

LOOK HOMEWARD

*A publication for the supporters of
Visiting Nurse Health System*



Embracing Families
Excellent Care in Difficult Times



VISITING NURSE
HEALTH SYSTEM

INDUSTRY UPDATE

Hospice Care: A Decade of Change

Visiting Nurse Adapts to Remain on the Leading Edge of Hospice Care

Hospice has long been the model for quality and compassionate care for people facing a life-limiting illness or injury. It focuses on the belief that each of us has the right to die pain-free, with dignity and surrounded by loved ones.

This philosophy remains true today, but the reality of patients entering hospice and how care is delivered has changed over the past decade. One consequence of the remarkable advances in the treatment of diseases is patients coming to hospice much later in their disease progression. “Physicians often keep patients under their care longer, until all available therapies are exhausted,” says Rob Zachrich, Vice President of Operations and COO at Visiting Nurse Health System. “So when patients are referred to us, they are much more acute and their conditions further advanced.”


Fortunately, medical technology and clinical practice also have kept pace with the increasing complexity of needs among hospice patients. Radiation, once restricted to curative purposes,

is used now to provide pain relief by shrinking tumors. Certain procedures once requiring hospitalization – such as relieving excess fluids on the lungs or infusion therapies to regulate cardiac function – are now routinely delivered in the home, often by the patient’s family. Such advances greatly increase the tools available in hospice care, but they bring greater demand for clinical training. To meet that challenge, we are fortunate to have a highly qualified, forward thinking medical director of hospice services, Leena Dutta, M.D., leading this effort with our staff.

Although most hospice care is provided in the home, some patients’ needs are too complicated to be met there. Visiting Nurse is able to offer a higher level of hospice treatment by maintaining a

state-of-the-art inpatient facility, Hospice Atlanta Center, which can accommodate the most acute patients in a comfortable, home-like setting. “The patients can live out their final days at our facility, or they can be stabilized for an easier transition to the home,” says Zachrich.

Despite the changes in the industry, the goal of hospice remains the same. “Every patient knows how they want their journey to end, and we want to make sure those wishes are fulfilled,” says Zachrich. “We have the honor of treating the patient during the most important days of their life. How a patient lives their last few days and how they die is so meaningful to the patient and to their loved ones. It makes all the difference in the world for families and friends who are still on earth.” ■



Hospice focuses on the belief that each of us has the right to die pain-free, with dignity and surrounded by loved ones.

LETTER FROM THE PRESIDENT



Dear Friends,

I've watched the hospice industry change dramatically over the past decade. Awareness has grown and, with it, demand. This demand has been answered by a flood of new providers – over 100 in greater Atlanta alone.

Hospice providers are paid a fixed daily rate, independent of the actual costs of care. This financial reality is challenging for Visiting Nurse, due to our mission. We dedicate ourselves to providing care to anyone who needs it, regardless of the acuteness of their condition or their ability to pay. We often take hospice patients that other providers do not accept.

We tend to care for a higher number of more acute patients, so they require more resources to manage and they are with us for fewer days. Our average length of stay is less than half that of our competitors. A hard business reality in hospice care is that most expenses are incurred in the first and last days of care. Given fixed per diem reimbursement rates, we lose money on patients who have a short stay in our care.

In addition, many of our patients are under-insured. We act as a safety net in our community for terminally ill patients and their families. To add to these challenges, federal cuts to the Medicare budget are further squeezing finances, ironically at a time when hospice and home healthcare are seen as answers to rising healthcare costs.

Given these facts it is hardly surprising our hospice services operate at a deficit each year. Revenue from other parts of our business has historically subsidized our hospice services. Continuing reimbursement cuts in our home healthcare program are making this harder to do. To make up the rest of the shortfall, we rely on the donations of our generous supporters.

Please consider making a donation to enable us to keep providing services for all patients and their families who will benefit from them.

Sincerely,

A handwritten signature in black ink that reads "Mark Oshnock". The signature is written in a cursive, flowing style.

