



Center for Hospice Care

choices to make the most of life

Board of Directors Meeting
Administrative and Foundation Offices
4220 Edison Lakes Pkwy, Suite 200, Mishawaka
June 20, 2012
7:30 a.m.

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CHAPTER ONE AGENDA



BOARD OF DIRECTORS MEETING

Administrative and Foundation Offices
4220 Edison Lakes Parkway, Suite 200
June 20, 2012
7:30 a.m.

A G E N D A

1. Approval of April 18, 2012 Minutes (*action*) – Terry Rodino (2 minutes)
2. President's Report (*information*) - Mark Murray (10 minutes)
3. Finance Committee (*action*) – Amy Kuhar Mauro (10 minutes)
 - (a) Financial Statements for April and May
5. Policies (*action*) – Donna Ticman (7 minutes)
 - (a) Abbreviations List
 - (b) Change of Designated Hospice
 - (c) Home Health Aide/CNA Assignment and Duties
 - (d) Transfer of a Hospice Patient
6. HIPAA Policies (*action*) – Karl Holderman (7 minutes)
7. Personnel Committee (*action*) – Terry Rodino (6 minutes)
 - (a) Human Resources Policies Manual (revised)
8. Professional Advisory Group (*action*) – Julie Englert (5 minutes)
9. Foundation Update (*information*) – Catherine Hiler (10 minutes)
10. Chairman's Report (*information*) – Terry Rodino (3 minutes)

Next meeting August 15 at 7:30 a.m.

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CHAPTER TWO MINUTES

**Center for Hospice Care
Board of Directors Meeting Minutes
April 18, 2012**

<i>Members Present:</i>	Terry Rodino, Corey Cressy, Amy Kuhar Mauro, Rita Strelling, Julie Englert, Carmi Murphy, Mary Newbold, Wendell Walsh, Ida Watson
<i>Absent:</i>	Catherine Hiler, Bilal Ansari, Dennis Beville, Jim Brotherson, Sara Miller, Lori Price
<i>CHC Staff:</i>	Mark Murray, Karl Holderman, Dave Haley, Mike Wargo, Donna Ticman, Becky Kizer

Topic	Discussion	Action
1. Call to Order: 7:30 a.m.		
2. Welcome	<ul style="list-style-type: none"> New members Mary Newbold and Carmi Murphy were introduced. 	
3. Minutes	<ul style="list-style-type: none"> A motion was made to approve the minutes of the 02/15/12 meeting as presented. The motion was accepted. 	R. Strelling motioned J. Englert seconded
4. President's Report	<ul style="list-style-type: none"> The year has started strong. We are starting a new internal Hospice House task force to look at utilization of general inpatient days (GIP). We are slightly under the national average. Only one in five hospices has their own dedicated inpatient unit and our percentage of utilization should be higher. In Indiana we are the largest hospice provider, but our GIP is lower than the other top five hospices in the state. We will look at our program to see if we are being too conservative and what we can do. The percentage of GIP compared to the total number of Hospice House days has fallen from 84% in 2008 to 81% in 2011. With the Mishawaka campus project, we were talking about having 12 beds instead of 7 as we have now, but maybe we don't need that many. Historically half of our Hospice House admissions come directly from hospitals, even though we are not affiliated with a particular hospital. We just want to make sure we are utilizing our resources effectively so patients are getting the standard of care they are entitled to. There may be some internal re- 	

	<p>education issues too. The deaths before admissions (DBA) are additional issue. One in twelve referrals dies before they are admitted. Most of those referrals are from hospitals. We are meeting with the area hospitals about the DBAs.</p> <ul style="list-style-type: none"> • Volunteer Recognition was 04/10. 123 people attended. Mark presented an abbreviated annual report and the documentary "Okuyamba" was shown. The recipients of the John Krueger MD Hospice Caring Award were longtime volunteers Carole Moats and Larry Brucker. • National updates are in the report on pages 10-11. Results of the annual board self-evaluation are included in the board packet. We are reviewing the 990 to see if we can change to doing this survey every other year. Copies of the postcard sent to area physicians for Doctor's Day, Camp Evergreen brochure, and NIIPCO Annual Report are in the packet. • Tim Sexton, former board member, and Jessica Brookshire who both work at Notre Dame in University Relations, met with Mark about how ND is trying to get their staff and faculty more involved in the local non-profit community. Mark told them how integrated CHC is already with ND with the Uganda project, the medical school, the one-credit class, etc. They are publishing an article about our hospice and palliative care class. Tim asked about board leadership. We have not had someone from ND on the board for a while. They suggested adding Melanie Davis (see attached biography). We are scheduling a lunch with her and some members of the Executive Committee and with the board's approval would like to add her to the board in June while she is interested, instead of waiting until next year. A motion was made to nominate Melanie Davis to the board of directors on behalf of the executive committee. The motion was accepted. • Copies of thank you letters from families and area schools are in the board packet, along with copies of March's census charts. 	<p>R. Streffling motioned C. Murphy seconded</p>
5. Finance Committee	<ul style="list-style-type: none"> • The committee met with the auditors from David Culp & Co. LLP 	

