



# Bruce Peninsula Hospice Newsletter

The past few months have been a very exciting time for Bruce Peninsula Hospice. The highlight, of course, was participating for the first time in the Hike for Hospice event on May 5, 2013. Have you heard the latest? We have now raised in EXCESS of \$20,000 on the one day event. It was a team effort and huge thanks go to ALL who participated. Whether you put a team together, walked on your own, made a personal donation or assisted with the organization of the event YOU played a huge role in its success.

**THANK YOU!!**



In May, we received a Community Foundation Grant AND we were also informed that we will be Caframo's charity of the year. On the same day we were informed by RBC Wiarton that we will be receiving proceeds from their BBQ. WOW!!!

So, you may ask, why are we suddenly receiving so much attention? Well, I believe that there are a few reasons. First, Nancy Forgrave, our Manager of Volunteers and Outreach Programs, has worked hard to raise our profile in the community. She has exposed all of us to new ideas and has provided huge support to the volunteers wishing to implement changes. Her constant smile and her energy are contagious! Thank you so much, Nancy!

However, once again, this is a team effort. Mary Winn Daykin, secretary of the Board of Directors, has ensured that we have had quality articles in the local papers on a very regular basis. The Community Education Committee, under the guidance of Alice Hatt and Blair Flood have produced new brochures and an amazing portable banner that has been seen around the community. They were also responsible for the eye-catching window display at the Echo office. The Bereavement Committee, chaired by Val Kurck, has been innovative in creating new and exciting programs. We currently have active bereavement groups in both Lion's Head and Wiarton. The Volunteer Committee, for the first time, has reached out to youth and we are hopeful that some young people will be taking the Fundamentals course next year. They also ensured that FIVE of our volunteers have received very deserving awards. Thanks go to Carol Beggs and Barb Lavigne for their leadership on the Volunteer Committee. Of course, our Accreditation Committee, under the watchful guidance of Sheila McLaughlin has long been a source of pride. It has required huge effort to both achieve and maintain Level II HPCO Accreditation. As Sheila moves on to other things we thank her for her hard work and the huge influence she has had on BP Hospice. Sheila....THANK YOU...you will be missed!

Our memorial donations have also increased by a significant amount this year. The families are so grateful to the client care volunteers and coordinators. Many of the participants in the Hike were the family members of former clients. I was overwhelmed with the stories they shared and just how much they appreciated the 'front line' volunteers. YOU are the ones who make the difference and YOU are the ones that we count on most. YOU are what Bruce Peninsula Hospice is all about. Without your skill, knowledge, compassion and humour, we would not exist.

We will be reviewing our strategic plan again in the fall. In some ways, it may feel like we will be creating a new one instead of reviewing a current one. We have achieved so much in the last few months that the possibilities now seem endless.

Board Members, Committee Members, Client Care Coordinators, Client Care Volunteers and Office Volunteers.... I extend sincere thanks to ALL of you for your hard work and dedication to Bruce Peninsula Hospice. I hope all of you find some time to relax this summer and enjoy time with family and friends.

Pat Cavan, Chair, Board of Directors

# HIKE FOR HOSPICE MAY 5, 2013



THANK YOU TO EACH AND EVERYONE WHO VOLUNTEERED, HIKED, AND PLEDGED THEIR SUPPORT TO MAKE THE DAY A HUGE SUCCESS.



### Report on 8th Annual Educational Conference on Palliative and End of Life Care - April 2013

by Janice Sim

On April 26, 2013, three members of Bruce Peninsula Hospice attended the Caregiver Exposure to Death and Dying conference held at the Holiday Inn in Markham, Ont. Elaine Bell, Mary Busey and Janice Sim spent the day listening to presentations from various professionals in the field of palliative care.

First was an address from Dr. Shane Sinclair from Calgary who stressed the importance of advance care planning and having end of life discussions with family and friends so that death is expected and accepted rather than feared.

Next was a panel presentation entitled - *The final hours at the bedside - helping the dying*. Carrie Anne Morton gave a patient's perspective. She is now 41 and has faced death numerous times in her life after being diagnosed with Cystic Fibrosis at six months. She survived a double lung transplant and will eventually need a kidney transplant.

The two other panel members were from the Palliative Care Unit of St Michael's hospital. Jonathan Fetros, Manager of the Palliative Care Unit spoke about the kind of care their patients receive at St Mike's. This ranges from control of symptoms through medication, encouragement of family and pet presence, massage and music therapy, hugs and hand holding from staff and volunteers. They use a technique of bedside reporting at this unit where staff, family and the patient are all involved in what is included in the patient's record. It is felt that this is a more accurate reflection of conditions than having input from staff only. This idea raised a lot of interest and questions from the PSW's and Nurses at the conference as to the merits and drawbacks that bedside reporting would present in their facilities.