Mark Oshnock
President and CEO
Visiting Nurse Health System

Embracing Excellence

New Initiative Defines Quality in End-of-Life Care

Peggy Palmiter cared for her mother for several years on her own before they entered hospice care with Visiting Nurse Health System. The relief she experienced at that moment was immense. In ways large and small, her hospice team surrounded Peggy and her mother with care. Instead of spending hours each week at the drugstore, her mother's medications are delivered to Peggy's door weekly. When her mother required a hospital bed, the Visiting Nurse hospice team had it delivered immediately. "I am not exaggerating when I say I could not do this without the support I get from my hospice team," says Peggy. "The practical physical support—the day-to-day help with medications, providing care, teaching me what to expect—is huge."

The emotional support Peggy receives may be even more critical. She no longer feels alone and afraid. Instead, she has a compassionate partner to help her and her mother make this journey as peaceful and life-affirming as possible. "Everything they do is working toward a primary goal—Mother will not be in pain, she will not be afraid and she will not be alone," says Peggy. "My hospice team is making good on all those promises."

Peggy's experience with Visiting Nurse Health System's hospice services is typical in many ways. Again and again, families express their gratitude and tell stories of extraordinary support. Even so, we have asked ourselves if we could do even better. Although we are recognized as one of Atlanta's premiere hospice providers, Visiting Nurse is embarking on a program aimed at taking excellence to the next level.

Working with a leading consultant in the hospice industry, the goal of the initiative is to create a framework to ensure every patient gets the same excellent, caring experience every time. "Often the patient's experience is dependent on the health care professionals who are assigned," says Andrea Stevenson, interim executive director of hospice services. "One might be stellar in one aspect of care, while another may be exemplary in a different area. We certainly recognize that every patient is unique and every situation is different, but we want to make sure that beneath the individual strengths of our clinicians is a common core of excellence."



□ Dr. Leena Dutta

To ensure that consistency of experience, Visiting Nurse first had to define it. For example, what would the ideal nurse visit to a home hospice patient look like? What should an ideal social worker visit entail? What is the ideal admissions experience? "We are collecting the best ideas and best practices from many sources to create our ideals," says Leena Dutta, MD, hospice and palliative care medical director.

□ Nancy Mauldin



□ Andrea Stevenson



says Stevenson. “So now our case workers call on Thursday afternoon and make sure the patient has enough supplies to last through the weekend, see if they need a visit or have any concerns. Then on Monday they call back to see how the patient felt over the weekend.”

Creating that ideal has been comprehensive in scope. Every single facet of a patient’s and a family’s experience is being examined, from admission to bereavement, so we can provide an even higher level of care and support.

Defining the ideal goes beyond specifying the exact services to be delivered. We must also describe how they will be delivered. Everything from smiling to addressing bed-bound patients on their eye level is codified. “The style of care delivery and attitude are extremely important,” says Nancy Mauldin, Director of Hospice Services. “It starts before the visit. When the health care professional pulls up in the driveway, he or she needs to take a deep breath and erase everything else on his or her mind. The only focus and concern at that point needs to be that patient and that family.”

The improvement initiative also challenges Visiting Nurse staff to be proactive, solving issues before they even arise. For example, it is not unusual for hospice patients or their families to call over the weekends with a concern. “We thought, wouldn’t it be better if we call them first?”

From this defined core of excellence, hospice personnel will be able to customize their services to fit the needs of each specific patient and family. To aid in that customization, Visiting Nurse is creating a hospice menu of all possible services, from which patients and caregivers can then pick and choose what is right for them. “In the past, these types of decisions were often made by the case manager,” says Dutta. “But we want to empower the patient and the family to decide what services they would like to receive.”

At the center of the entire improvement initiative is the patient and the family. Every change, every improvement is designed to better serve all those touched by hospice care. “Frankly, that’s what hospice is all about,” says Dutta. “If you are coming into hospice, you are already scared. You’ve already been through the wringer with the healthcare system. When you come here, we want you to be able to relax and know we’ll take care of you and your family through the entire end-of-life process, and even beyond. We want hospice to be a warm embrace when you need it most.” ■

FEATURE

Sharing Our Unique Perspective

Courses Help Hospital Partners Better Serve End-of-Life Patients

Hospice professionals share a common belief that beauty and peace are possible in death. Among other healthcare professionals, this view is not as common. For those trained to preserve life, death is difficult to face and even harder to talk about.