	<p>last Friday to review the 2011 audit and financial statements. They rendered an unqualified opinion. Copies of the audit report, audited financial statements, and fiscal review were distributed. Per auditing rules, CHC & HF statements must be presented as consolidated. As of 12/31/11 combined assets were \$28.7 million. The December financial statements were revised (copy attached). Combined revenues were \$18.3 million with combined expenses of \$17.5 million and a combined net gain of \$795,000. 2011 CHC revenue was \$17 million (including a loss \$292,532 from the Beneficial Interest in Hospice Foundation), expenses \$16.2 million, and a net gain of \$795,000.</p> <ul style="list-style-type: none"> • The 2012 first quarter financial statements were reviewed (copy attached) CHC revenue was \$5.6 million, expenses \$4.2 million, and YTD net gain \$1.4 million. • A motion was made to accept the 2011 audit, revised December financial statement, and the first quarter 2012 financial statements as presented. The motion was accepted. 	I. Watson motioned C. Murphy seconded
6. Policies	<ul style="list-style-type: none"> • The following policies were presented. The revisions reflect current practices and processes. <ul style="list-style-type: none"> ◊ Hospice Aide/CN A Assignments and Duties (revised) ◊ Restraints and Seclusions (revised) ◊ Skin and Wound Care (new) • A motion was made to accept the new and revised policies as presented. The motion was accepted. 	W. Walsh motioned C. Cressy seconded
7. Hospice Foundation Update	<ul style="list-style-type: none"> • Fund raising is \$30,000 ahead of last year. Revenue was \$194,000. We are in the final phase for the 28th Annual Helping Hands Award Dinner on 05/02. Attendance is pretty much at maximum. Chris and Carmi Murphy have been wonderful chairs. We have \$240,000 in total underwriting. • 4th Annual Bike Michiana for Hospice is 09/16. We received a \$5,000 grant again from the Conventions and Visitors Bureau. Several riders came from out of state last year. The grant is to help promote events in out lying areas like Chicago and Indianapolis. 	

