their loved one to be comfortable. It’s a heavy conversation,” said Heuer.

For relaxation Heuer likes to go on road trips or read. Her husband is from Chicago so they also visit that windy city and explore the Upper Peninsula of Michigan. She has five children—three she gave birth to, a stepson, and has fostered a son. She readily shares her pride in each child, only one of which is still home.



Our Mission

To Companion the End-of-Life Journey with Skill and Compassion



Central Wyoming Hospice and Transitions Program

Serving Natrona County, Douglas and Glenrock area





END OF LIFE HOW TO START THE CONVERSATION?

Go to [cwHP.org](http://cwHP.org/resources/end-of-life-how-to-start-the-conversation/) and click on Resources. (<http://cwHP.org/resources/end-of-life-how-to-start-the-conversation/>)

MISSED PAST ISSUES OF HOSPICE HAPPENINGS?

Go to [cwHP.org](http://cwHP.org/resources/newsletters/) and click on Resources. (<http://cwHP.org/resources/newsletters/>)

CORRECTION

A resource for an article in our last newsletter stating Dr. Wells, our featured physician, graduated with high honors, should instead read that she graduated in 1995 from a competitive medical program at SUNY-Stonybrook before relocating to the UW Family Medicine residency.

Heuer works at Mesa Primary Care, Casper, but also works with Wyoming Medical Center one day a week in the Clinical Decision Unit (CDU)—a short stay area for quicker diagnosing. She can circumvent the emergency department and admit patients to the CDU if she sees a patient during her practice needing this service.

She also spoke of palliative care. Heuer has been involved in discussions with the clinic’s medical director about providing this service. (A recent Wyoming legislative bill created a State Palliative Care Advisory Council.)

Future goals? “My husband keeps saying ‘You’re going to go back and get your Ph.D,’ but I don’t know...” said Heuer.

CWHTP thanks Loura Heuer E.N.P. for her dedication in caring for our hospice patients. 

from the DIRECTOR'S Desk

by Kilty Brown, RN
Executive Director



Happy New Year!!

2017 was a monumental year for the Central Wyoming Hospice Program. Hospice experienced its largest period of growth in the organization’s history: we admitted 382 patients to hospice services, provided care during 12,099 days of patient service, grew our Transitions and Respite programs, and had a record year for the Memory Lane Boutique.

What does all that mean? It means that 21 more patients than last year were given the opportunity to live their last days in comfort, and with dignity, as they faced one of life’s hardest moments with love, support, and compassion in the care of our staff. Through the Transitions & Respite programs, 105 families had extra support with a chronically ill loved one. And with the success of the Boutique, we were able to provide care for patients unable to pay for an inpatient stay. That is an incredible impact on our community!

We aim to increase this impact in 2018. My personal motto for the year is “Best for Patients, Best for Staff, Best for Community.” It is a reminder to myself of why I feel so privileged to work at Central Wyoming Hospice & Transitions. Beyond a doubt, I love the fact that our number one focus is on what is best and right for our patients and families. That’s what makes this place so special. That’s why our nurses and aides provide such compassionate, loving care. It’s who we are.

To achieve this vision in 2018, we’re looking at how to better serve current patients and how to provide compassionate care to more individuals in our community.

Our first priority will be to expand support to our outpatient families by creating a Crisis Care team whose sole job is to provide that extra daily support in the home in the last days. We recognize how much our families need us during those crucial moments. Next, we plan to expand our reach by partnering with churches, businesses, and doctors to spread the message that hospice is about bringing quality of life to the last months of a person’s life. As more people understand the purpose of hospice, they will realize the positive impact we can make the sooner we are involved in providing care. Finally, with the addition of a part-time staff member to the Transitions team, we hope to grow our outreach in the community by supporting more Transitions clients.

This is going to be an exciting year for CWHTP. I invite you to be a part of this journey and make an impact in 2018! Follow us on Facebook, donate your time with a transitions client, or just stop by to see what we are doing and get answers to your questions! 



WANT TO HAVE FUN?

BY KRISTEEN TERZICH, TRANSITIONS COORDINATOR

I love to sit out in nature. It calms and refreshes my soul with the magnitude of life in a natural environment. I watch bees stroke each flower and pick the sweetest nectar to take back to their hive, sharing a little of where they have been, yet nurturing the flower and helping the plant thrive. The benefits are mutual. The bee can't change how long that flower will bloom, but will nourish the flower during that season.

A volunteer is like the bee. A volunteer receives as much joy and laughter as they give—nurturing and helping another person to thrive where they live.

Our volunteers are the non-medical side of hospice. They leave the medical burden to the nurses and do the fun stuff! Yes, I said, "FUN STUFF!"