To help ease this difficult conversation, Visiting Nurse began offering continuing education courses to its hospital partners to share a different way to look at the end of life. Most hospital nurses and discharge planners have attended generic Hospice 101 seminars on the practice of end of life care. “We wanted to go above and beyond that and offer something we think will make them better able to deal with end-of-life patients in a caring and meaningful way,” says Jenny Buckley, hospice transitions manager.

Two courses aimed at social workers, discharge planners and nurses were created. The first is “Having the Conversation of a Lifetime,” based on the book *Hard Choices for Loving People* by Hank Dunn. The course offers advice about how to have the difficult conversations that come with dying. How do you discuss someone’s wishes regarding resuscitation or rehospitalization? What are the patient’s thoughts about artificial hydration and nutrition? What does it mean to transition into hospice care?

“We discuss how to approach these difficult discussions in a way families can understand so they can make appropriate decisions,” says Jenny. “It has really appealed to social workers and discharge

□ Jenny Buckley



planners, many who never had any training in how to go about having these very emotional conversations.”

The second course, “The Four Stages of Hope,” discusses the role of hope in setting goals and accepting terminal illness. “The average medical person looks at hope as unrealistic,” says Jenny. “But hope is an important aspect of transitioning from one stage of the end-of-life process to another.”

Just like grief, hope has its own stages that are just as necessary in navigating a traumatic experience. “Hope helps people live through a seemingly dire situation,” says Jenny. “And people pass through four predictable stages: hope for a cure, hope for a treatment, hope for prolonging life and hope for a peaceful death. The power of hope makes each transition more bearable.”

Maggie Hughes, a medical oncology social worker at the Winship Cancer

□ Maggie Hughes



Institute, attended both courses. “They helped me realize you can filter a more positive light onto the dying experience,” she says, “not only for the family but also for the workers involved in the care.”

The courses gave Maggie a powerful tool in the form of a question—*what are you hoping for?*

She has asked that question many times since, and it allows her to meet her patients’ needs more effectively. Some patients want to be in their home. Some just want to be pain-free. One young man told Maggie he did not want to die in his home because he didn’t want his young children to associate the home with sadness. He wanted them to have only happy memories there, so Maggie was able to place him in an inpatient hospice unit. “I was able to honor his wishes, but I might have not even known what they were before the course taught me what and how to ask,” says Maggie. “I now realize you can look at death in the light of hope.”

Equipping professionals for these kinds of conversations gives them tools to be more effective in their jobs and, in turn, provide better care for their patients. These courses are yet another way Visiting Nurse improves the lives of those we serve—our patients *and* our partners. ■

Miracle Baby Nora Inspires All to Live Fully

Pediatric Patient Illuminates the Role of Hospice Care

“We’ve arranged for hospice care to help transition your baby home.”

These were the shocking words delivered to Jerry and Sara Chappell soon after their only child, Nora, was born with the genetic defect: Trisomy 13, a chromosomal abnormality. Born without eyes and with a heart defect, Nora’s median life expectancy was seven days. Yet Nora just celebrated her ten-month birthday thanks to her fighting spirit, the deep love of her parents, expert medical care by Northside Hospital and Children’s Healthcare of Atlanta, and aggressive symptom management and counseling by the Visiting Nurse pediatric hospice team.

Sara was initially resistant to Visiting Nurse Health System’s pediatric nurse specialist Lanise Shortell and social worker Stefanie Wirsch. To Sara they symbolized the end of Nora’s brief life, but as the projected seven days turned into weeks and then into months, Sara realized something else was happening. Nora was full of life, even starring in a video with her father playing an age-old game with her, swinging her up and down in the cradle of his arms. Nora was all smiles, giggles, and flailing arms and legs, just like every other child defying gravity for the first time.

As time passed, Nora’s courage and resolve changed everyone’s perspective on end-of-life care, and life in general. “Our attitude about hospice changed

too,” recalled Jerry. “Originally we saw it as a way to ease the transition to her death, but it became all about helping her live and thrive.”