	<p>Our goal is exceed 1,000 riders.</p> <ul style="list-style-type: none"> • The second Circle of Caring luncheon was held in Plymouth for about 25 people. The first one was at the Lerner's in Elkhart. • FIISSA /PCAU Update - Rose Kiwanuka was here from Uganda for three weeks. We held five different PCAU events including Goshen College, IUSB, Notre Dame, and Saint Mary's. Over 200 people attended the events. We are working with IUSB to have a master of social work student intern in PCAU. We also made additional strides with the mapping project with the geospatial institute. Through the Kellogg Institute, a student will go to Uganda this summer to teach a couple people in the PCAU office on what they need to do to get more information. Rose traveled to Washington DC for the NIIPCO Management Leadership Conference and made a presentation on our partnership. "Okuyamba" was screened to 150 people. • In conjunction with World Hospice and Palliative Care Day, we have developed an "event in a box," to use as a fund raiser for American-based hospices to raise money for their FHSSA partners. We would provide the materials they could use to promote their event, and FHSSA developed a tool kit with talking points to use with the media to better educate their communities about their partnership and why they are doing what they are doing. There are 95 hospices in America partnered with a hospice in Africa. The American partners financially support \$5,000 or more and are encouraged to visit their partner in Africa and also bring their partner here. Many things we could learn from each other. • Okuyamba is getting into several film festivals around the country. The idea is to raise awareness in these communities. The documentary received the inaugural Zachary Mofogen Art of Caring Award at the National Hospice Foundation Gala in Washington DC. The award is for promoting hospice through the arts. The trailer was shown to over 600 people at the gala. • Rose brought the PCAU five year strategic plan. It is one of the best 	
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	<p>we've ever seen. In 2002, the Uganda Ministry of Health through a sector strategic initiative identified hospice as something they would support nationally. In America under the Affordable Care Act is a list of essential benefits that all Americans should be entitled to and insurance companies should fund and hospice is not on the list. Uganda is becoming a model for other countries in Sub-Saharan Africa. They allow trained nurses to prescribe Morphine. They still only access to 10% of the population, and a goal of their strategic plan is to increase that to 100% within five years. We will share the final version of their plan when it comes out.</p> <ul style="list-style-type: none"> • The Walk for Hospice will be 09/30 at Newton Park. We will hold an "Okuyamba" fund raiser in October in conjunction with World Hospice and Palliative Care Day. Funds will go towards our partnership with PCAU. There are a number of third party fund raising events coming up, including the Bill Stankovic Bass Tournament on 05/12, the annual South Bend Sodbusters Mud Bog on 05/27, and the 14th Annual Joseph Smith Golf Outing. We now have a special events coordinator on staff to help these events with their publicity. • Mishawaka campus – We will break ground this summer with the idea of relocating the Administrative/Foundation offices and Life Transition Center by the summer of 2013. We want to vacate the spaces we currently lease, because it would save us \$40,000-\$50,000. 1st Source Bank has been fantastic to work with through this process. They helped us finance the best option for us. We are at the point where Wightman Petrie is working on a campus master plan with city, redevelopment commission, parks board and IDEM. Everyone has been fantastic to work with and excited about the project. • Elkhart campus – The dedication ceremony for the grounds area will be 06/07 from 5:00-7:00 p.m. We placed the first order for 22 memorial bricks, 5 benches, and 4 trees. Along the way we will make small continual improvements to the grounds area with the 	
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	<p>money we will be able to generate as result of cash gifts, such as plant new trees, benches, and create new sitting areas around the property. We have brochures on hand at the Elkhart office about the brick campaign and also did a mailing to about 2,000 people in the Elkhart area. It was sent to people that experienced hospice in Elkhart County going back five years and also to people who donated to the campaign up to a certain threshold. We will continue to publicize it and also put it in Crossroads.</p> <ul style="list-style-type: none"> • Hospice Foundation website – Jim Wiskotoni is doing a fantastic job as web designer updating the Foundation website. He is now making updates on a regular basis, and will also work on further improvements on the CHC website. The Foundation website can be accessed at www.foundationforhospice.org. • The next issue of Crossroads will be mailed by the end of the month. It is 48 pages—the biggest yet. It is done quarterly and recognizes all of our donors. 	
Adjournment	<ul style="list-style-type: none"> • The meeting adjourned at 8:20 a.m. 	Next meeting 06/20.

Prepared by Becky Kizer for approval by the Board of Directors on June 20, 2012.

Rita Strefling, Secretary

Becky Kizer, Recording Secretary

CHAPTER THREE

PRESIDENT'S REPORT

Center for Hospice Care
Hospice Foundation
President / CEO Report
June 20, 2012
(Report posted June 14, 2012)

This meeting takes place in Suite 200 at the AFO at 7:30 AM.
This report includes event information from April 12 – June 20, 2012.
Hospice Foundation Board meeting will begin at 8:30 AM in Room B in Suite 210.

CENSUS

At the end of May, year-to-date Average Daily Census (ADC) agency wide was running 4% higher than at the same time in 2011. By office, year-to-date, South Bend was 2.6%, Elkhart was 2.1% higher, and Plymouth was running 9.2% higher than last year.

May 2012	Current Month	Year to Date	Prior Year to Date	YTD Change
Patients Served	448	996	934	62
Original Admissions	142	657	615	42
ADC Hospice	317.13	331.37	310.02	21.35
ADC Home Health	22.19	16.14	24.34	(8.20)
ADC CHC Total	339.32	347.51	334.36	13.15

April 2012	Current Month	Year to Date	Prior Year to Date	YTD Change
Patients Served	439	854	804	50
Original Admissions	124	515	485	30
ADC Hospice	320.37	335.02	308.65	26.37
ADC Home Health	15.13	14.59	25.38	(10.79)
ADC CHC Total	335.50	349.61	334.03	15.58

