To Everything There is a Time and Purpose

Timing is often everything. We often experience success due to good timing and missed opportunity due to bad timing. And while every decision that we each face may not hold even weight, we all know that sometimes, for multiple reasons, we choose not to decide at all, letting time pass as if nothing truly mattered. This summer newsletter is focused on timing in two very different realms: the right time to choose hospice care and making time for preventative health care.

There is an unfortunate phenomenon that is happening today in healthcare. While some individuals are choosing to utilize hospice care at the end of life, many are doing so at such an advanced state of illness that they truly have little to no time to experience the benefit that this transition can bring. And in preventative care, we also often do not make timely decisions. Despite being a very educated society regarding our health, many individuals walk around, possibly ignoring some health signs and symptoms, and often having very abnormal blood glucose or blood pressure levels.

While we may not always be ready for what life has in store, timing truly can be essential for a better quality of life. At every stage, the right timing to our decision-making can lead to prevention of further illness, allow for modification of our lifestyle so that we can control a risk before it controls us, or give us relief as opposed to suffering and fear. These healthcare concerns are addressed in this issue of the Farmington Valley VNA newsletter. It is my hope that each of you will spend time and reflect on your own sense of “right timing”.

“Time is an illusion. Timing is an art.”
- Stefan Emunds

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From the Desk of Nancy Scheet, Executive Director
Hospice: Hope Redefined

It is wonderful that we so value life, family, and the simple act of just being alive that we do all we can to protect our place here. Even when very ill, we seek yet one more trial medication, seek out another specialist or try holistic means to keep us engaged in this world that we so love. To mention hospice often suggests defeat: that the towel is thrown in, the end is inevitable, and we are being ushered out. What we often do not just stop to consider is that there will be an end, some day. And that some day comes at different times for us each.

When all medical efforts have ceased to work, what then? How do we avoid pain, seek comfort, and provide solace for our family?

Hospice is a model of care for people approaching the end of life. It promotes patient- and family-centered care and aims to maximize patients’ quality of life. Hospice care is appropriate when the stage of an illness suggests that there is no longer a hope for a cure. It is focused on quality, not quantity of life. When chosen at the right time it can often lead to an improved quality of life with less pain and medical intrusions. A New England Journal of Medicine study in 2010 found that with earlier referral to a hospice program, patients may receive care that results in better management of symptoms, leading to stabilization of their condition and many times even prolonging survival. The study added to the body of evidence that many patients live longer with hospice with far less pain and discomfort. Hospice services are an underutilized resource in the United States and often utilized too late. In a report done by the National Hospice and Palliative Care Organization (NHPCO) in 2008, approximately 38% of those who died were enrolled in hospice prior to death. Among those who did enroll, the median hospice length of stay was 21 days; 35% of those enrolled were only on service for seven days or less. The medical world today is vast with options for treating illnesses in the hopes of not only curing disease, but also for prolonging life. However, there comes a time when treatment does not have the capacity to overcome the disease. Hospice services provide the needed support to the patient and the family.

How many patients could have avoided pain, perhaps endless chemo or artificial means of respiration or nutrition, and whose families would have benefited from the physical and emotional support provided by hospice nurses and staff?

One of a multitude of misconceptions regarding hospice care is that it hastens death. This makes people unwilling to consider it as an option for care. In a New York Times article in 2009, past president of NHPCO, David Schumacher, identified that America is a death-denying society, much more than others. We are always wanting to succeed, to overcome even death, even when it is not possible. Choosing hospice care is not about giving up hope; it is about redefining it.

"DYING CAN BE A PEACEFUL PROCESS WHEN SUPPLIED WITH INFORMATION, PATIENCE, TOOLS AND SUPPORT. THE PROCESS CAN BE A TIME OF SORROW BUT ALSO OF TRANSFORMATION, GROWTH, AND EVEN JOY FOR FAMILIES AS GOOD TIMES ARE REMEMBERED AND HONORED." - Dr. Anne Kenny, VNA Medical Director
Dr. Anne Kenny, 
Our New Medical Director

Dr. Anne Kenny has accepted the position of Medical Director of the FVVNA. Previously on the VNA Board of Directors, Dr. Kenny is a graduate of the University of Nebraska School of Medicine and did her residency and fellowship in geriatric medicine at the University of Connecticut. She has been a professor at UConn’s School of Medicine and is currently Professor Emerita and works in private practice. She is the author of “Making Tough Decisions about End-of-Life Care in Dementia.”

WELCOMING THREE NEW DIRECTORS TO Our Board

The VNA is pleased to announce the appointment of three new members to our Board of Directors:

Jeffrey Case, Senior Vice President, TDC Specialty Underwriters; Kathryn Katz, Registered Nurse, Cardiac Intensive Care, St. Francis/Trinity Health; and Derek Weiss, Deputy CIO and Vice President of Strategy and Partnerships, Cambia Health Solutions.

Consider a Bequest Gift

Leaving a legacy is an honor that continues to celebrate a life even long after one is gone. There is peace and purpose in knowing that your wishes to care for others can continue forever. Planned Gift Giving is a gift in your will or trust that will enable care for others who may not be able to afford to pay for health care. Would you consider The Farmington Valley VNA when thinking about your wishes? Please call us at (860) 651-3539 to inquire about putting the VNA in your will or trust.

“A Testimonial

Dear Friends at the VNA:
I just came home from an area convalescent home with cards full of pills and no real direction on what to do with them. I was in a panic. VNA Nurse Derek arrived and I sensed right about a thing. She sorted them out, put them in a neat pill tray for the week, and explained them to me. Then Physical Therapist Shelly arrived and again I knew I was in good hands. I am so relieved. I can do this! I can’t thank you enough.”
-Mr. M.
Since 1908, the Farmington Valley Visiting Nurse Association has been on doorsteps bringing quality care and compassion to every neighborhood. The only non-profit and independently owned agency, we are here regardless of ability to pay.

With Us, You Can Count On:

- Medicare Approval Achieving 4-Stars for Clinical Excellence
- Friendly, Dependable and Respectful Care, 24/365
- Successful Recovery: Proven best in the valley for preventing rehospitalizations
- Community Health Programs: Blood pressure and blood sugar checks, as well as immunizations
- Granby Food Banic: Providing nutritional needs for over 100 families
- LSVT Parkinson's physical and occupational therapies

YOUR HEALTH:

Early Free Screening Makes the Difference

In our last newsletter, we shared with you that The Farmington Valley VNA is now routinely performing Blood Glucose Monitoring Clinics in the community. We are thankful that the generous support of our area towns and the benevolence of our donors support these vital clinics. Our nurses are catching many results that if left untreated could lead to serious illness.

At the present time, there are 25 blood glucose testing clinics each month in the various valley towns. In the past year of testing, our community nurses have assessed and screened over 500 patients. Since the start of this calendar year, of the 229 tests that have been performed, 16% of the results were abnormal. The patients were completely unaware that they had dangerously high and, in a few instances, low blood glucose levels.

One story bears sharing. A patient that routinely is seen for both blood pressure and blood glucose monitoring was found to have a glucose level of 327. Glucose levels should be no more than 200. The individual received counseling and education by the nurse performing the assessment, in addition to having his physician notified. With a new diet and exercise plan, developed by our nurse in coordination with the patient's physician, and with repeat testing over the next 3 months, the patient's glucose levels went down to 194. The ability to impact patients' health is immeasurable. The value of prevention and early detection cannot be understated. Please: Join us at one of these free clinics. Find the best clinic time and place at www.farmingtonvalleynva.org/wp/events or calling us at 860-651-3539.