Credit Lanise, Stefanie and the rest of the pediatric hospice team with changing perspectives. When one hears “pediatric hospice” it is easy to associate that term with sadness, tears, and heartbreak. “I think what makes our team so special is that we see this time as a gift,” said Lanise. “We don’t know how long the gift will last, but we will celebrate every second we have with joy and gratitude.” Stefanie takes the approach that all families are different and each family member has different responses to grief. “My goal is to help the family in whatever psychosocial

capacity I am able, whether that’s just listening and validating, or referring to resources, or helping with various applications, or dealing with health insurance headaches.”

Sara says she expected the hospice team to be somber but instead found them supportive and encouraging. “They have helped not only with Nora’s care but with prescriptions, supplies, insurance, and funeral arrangements. This gives me more time to simply love Nora.” Jerry agrees. “I can’t imagine how difficult things would be without hospice care.” With Nora’s miracle in mind, Sara’s experience with Visiting Nurse has inspired her to become active in online Trisomy 13 communities where she works to change other parents’ perceptions about managing a life-limiting illness and the role of hospice.

“Nora has become our inspiration for life,” said Jerry. He sums up what he has learned from his time with Nora. “Be thankful for every breath. Life is precious; take it as it comes rather than make it into something it is not.” He also put Nora’s miraculous life in perspective, adding, “It’s amazing the impact one chromosome can have on so many people.” While it is miraculous that Nora has exceeded her life expectancy by so many months, the real miracle is how a tragic diagnosis has been transformed into a family’s joy in living each moment fully. ■



■ Nora with parents Sara and Jerry Chappell

CARING VOICES

Hospice Experience Draws New Board Member

Dabney Hollis Found a Way to Give Back for Wonderful Care



The Lovett School and as board chair of Breakthrough Atlanta, an organization that promotes educational opportunities.

Despite this full load, Dabney didn't hesitate when she was asked to serve on the Visiting Nurse board. "My mother-in-law was cared for in her final days by Visiting Nurse," says Dabney. "I was so impressed and so moved by the experience that I am honored to serve on their board."

Dabney's mother-in-law, Jane Hollis, suffered for several years from an aggressive form of Alzheimer's when her health took a sharp decline requiring hospitalization. "It was clear we were losing her, but we had no idea what to do for her," says Dabney. "Jane had always been such an elegant, graceful woman. It was so hard to see her in this state."

A nurse told Dabney, her husband and her father-in-law about the hospice services of Visiting Nurse Health System, and they moved Jane to the Hospice Atlanta Center the next day. Dabney describes it as a freeing moment. Hospice nurses told the family what to expect every step of the way. Family and friends could gather in a comfortable, welcoming space. And Jane was at peace. "You could see in Jane's eyes that she was relieved—she didn't have tubes all over her and she wasn't in a sterile hospital room with beeping monitors," says Dabney.

"We knew this was the end of Jane's journey, but we felt like we had warm arms around us the entire time," continues Dabney. "The hospice staff took wonderful care of us, and they allowed Jane to live her last days as gracefully as she had all her others."

Dabney's experience is not unusual, nor is her desire to give back and support our mission. Many of our donors and volunteers have been inspired to contribute in similar ways. We are grateful to Dabney—and to all of those who give back—for ensuring that Visiting Nurse continues caring for other families in the same extraordinary way. ■

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Dabney Hollis, Board Member

A Labor of Love

Hospice Volunteers Knit Afghan for Fall Benefit Auction

Dot's Knitting Circle was formed in 2008 by long-time Hospice Atlanta Center volunteer, the late Dot Cohen. The group is comprised of volunteers who invite family members of patients to join them as a respite to pass the time, even if only in conversation.

Last spring, group member and professional knitter Lois Stifel suggested crocheting an afghan for the live auction held at the Visiting Nurse Health System fall benefit *In The Moment—A Celebration of Life*. An email was sent to the staff and volunteers inviting them to join the project, with a goal

of knitting 86 7" x 9" squares. As an incentive, a basket of yarn was offered as a prize to the person who made the most squares. The basket was earned

by Hospice Atlanta Center staffer Mary Stack who knitted ten squares. Over the next four months the group knitted 110 squares, 90 of which were selected

for the final 63" x 90" piece. The afghan was then stitched together and a border was added.