Monthly Average Daily Census by Office and Hospice House for Calendar Year 2011

	2012 Jan	2012 Feb	2012 Mar	2012 Apr	2012 May	2012 June	2012 July	2012 Aug	2011 Sept	2011 Oct	2011 Nov	2011 Dec
S.B.:	180	189	199	201	202				177	167	177	184
Ply:	73	71	67	60	60				57	61	67	76
Elk:	78	71	72	70	68				68	66	72	73
SBH:	5	7	3	3	5				5	4	4	5
EKII:	4	5	3	2	4				3	3	4	
Total:	355	365	344	336	339				310	302	324	342

HOSPICE HOUSES

May 2012	Current Month	Year to Date	Prior Year to Date	YTD Change
SB House Pts Served	40	135	102	33
SB House ALOS	4.20	5.24	7.12	(1.88)
SB House Occupancy	77.42%	66.54%	68.68%	-2.14%
Elk House Pts Served	28	112	99	13
Elk House ALOS	5.00	5.05	4.89	0.16
Elk House Occupancy	64.52%	53.20%	45.79%	7.41%

April 2012	Current Month	Year to Date	Prior Year to Date	YTD Change
SB House Pts Served	22	99	78	21
SB House ALOS	4.18	5.45	7.24	(1.79)
SB House Occupancy	43.81%	63.75%	67.26%	-3.51%
Elk House Pts Served	19	88	83	5
Elk House ALOS	3.63	4.84	4.87	(0.03)
Elk House Occupancy	32.86%	50.30%	48.10%	2.20%

PATIENTS IN FACILITIES

The average daily census of patients in skilled nursing homes, assisted living facilities, and group homes during May was 128. Year to date through May 2012 is 135.

FINANCES

Karl Holderman, CFO, reports that the May 2012 Financials will be posted to the Board website on Friday morning, February 13th following Finance Committee approval.

April 2012 Financial Information

Center for Hospice Care

April Overall Revenue	\$ 1,523,646	Year to Date Overall Revenue	\$ 7,160,860
April Total Expense	\$ 1,152,231	Year to Date Total Expense	\$ 5,370,687
April Net Gain	\$ 371,415	Year to Date Net Gain	\$ 1,790,173

Hospice Foundation

April Development Income	\$ 125,473	Year to Date Development Income	\$ 319,739
April Investment Income	\$ (\$11,698)	Year to Date Investment Income	\$ 865,055
April Overall revenue	\$ 83,788	Year to Date Overall Revenue	\$ 1,185,684
Total April Expenses	\$ 84,697	Total Year to Date Expenses	\$ 385,428
April Overall Net	\$ (\$ 909)	Year to Date Overall Net	\$ 800,256

Combined

April Overall Revenue	\$ 1,608,342	Year to Date Overall Revenue	\$ 7,546,287
April Overall Net Gain	\$ 371,415	Year to Date Overall Net Gain	\$ 1,709,173

At the end of April, Center for Hospice Care's Year to Date Net without the beneficial interest in the Hospice Foundation was \$989,917.

At the end of April, CHC and HF combined had a net without investments of \$925,118.

At the end of April, the Foundation's Intermediate Investments (formerly known as Pool Two) totaled \$3,955,890. Long Term Investments (formerly known as Pool Three) totaled \$10,097,466.

CHC's assets on April 30, including its beneficial interest in the Hospice Foundation, totaled over \$29.8 million and the only significant liabilities were the trade account payables, accrued payroll, and accrued payroll taxes.

CHC VP/COO UPDATE

Dave Haley, VP/COO, reports that on June 8, he, along with Mike Wargo, architect Jeff Helman, and Chris Chockley from Wightman Petric visited the Hospice of Northeastern Illinois, located in Barrington, Illinois. The purpose was to tour their newly designed Hospice House and administrative offices. This facility is located adjacent to a park, as will be our new facilities in Mishawaka. They have 16 Hospice House beds. Dave reports they came away with some great ideas to possibly incorporate into our new architectural designs for Phase II of the Mishawaka Campus project.

Officials from DuPont were at our Elkhart facility in early May to view trees that were damaged by the herbicide, Impreliss, which was applied by U.S. Lawns, our grounds maintenance contractor. DuPont has a national problem with this product as it was advertised to be safe for trees. DuPont has a numerical system to categorize the level of tree damage with 5 being the worst and 1 being minor. The DuPont officials told us we had seven 5's and three 4's. DuPont would be in contact with us on a settlement package in the future. The same herbicide was used at the Roseland property and some trees are also damaged there. That location is next on the list for inspection and settlement.