"Fun Stuff" might be recording life history for the family, or going on the fishing excursion that the patient hasn't been able to do because of weakness and his frustration with the inability to tie a fishing line, "cause these ole' fingers just aren't working." Or perhaps it will be cooking together or learning a new recipe. (You know when your fabulous grandmother wrote hers down, it was a pinch and a toss and not a ¼ teaspoon!)

Caregivers struggle with many issues. There may be the son who visits a sick parent as often as he can, but works out of town and his mother has fallen a couple of times, and is not eating because she feels too weak to cook. Often there is 24 hour care required for a loved one that leaves little time for the caregiver to rest. There may be a need to have someone stay with a loved one while errands are run.

Do you have an hour to stay with their beloved so they can sleep deeply without keeping an ear open to the family member who may need a watchful eye? Or to relieve a mother who desperately needs time for herself, in the midst of scheduling, juggling finances, transporting children and supporting her beloved who is moving on to this world's final destination, so much sooner than ever anticipated? Or to make a new friend?

We need you. You may gift an hour or two weekly, biweekly, or monthly, if that's all your schedule allows. Volunteers can fill incredible needs for people at the worst times of their lives.

Our Transitions Program has the honor of placing volunteers with a family while they are still able to receive treatments. If the time comes for hospice, and they choose Central Wyoming Hospice, the volunteer may remain with them as that friendly, familiar face.

The vision for Transitions in 2018 is to provide more respite time for the caregiver. We look forward to training as many people as we can in the hospice philosophy in order to accommodate the expansive and varied requests for volunteer assistance.

Volunteer requests that are unfulfilled right now are for cooking, companionship, respite, transportation to a grocery store, light dusting, and fishing. (Besides doing it for yourself, this is an excellent reason to go fishing for an afternoon.)

There is truth in the proverb: "The burden is light when the hands are many." Volunteers are the heart of Central Wyoming Hospice and Transitions.

If interested in learning more about volunteering in the hospice or Transitions Program at CWHTP, please call 307-577-4832. 



SPRING GRIEF SUPPORT GROUP

Spring Grief Support Group is a support group for those adults grieving the loss of a loved one. This group provides a safe and supportive place to share your grief experiences and learn coping strategies. This group is offered to the public at no charge and will be facilitated by Bereavement Coordinator, Todd von Gunten. Light snacks and drinks provided.

The group will meet on Tuesdays, 5:30 to 7:00 PM from April 11 to May 16th. Call 577-4832 and ask for Todd Von Gunten.

WE'LL PICK UP

CWHTP is offering a weekend pickup service for gently used items being donated to our Memory Lane Boutique. Please call 577-4832 if you would like more information.



Memory Lane Boutique, located in the CWHTP Resource Building at 319 S Wilson, featuring new and gently used items whose purchase benefits hospice patients, inspired some volunteers to re purpose tea pots. If anyone has more ideas on what and how to re purpose items for the gift shop, call 577-4832 and ask for Dixie Bedsaul.

CWHP ONLINE

Visit our website at:
www.cwhp.org

or

our Facebook page at:
[www.facebook.com/
centralwyominghospice](http://www.facebook.com/centralwyominghospice)
(or just search Central
Wyoming Hospice
under groups on
Facebook) to learn
more about us, and
find information
on job or volunteer
opportunities, and
more happenings at
hospice.

*"Grief never ends...
but it changes. It's a
passage, not a place
to stay. Grief is not a
sign of weakness, nor
a lack of faith...it is
the price of love.*

~Author Unknown

GUS, A HOSPICE DOG



Gus poses with Karen McGowan. Together, they have volunteered at Hospice for seven years.

Karen McGowan and her husband weren't planning to pay for their next dog. But on impulse they stopped at a pet store. Her husband picked up a Labradoodle puppy—a cross between a Labrador and Standard Poodle. The puppy licked his face in greeting, and they walked out of the store, owners of Gus. That was thirteen years ago.

"He was my inspiration to volunteer here (at CWHTP)," said Karen. Gus became a hospice volunteer as well. Together they have been volunteering at inpatient hospice for seven years. But now Gus is dealing with his own end of life issues.

"He's very outgoing yet mellow in manner," said Karen about Gus. "He really enjoys people. He'll come up and lean against someone, not heavily, to say 'I'm here.' Or if there's someone he really likes and wants attention from

he'll put his paw up on a knee." Gus is also big enough that he can sit at a bedside, and put a paw out to the patient in comfort and greeting.

A friend first suggested Gus become a therapy dog. Karen discovered that Therapy Dogs Inc. in Cheyenne certifies dogs for therapy. Though Gus had not attended classes, "we went directly to test mode and he passed with flying colors," said McGowan. She brings Gus to CWHTP inpatients and staff one morning a week, to comfort and encourage.