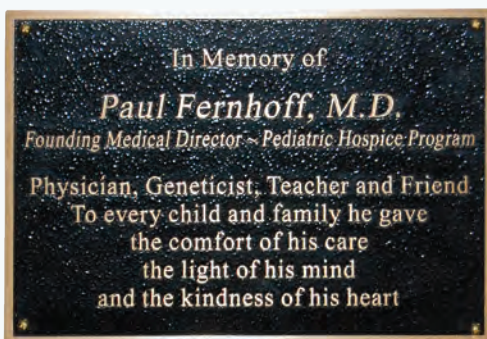
Ann Serrie, volunteer coordinator at the Hospice Atlanta Center, praised the group and their beautiful creation. "It is a colorful labor of love in honor of the philosophy and work done by hospice." The end result? The afghan sold for \$1,200. And the winning bidder will feel warm and fuzzy in several ways for many cold nights to come! ■



■ L-R: Lois Stifel, Ann Serrie, Wendy Simonds, Mary Stack, Bonnie Lam, Christina Barmon, Bette Martell

Remembering the Legacy of Dr. Paul Fernhoff

Memorial Plaque Unveiled at the Hospice Atlanta Center



Visiting Nurse Health System honored the memory of the late Dr. Paul M. Fernhoff during the dedication of a memorial plaque placed outside the entrance to the Children's Room at the Hospice Atlanta Center. Dr. Fernhoff, medical director of the pediatric

hospice program at Visiting Nurse for 19 years, passed away suddenly on September 19, 2011. Despite his untimely death, the impact of his contribution to our hospice practice and to the scores of families he helped through one of life's most painful experiences—the death of a child—can still be felt today.

Former colleagues, family and friends gathered to share warm remembrances of his life and work. Denise Greenberger, his colleague in pediatric hospice for many years, recalled Dr. Fernhoff as "a fabulous teacher and wonderful role model," noting the compassion and

gentleness he showed to families when talking about delicate issues. Dr. Laura Waddle, the current medical director for pediatric hospice, spoke of the ways Dr. Fernhoff "wanted children to *live* with their diagnosis, not die from them." She also described the many ways his legacy continues in the pediatric program today, telling stories of how current patients and families are living out his vision. As the plaque was unveiled, Rabbi Adam Starr concluded the dedication, saying "Paul was not blessed with length of days, but he lived each day fully. The memorial is a symbol of the days of his life." ■

CARING VOICES

Honoring the Spirit

Hospice Volunteers Stand Vigil During a Patient's Final Hours

Dying alone is a common fear. Volunteering to spend time with a complete stranger who is hours away from death without family or friends nearby is an uncommon gift, both to the patient and to the volunteer.

Visiting Nurse offers "Vigil Services" to patients without a local family member or caregiver who are in their last 24-48 hours of life and who reside at the Hospice Atlanta Center or in independent and assisted living facilities. The "vigil volunteers," officially known as Threshold Companions, are available sometimes on very short notice to provide support and companionship in ways such as sitting at the bedside, reading a favorite story or verse, playing music, or encouraging a life review. Sometimes the volunteer is called in to provide respite care to a family member who has to run an errand and wants assurance their loved one is not left alone. The most important contribution the Threshold Companions provide is to simply *be present*.

Threshold Companions are trained by hospice volunteer coordinator Ann Serrie and volunteer Jim Anderson. One recent trainee was Martha Talbot, who has been a volunteer with Visiting Nurse for three years and whose mother died at the Hospice Atlanta Center five years ago. Working with dying patients, plus the death of a good friend and then both of her parents, made her think about death more often and made her comfortable with it. "I started thinking about the everyday things that are sacred in life, and dying is one of those things. I wanted to honor the spirit by acknowledging the importance of life and the sacredness of death," said Martha. Realizing that some people do not have local support, Martha felt it was important for someone to be there for them, and soon after she completed training she participated in her first vigil. The patient was not conscious, but Martha remained present for two hours

by being spiritually aware, meditating, internally reciting a personalized mantra, and quietly singing uplifting songs. She described the experience as invigorating yet calming.

Threshold Companions believe there is more to death than we know and, in this, they help patients complete the circle of life. And in return, their patients impart to them a better understanding of death. This may be their final gift. ■

"I started thinking about the everyday things that are sacred in life, and dying is one of those things. I wanted to honor the spirit by acknowledging the importance of life and the sacredness of death."