Our Nurse Practitioner recently resigned to accept a position in Indianapolis where she owns a home. We continue in our efforts to recruit a third, board certified Palliative Care Physician or one that is interested in becoming board certified.

Dave Haley's Census Charts are contained in the Board Briefing Book.

DIRECTOR OF NURSING UPDATE

Donna Ticman, RN, DON, reports the Nursing Department has developed a staffing plan to utilize Registered Nurses and Hospice Aides across all offices to maximize patient care coverage and reduce overtime. This staffing plan allows for more uniform staffing based on patient census in each office.

All registered nurses have been skills validated on the CHC's new wound care protocols and wound care formulary. This skills validation ensures our patients will receive the most up-to-date palliative wound care in the most cost effective way.

Through diligent oversight the nursing Patient Care Coordinators have reduced additional shipping charges for patient medications to an all time record of \$0.07 per patient day (year to date). This is a 30% year to date reduction from 2011.

HOSPICE FOUNDATION VP / COO UPDATE

Mike Wargo, VP/COO, Hospice Foundation, reports...

Fund Raising Comparative Summary

Through May 2012, the Development Department recorded the following calendar year gift totals as compared with the same period during the prior four years:

Year to Date Total Revenue (Cumulative)

	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
January	53,599.91	70,808.77	64,964.45	32,655.69	36,775.87
February	196,404.22	114,791.61	108,025.76	64,530.43	88,893.51
March	332,376.27	156,227.15	231,949.73	165,468.92	194,345.35
April	531,841.59	265,103.24	354,644.69	269,676.53	319,818.81
May	739,948.64	358,108.50	389,785.41	332,141.44	416,792.85
June	847,141.03	739,094.00	477,029.89	427,098.62	
July	938,610.40	782,028.00	532,913.52	487,325.01	
August	1,291,091.74	831,699.47	585,168.77	626,466.72	
September	1,622,566.59	913,852.09	671,103.04	724,782.28	
October	1,701,183.06	1,249,692.64	992,743.37	1,026,728.58	
November	1,758,820.82	1,294,948.93	1,043,750.46	1,091,575.65	
December	1,943,175.48	1,415,554.25	1,178,938.91	1,275,402.38	

Year to Date Monthly Revenue

(less Elkhart Hospice House capital campaign, bequests and one-time major gifts)

	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
January	43,099.91	36,382.10	52,442.49	32,110.69	32,309.58
February	29,402.31	33,816.42	41,364.37	30,644.74	43,783.64
March	121,906.94	34,722.57	65,886.51	99,796.42	102,351.84
April	174,554.43	105,621.19	104,544.96	97,332.61	123,998.46
May	81,857.05	92,613.21	33,768.72	51,753.98	90,909.04
June	91,962.39	94,353.52	74,084.48	90,718.18	
July	41,431.37	43,103.73	55,278.63	53,536.39	
August	53,201.14	48,215.45	51,240.25	83,202.86	
September	32,254.39	55,710.51	85,629.27	94,000.56	
October	69,849.74	78,996.22	66,061.97	47,779.09	
November	46,012.07	45,136.29	49,247.09	48,284.08	
December	134,917.88	113,640.59	115,188.45	133,617.73	
Total	920,449.62	782,331.80	794,737.19	862,777.33	

Special Events & Projects

The 28th Annual Helping Hands Award Dinner, honoring Mary Osmanski Ferlic, was the second most successful Helping Hands Dinner in CHIC's history, grossing \$264,950 and netting \$201,952. This gala event was attended by 540 people. A total of 32 individuals, foundations and corporations sponsored the event at levels of \$2,500 or higher; 30 corporations and individuals were patrons for the event. Many thanks to our dedicated chairs: Carmi and Chris Murphy, for their vision and leadership, as well as their dinner committee, for making such a stellar evening.

Registration for the 4th Annual Bike Michiana for Hospice, to be held September 16th, is open. Save the Date cards have been produced and were sent in advance of the June 15th early registration deadline. The steering committee has been meeting monthly – meetings will move to bimonthly beginning in July. A revised web site has been launched to promote fundraising and its importance to CHC's mission.