McGowan also has her own non-profit business called Ingles, tutoring English as a second language. "We have 45 students now and 25 tutors," she said.

Visiting various staff members, Gus's first act upon arriving, earns him petting, hugs and treats. "He's therapeutic," said the staff. Studies show touching a dog can lower blood pressure and release endorphins that cause a "feel good" reaction and may decrease amount of medications needed for some conditions.

For the staff, providing a break from doing the business of hospice and caring for others, is Gus, with his gentle nature and wiry, thick coat of hair covering a head that begs to be petted. For the patients and their families, providing a comforting break from the business of dealing with end of life issues, is Gus.

"A lot of time he's working with the families," said McGowan. "When he comes into a room, everybody's face lights up. It gives them a break and they tell me stories about their dogs."



Teresa Davis RN, Director of Clinical Services, hugs Gus, the Hospice dog.

Gus enjoys his "work." When hospice visiting day arrives, Gus jumps into the car and sits upright in the front seat, whether Karen mentions where they are going or not. If not going to hospice, he crawls into the backseat and lays down. "Somehow he just knows he's coming here," said McGowan.

McGowan also looks forward to visiting day. "I come away feeling good when I meet a family who is really stressed, and by the time we leave, they are a lot more relaxed. That makes me feel really good. I really enjoy meeting a lot of these people, whether family or patients. I've heard some good



Gus enjoys his visits with CWHTP staff as much as they enjoy and benefit from their visit with him.

*L to R: Lisa Keith,
Janeira Hart, Charlotte West,
Casey Cook.*



Gus offers a paw in greeting to a hospice patient.

stories—about their life history or Wyoming...Many times, patients don't have any family in town. I can give feedback to the nurses on how the patient is doing," she said.

McGowan has volunteered in various ways at hospice. She has done data entry, sat vigil with patients, and helped at Kid's Camp, which she said was "a lot of fun."

But Gus, a hospice dog, is now eligible for hospice himself. In August of 2017 he went into heart failure. He was rushed to the Veterinary Teaching Hospital of Colorado State University in Fort Collins, CO with 12-24 hours to live. Stabilized and placed on five different medications he now takes daily, he was given 3-6 months.

It is evident that Gus's condition is taking its toll on him. But he continues his volunteering. "He loves coming here so much, I'll keep bringing him until he can't do it," said McGowan. And we know that is the way Gus wants it. 



Robin Lake, Carol Bowers and Kim Thompson holding their balloons containing messages to loved ones, pose by the Tree of Love in the Chapman home December 3rd at the Tree Lighting Ceremony. The tree holds personalized ornaments decorated in memory or honor of loved ones. Memorials given at this time provide resources needed to provide hospice care to our community. Approximately 150 balloons lifted off with vigor as sudden appearing gusty winds bore them away at release time.

WISH LIST

OFFICE SUPPLY/ ADMIN

- Post it Notes
- Business Source White Labels (21050)
- 20 Weight copy paper
- Bottled Water
- Postage Stamps (First Class)
- Phone Message Book
- Card Stock (all colors)
- Letter size envelopes
- AA and AAA batteries
- Wall hanging hooks
- Rubber Bands
- White Out Tape
- Fine Lined Sharpies/Markers/Colored Highlighters

- Tile foam cleaner
- Mr. Clean (gain)
- Febreze Fabrick spray
- Furniture Polish
- Packing Tape
- Barbeque Grill
- Orange citric hand soap
- Baby Monitors

PATIENT CARE

- Distilled Water
- Baby wipes
- Tide Free HE Liquid detergent
- Moisturizers (Gold-Bond, Nivea or Vaseline Intensive Care)
- Essential Oils in the following scents:
 - Lavender

KITCHEN SUPPLIES

- Dish Soap
- Hand Soap (Antibacterial)
- Hand Sanitizer
- Paper Plates
- Disposable cups
- Boost/Ensure
- Coffee (Reg/Decaf)
- All sizes of Sealable plastic bags
- Pudding & fruit cups
- Kitchen knives
- Bendable Straws
- Crock Pot Liners
- Kitchen towels and dish cloths

- Lemongrass
- Lemon Peppermint
- Ginger
- Sandal wood
- Marjoram
- Chamomile
- Ylang-Ylang
- Fractional coconut oil
- Deep Blue rub
- Room humidifiers
- iTunes gift cards
- Liquid moisturizing bath soap
- Itch reducing lotion and soaps
- Colored Pencils
- Aromatherapy oil diffusers
- Adult coloring books

GENERAL SUPPLY ITEMS

- Paper goods - towels/ Kleenex/toilet paper
- Trash bags (all sizes)
- Kitchen shears/scissors
- Cleaning supplies

MAINTENANCE YARD

- Weed Killer
- Solar Naturals Salt



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Memory Lane Boutique

WISH LIST

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