The third panel member was Bill Wade, who is the Nurse Coordinator for St Michael's Palliative Care unit. As well as making sure the patient is well cared for, he also works with a patient's family to make sure questions are answered and the family knows what to expect in the final hours. Families are also given assistance with funeral planning and bereavement follow up.

After lunch, Dr Fran Brunger, a medical anthropologist from Memorial University in St. John's Newfoundland gave an interesting talk on the dilemma of different cultures and beliefs clashing with what is generally considered ethical and legal. Dr. Brunger stressed the need for a diverse staff, well trained in understanding cultural needs and able to explain situations and procedures to the patient and their family.

The final address was from Dr. Brian Berger who is the Physician Leader, Rehab and Palliative Care, Mackenzie Health Hospital in Richmond Hill. He shared six stories of deaths that had made a lasting impression on him. By the time he was finished I'm sure all the conference attendees had a lump in their throat or a tear in their eye. **He summed up our work as listening, caring, comforting and remembering and loving our fellow human beings as they face the end of life.**

I am very grateful that I was able to attend this conference and especially thank Bev Ker for arranging transportation and accommodation for the three of us. It was a day of learning and socializing with others who have similar interests and common goals.

## Outstanding Volunteer Awards



Carol Beggs was nominated by our Hospice to receive the June Callwood Circle of Outstanding Hospice Volunteers at the 2013 ceremonies during the Annual General Meeting of the Hospice Palliative Care Ontario in April.

Helen Westover and David Barton were nominated to receive Outstanding Volunteer awards for 2013. On Thursday June 20th, the Council of the Town of South Bruce Peninsula hosted a BBQ to celebrate our community volunteers and presented their awards. Numerous hospice volunteers gathered at the Warton District Community Centre to show our support for Helen and David and to celebrate together.



Lynn Bardwell, David Barton and Rosemary Lamond also received special recognition by the Province of Ontario for 5 years of voluntary service with BPH.

**CONGRATULATIONS TO OUR DEDICATED VOLUNTEERS**

---

Those of you who have had the privilege of accompanying people in distress and inner pain know that it is not easy to walk with them, without having any answers to their problems or solution to their pain. For many people in pain there is no solution; for a mother who has just lost her child or for a woman who has just been abandoned by her husband, there is no answer, there is just pain.

What they need is a friend willing to walk with them in all that pain. They do not need someone to tell them to try to forget the pain, because they won't. It is too deep. When a child has experienced rejection, you can say all sorts of nice things to the child, but that will not take away the pain. It will take a long time for that pain to diminish and it will probably never completely disappear.

--- Jean Vanier, *From Brokenness to Community*, p.16

### Active Spring for Speakers' Bureau

We are most pleased with the successes of The Bruce Peninsula Hospice Speakers' Bureau. Since our last newsletter, we've had the pleasure of addressing the Wiarnton chapter of Retired Women Teachers, and the Wiarnton Rotary Club members. We were also pleased to discuss our hospice services with the North Bruce Community Mental Health Team. As well, speakers were invited to a speak to the Sauble and Wiarnton Sandpipers.

With Advance Care Planning Week recently (perhaps you saw our display at the Wiarnton Foodland, or in the Wiarnton Hospital entry), we were honoured with an invitation to speak again with the Wiarnton Sandpipers in a workshop about this particular subject. On this second occasion we were joined by Marie Palmer, Consultant, Matters of Living and Dying. Topics included the difference between health care "wishes" and health care "consent", and the importance of having conversations about your personal values, and wishes for your care, with your family, loved ones, and substitute decision maker(s).

If your social, community service, or professional group might benefit from learning more about Bruce Peninsula Hospice, we would be pleased to arrange for a speaker to attend an upcoming meeting. We can provide general information about Bruce Peninsula Hospice and our services, or a presentation can be geared to a related/specific topic, as was the case with this recent workshop on Advance Care Planning matters. Please contact our office.

#### **WIARTON RBC STAFF BBQ RAISES \$515. FOR BRUCE PENINSULA HOSPICE**

Staff members at the Wiarnton RBC Branch were busy June 26, 2013 serving up hotdogs on our behalf and they raised a whopping \$515.00 over the lunch hour to benefit Bruce Peninsula Hospice! Alice Hatt helped out with the cooking and David Barton and Mary Busey were on hand to talk with customers and we are very grateful to everyone who stopped by, made a donation for a hot dog and to RBC staff for organizing and helping out with the event. It was fun!



Mary Busey enjoyed one the of the delicious hot dogs.