Martha Talbot, volunteer

Being present is the act of being with another without talking or *doing*. It is complete focus on the other, being alert with your whole being to their whole being. It requires attentive listening and keen observation to interpret the subtle messages the dying often convey, as the Threshold Companion often becomes an essential liaison between the patient and the hospice team.



It's Snow-Time at the BIG-TO-DO!

Tickets and Sponsorships Benefit Pediatric Patients and Their Families

Picture an exciting day of winter fun, flying down a snow-covered hill on an inner tube as the cool breeze rushes through your hair and snow flurries melt on your flushed cheeks. If you grew up in a colder climate, this picture conjures fond childhood memories. At the BIG-TO-DO on Sunday, February 9 on Snow Mountain at Stone Mountain Park, everyone can create new memories like this and also contribute to a great cause.

Your support helps fund the medical care we provide to children and their families, many of whom are coping with the overwhelming diagnosis of a terminal illness. Visiting Nurse has one of only two pediatric hospice programs in the state, providing care at home or

in our inpatient facility, the Hospice Atlanta Center. Our highly-trained staff provides nursing care, counseling, pastoral care, family education, and bereavement support.

Children require specialized care as they approach the end of life, and pediatric care is significantly more expensive than care for adults. In most instances reimbursement from Medicaid or private insurance covers only half of the costs of their care and, in some cases, the gap is much greater. Your support enables us to provide care to all who need our services, regardless of their ability to pay. It also helps these families create their own warm memories with the time they have together. ■



HOW TO SUPPORT THE BIG-TO-DO

Become a Corporate Sponsor
Send a Pediatric Patient and Family to the BIG-TO-DO!
Purchase Group Ticket Packages
Bring Your Family

Visit BigToDo.org or call 404.215.6010



CURRENT EVENTS



Fall Benefit Exceeds Fundraising Goal

Sponsorships, Auctions and Appeals Support All Patients Who Need Our Care

Atlanta's philanthropic community gathered in their finest cocktail attire at The Ritz-Carlton, Atlanta, on September 28th to support our underinsured patients and their families. The event, *In the Moment – A Celebration of Life*, raised more than \$314,000 to support care for uninsured and low-income patients as 275 attendees paid tribute

to Bill and Eleanor Cheney. More than 1,000 metro Atlanta families received care thanks to the Cheney's generous and long-time support of our Alzheimer's and Parkinson's Respite Program.

FOX 5 news anchor Russ Spencer emceed the event as new friendships were forged and old friends reminisced. Patrons and guests exemplified the spirit of giving and compassion as they participated in a live auction which included items such as a home visit by the Waffle House Food Truck, a

private in-home dinner by Chef Steven Satterfield of Miller Union, and a patchwork afghan created by Hospice Atlanta Center volunteers and staff. The evening ended with a rousing live appeal as guests generously gave an additional \$43,000 to fund specific needs, from hospice care for uninsured patients to telemonitoring devices for high-risk patients. ■

To view photos from the event as well as the video of the Cheney's please visit www.vnhs.org/InTheMoment

Special Thanks

Host Committee

Co-Chairs Jerome & Sue Lienhard

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Patron Party

Host, Bruce Cohen

Kroger
Takorea
Oh!Casions
Yum Bunz
Atlanta Brewing Company
Fischer Funeral Care
National Distributing Company

And to all our generous patrons, volunteers and auction item contributors.



■ The Cheney's granddaughter Laura Cheatham Barnhart accepts the honor on their behalf



■ Advisory Board member Dr. Peggy Wilmoth considers an auction item



■ Guests bid on live auction items



■ The evening's Master of Ceremony Russ Spencer

Bereaved Families Attend Camp STARS

A Weekend of Healing, Bonding and Fun

Part of the healing process after the death of a loved one is learning to express grief in emotionally healthy ways. Over the weekend of November 1-3, 100 family members and 45 volunteers came together at Camp STARS, a bereavement camp for families offered by the hospice program at Visiting Nurse Health System. The camp is a safe environment for families to begin to regain the joy in life by bonding with each other and with other families in similar situations. Campers are encouraged to enjoy the peaceful setting and participate in sports, group activities and healing exercises.