David Barton with RBC staff member, Debbie Good



**Headstone in Ireland**  
*Death leaves a heartache  
no one can heal, love  
leaves a memory no one  
can steal.*

*"It is good to have  
an end to journey toward;  
but it is the journey  
that matters in the end."*  
--- Ursula LeGuin, author

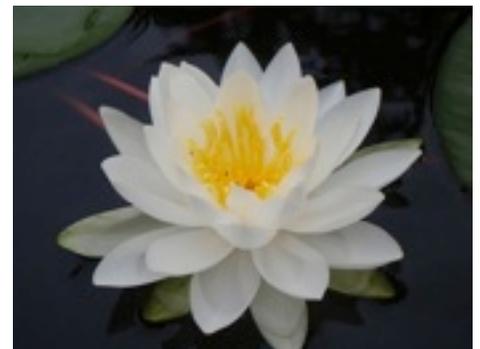
**BPH Inc. STATISTICS  
Volunteers and Clients  
Summary for 2012 - 13 Fiscal Year**

49 Clients were served  
502 Visits and Phone Visits  
737 hours in client visits +193 hours in Travel Time  
9624 km in client visits  
1817 hours for Administration and Committee meetings  
507 hours for Education  
506 hours of Travel Time for meetings and education  
23,530 km were travelled for meetings and education

Average of 13 clients per month  
Average location Hospital 2  
LTC 6  
Home 5

**CONDOLENCES  
TO OUR VOLUNTEERS  
UPON DEATHS OF LOVED ONES**

Helen - Uncle  
Bev - Brother-in-law  
Sally - Sister  
David - Son-in-law  
MaryWinn - Aunt



**We Remember...**

Lasting tribute gifts to Bruce Peninsula Hospice were made this year in loving memory of:

Rena Fleming

Lorraine MacIntosh

Wilhemine Munn

Winnifred Schmidt

Nancy Scott

Clare Gibson



**LET'S TALK ABOUT DEMENTIA**

At our April Volunteer Support meeting, Sandra Hong, Public Education Coordinator for the Alzheimer's Society, spoke to us about the impact the environs of the patient have and how we can change some to help them.

**COMMUNICATION**

- \* A person with dementia relies on Communication to guide them through their day. But 85% of their comprehension of the message is non-verbal.
- \* Be quiet, positive, kind, and friendly.
- \*Communication is the caregiver's responsibility: pause to connect; allow the person to feel successful.
- \* Strategies to Enhance Communication: 1.) one person speaks at a time; 2.) genuine contact; 3.) introduce yourself; 4.) use their name; 5.) speak slowly and clearly in a soft calm tone; 6.) use simple language with familiar words; 7.) visually demonstrate what you are saying; 8.) speak to the person as an adult; 9.) gently touch if appropriate and with permission; 10.) avoid arguing, confrontations, and quizzing (What did you do, etc.); 11.) use humour, music, rhythm, exercise and pets; 12.) minimize distractions as best you can.

**AND, NEVER GIVE UP.**

Dear BPH Colleagues

It is a special honour for me to be this year's recipient of the June Callwood Award. That recognition really belongs to each of us. As a volunteer group we encourage innovation and share skills that are the foundation of service to our community. We give respect, compassion and love generously to our clients and to each other. My contribution is a reflection of our values and your support of my efforts to be a meaningful volunteer.

Thank you and thank you again

Carol Beggs

### On the topic of Depression, Dr. Geoff Daniel

- Cautions that although the person may be exhibiting depression symptoms there could be another reason for the behaviour. It is important that urine tests be completed to rule out other disorders. Depression and Alzheimer's are often misread as their symptoms can also be something else or reflect each other.
- Depression which lasts six months may be an adjustment disorder as someone copes with a change in their life or is going through bereavement stages. Depressions symptoms longer than six months need to be evaluated by the doctor.
- Depression may not be treated if there is evidence of substance abuse (alcohol & prescription drugs most common) marital or family discord, a personality disorder, existential demoralization, delirium, dementia, incorrect diagnosis, poor adherence
- Three Ds of the older adult are dementia, delirium and depression
- When working with a client with depression:

Help the client to tell their story, only the client can write their story. Depression is not normal for older adults. Recognizing our own feelings of apathy, hopelessness, grief or denial of our own needs helps to have a balance in life and to keep on learning. Check out our own thoughts and feelings about mental illness. Just being there, listening to our clients, being calm and showing compassion can be helpful.



### Book list for Depression

- Late Life Depression by Patrick Mathiasen and Suzanne LaVert, 1999 used books available on amazon --
- Aging & Mental Health by Michael Smyer and Sara Qualls, 1999 and 2010 A --
- Getting Old Without Getting Anxious by Peter Rabins & Lynn Lauber, 2005 A --
- Living Longer Depression Free by Mark Miller and Charles Reynolds 2002 - --
- Over the Boards: The Ron Ellis Story by Ron Ellis 2002 - used A --
- Depression: What Families Should Know by Elaine Shimberg 1991 - --
- How to Cope with Mental Illness in Your Family by Diane Mars and Rex Dickens 1998 - --
- Caring for Adults with Mental Health Problems edited by I Peate & S Chelvanayagam 2006 - used A --
- Family Caregiving in Mental Illness by Harriet Lefley 1996 - --
- The Older Adult Psychotherapy Treatment Planner by Deborah Frazer & Arthur Jongsma 1999 - --
- not available at Amazon  
-- not available through Chapters

## BOOK REVIEW by Sally Gibson

**Embracing The End of Life – Help for Those Who Accompany the Dying**

By Michelle O'Rourke & Eugene Dufour, 2012, Novalis Publishing Inc.

This is an informative, refreshing read as we, as care partners, provide the care, comfort, and support to those who are on their final leg of life's journey and enable them to die with dignity. This book reinforces what Bruce Peninsula Hospice Volunteers learn and practise.

The reflection questions at the end of each chapter enable the reader to examine their own feelings and beliefs in regard to their own mortality and the journey they take as a care partner. They are great for prompting discussions about dying and death which still, in this modern age, are ignored by many as it is still a death defying culture. Several examples and quotes are scattered throughout the book to give the reader a dose of reality as well as think about the situations they may find themselves in as care partners. Each one is valuable as an introduction to a discussion about death.

I especially liked this book as it was not filled with medical jargon. I did, however, learn a new word: **cachexia**. **Cachexia** is a syndrome characterized by weight loss, muscle wasting, fatigue and significant loss of appetite. The loss of body mass is associated with cancer, HIV/AIDS and other severe chronic illnesses and cannot be reversed nutritionally despite an increase in calorie intake.

Henri Nouwen states: *It seems indeed important that we face death before we are in any real danger of dying and reflect on our mortality before all our conscious and unconscious energy is directed to the struggle to survive. It is important to be prepared for death, very important; but if we start thinking about it only when we are terminally ill our reflections will not give us the support we need.* P.37

Each person is unique. Each person is an individual. Each journey is special. The book stresses often the three R's of Caring:

- R**ecognize - identify the specific issue that needs to be addressed
- R**espect – the wishes and beliefs of the person and family
- R**espond – determine the plan of care together and evaluate often

It is important to be part of the team. The greatest gift can be that of **presence**. It is important from time to time to just “**be**” and not always “**do**”, to simply listen and not necessarily respond...silence is okay.



*It simply comes down sooner or later  
To how comfortable you are  
With yourself,  
With others, and with the whole idea of dying and grief  
Because working with the elderly,  
The dying and the bereaved  
Often involves more  
Being than doing*

----- Source unknown p.124



**Fairs and Fun**



- BPH participated in the Health Fair on Saturday, March 16, 2013 at the Bayshore, Owen Sound. Dee Burnlees reported that there was lots of interest in our booth this year. She and Carol Beggs handed out many booklets at the well attended event.

- On March 27th, Carol Beggs and Alice Hatt managed our display for the Caregiver's Day event at the Stonetree, Owen Sound.

- BPH also attended the Senior's Fair on June 12, 2013, at the Bayshore, Owen Sound with Irene Thomas and Alice Hatt looking after this booth. The Fair was very well attended with lots of activities going on during the whole time. Fifty Power of Attorney for Personal Care booklets, and Fifty Advance Care Planning booklets were handed out. With media attention on the Residential Hospice in Owen Sound, the public is now more aware of hospice. They are asking questions and generally more interested in taking the time to stop and talk.

**ETHIOPIAN RED LENTIL SALAD - Serves 4 to 6**

- 1 lb. red lentils (2 cups)
- 3 scallions, julienned
- 1 red bell pepper, julienned
- 2 jalapenos, seeded
- 1/3 cup red-wine vinegar
- 1/4 cup olive oil
- Coarse salt & freshly ground pepper

Cook lentils in boiling salted water for about 6 minutes, until just tender.  
 Drain and cool immediately, rinsing under cold running water.  
 Combine scallions, red pepper, jalapenos, vinegar and oil.  
 Toss lentils with dressing, seasoning with salt and pepper to taste.

*- shared by Carol Beggs*

The new pop-up banner we purchased this year has also given us a larger view in the public's eye. It was nicely designed and full of colour; a great asset for our public venues.

Thank you to everyone who helps with these booths to bring our voices to the people.

- Alice