Barbara Moore, camp director, commented on a new direction for the camp. "After 19 years of providing Camp STARS for Children and seven years of Camp STARS for Families, we have combined the two to focus on the whole family. Providing more time to grieve together as a family unit often results in the emergence of a new family structure, which further strengthens individuals as well as the entire family."

Established in 1994 as the first camp of its kind in Georgia, Camp STARS is located 50 miles east of Atlanta on 300 beautiful acres at Camp Twin Lakes in Rutledge. The camp is open to the entire Atlanta community and is staffed by counselors, social workers, chaplains and community volunteers who have experience working with the bereaved. There is no cost for attending other than a nominal administrative fee. Camp STARS relies on the generosity of The Junior League of Atlanta, The Billie S. Been



Foundation and other donors who make it possible for families to attend camp regardless of their financial resources. ■

The next Camp STARS will be held in March 2014. For specific dates and registration information please visit www.vnhs.org/campstars or contact Barbara Moore at 404-869-3086.

Thank You to Our Fall Event Sponsors

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James Starr Moore
Memorial Foundation

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The Difference Your Gift Makes

Visiting Nurse cannot fulfill its mission without annual charitable support from the community. And every gift — large and small — is vital in helping us reach that goal.

But when you give,
where does your gift
actually go?

ENHANCED CARE FOR GREATER NEEDS



We go above and beyond to ensure our patients with the most complex diagnoses recover successfully at home.



HOSPICE ATLANTA CENTER



With its beautiful grounds and comforting spaces, the Center is a home away from home for terminally ill patients and their families.

CAMP STARS



Camp STARS helps families with children learn how to manage their grief and find peace in the memories of their lost loved one.

SAFETY-NET CARE



We care for more uninsured and impoverished patients than any other home healthcare provider in Georgia.

CHILDREN'S PROGRAM



By focusing on the child, not the illness, we help families with terminally ill children make the most of the time they have together.

When you give, you are making all of this care possible. You can make an unrestricted contribution to our total goal or designate your gift to a program that inspires you.

Either way — every dollar counts.

www.vnhs.org/donatenow

July 1 – September 30, 2013

The following people were thoughtfully remembered with a gift in their name:

In Honor of:

Dr. Arthur S. Booth
Mr. Joel Isenberg
Mr. & Mrs. Charles Wooten

In Memory of:

Mr. Charles Able
Mrs. Irene S. Adams
Ms. Joni Affatato
Ms. Melissa Affatato
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Engraved Pavers to Remember a Loved One



Remember the life of someone dear to you and provide much needed funding to the Hospice Atlanta Center by placing a memorial paver in the Center's garden.

A memorial paver is a lasting tribute to a friend who loved nature, a favorite relative whose personality brought light to your life, or someone with whom you shared special memories. Pavers may be placed with a gift of \$1,000 or more to Visiting Nurse Health System.

Additional memorial opportunities are available and range from teak furniture for patient patios to naming patient rooms or public spaces in the Center. All larger memorials include a plaque engraved with text honoring your loved one.

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For more information or to make a memorial gift, please visit www.vnhs.org/pavers or call the Office of Advancement at 404-215-6010.



VISITING NURSE
HEALTH SYSTEM

Training and Support Center
5775 Glenridge Drive, NE, Suite E200
Atlanta, GA 30328

Address Service Requested

Look Homeward

Caroline E. Moise
Board Chair

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We welcome your comments and suggestions.
Please address all correspondence to
david.greenberg@vnhs.org.

404.215.6000
www.vnhs.org

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SNOW DAY ADVENTURE

Snow Mountain At Stone Mountain Park

Benefits pediatric patients and their families
at home or at the Hospice Atlanta Center.

BIG-TO-DO tickets are \$60.
Children under 36 inches tall enter FREE.

**SUNDAY
FEBRUARY 9TH**

Purchase Tickets: BigToDo.org | 404.215.6010



SNOW TUBING

Two hours of
snow tubing

SNACKS

S'mores over open
fire, Wendy's chili
and hot chocolate

SNOW ZONE

Access to The Snow
Zone: Fort Snow,
Snowman Valley,
Igloo City and the
Snowball Shooting
Gallery

ACTIVITIES

Indoor entertainment
for all ages

PARKING

FREE park entrance
and parking