Hospice Foundation provided event and publicity support for two 3rd Party fundraisers held in May. The Bill Stankovich Memorial Bass Tournament, held on May 12th raised \$2,504. The organizers requested that these funds be used to support the Elkhart Hospice House, where Bill Stankovich was a patient. The Memorial Day Mud Bog, which was held on May 27th by South Bend Sod Busters, raised a total of \$6,000 for CHC. Since 2005, this event has raised a total of \$45,155 to support our work. We are currently providing support for the upcoming 14th Annual Joseph E. Smith Golf Outing. Sponsored by NAIHA, the outing will be held on August 1st at Blackthorn Golf Course.

Other events in the planning stages include the 27th Annual Walk for Hospice on September 30th at Newton Park and a FHSSA/PCAU fundraiser in October, which will be held in connection with World Hospice & Palliative Care Day commemorations around the world.

FHSSA/PCAU

During the 2011-12 academic year, the Hospice Foundation provided scholarships for three health care workers to complete the one year Clinical Palliative Care diploma program at Hospice Africa Uganda. Our students, (Lameck, Esther and Patience) graduated in May and have now returned to their home districts of Mubende, Mbale and Kalagala to establish palliative care programs for these previously underserved districts of Uganda.

During her travels around the country during the past year, Rose was able to identify and recruit six health care workers, working in currently underserved districts, to come to Kampala to join the 2012-13 diploma cohorts, who are scheduled to begin their coursework in late June. As a result, six of the 12 total class seats will be filled by PCAU-identified and Hospice Foundation-supported students.

Okuyamba

Okuyamba continues to screen at film festivals across the country. April and May festival screenings included: River Bend Film Festival, April 13th at Century Center, in South Bend, Indiana; Athens International Film and Video Festival, April 16th, Athena Cinema, Athens, Ohio; On Location: MEMPHIS | International Film & Music Fest, April 20th, Malco's Ridgeway Four Theatre, Memphis, Tennessee; Fort Myers Beach Film Festival, April 27th, Beach Theater, Fort Myers Beach, Florida; and the Desert Rocks Film and Music Event, May 5th, Cinemark Jess Ranch Theater, Apple Valley, California. The next currently known festival screening will be in August at the Columbia Gorge Film Festival in Vancouver, Washington.

The "Event in a Box" fundraising concept that we developed for FHSSA, in which U.S.-based FHSSA partners may screen *Okuyamba* as part of their fundraising efforts to benefit FHSSA and their African partners, continues to draw interest. The kit consists of customized promotional posters and postcards. In addition, a director's cut of the film, featuring additional commentary by

Mike Wargo, Ted Mandell, Rose Kiwanuka, and others, is being produced to assist FHSSA partners with their own unique fundraising opportunities.

Included among the various hospices and other organizations planning to host *Okuyamba* screenings as part of their awareness-raising and/or fundraising efforts are: Talbot Hospice Foundation, Easton, Maryland; Samaritan Healthcare & Hospice, Marlton, New Jersey; Prairie Haven Hospice, Scottsbluff, Nebraska; The Denver Hospice, Denver, Colorado; Duke Global Health, Duke University, Durham, North Carolina.

Jennifer Warlick, associate professor of public policy and economics and director of the Poverty Studies interdisciplinary minor at the University of Notre Dame has contacted us for permission to use *Okuyamba* as part of the curriculum for the study of healthcare in developing countries in her poverty studies courses. Mike Wargo is scheduled to guest lecture in one of those classes in late October.

With the exception of Uganda, our most remote reach to date is Belgrade, Serbia, where a cooperative group of French, UK and Serbian hospice workers have included an *Okuyamba* screening as part of the curriculum of the training program they developed for this nation that is working to develop its own palliative care policy and initiatives.

Mishawaka Campus

With an eye toward construction completion of initial facilities in 2013, work continues on several fronts. The site survey and geotechnical study is complete. Mike continues to negotiate with officials at the City of Mishawaka on the terms and conditions of the development agreement. Wightman Petrie has completed a campus master plan, which is scheduled to be presented at the June 18th meeting of the Mishawaka Redevelopment Commission. Indiana Earth, which completed demolition of all but one of the existing buildings slated for demolition, plans to demolish the final house later this month. Helman Sechrist Architecture has completed development of floor plans for the new Palliative Care Center and Guest House and DJ Construction is currently in the process of obtaining competitive bids for the renovation. Exterior design and floor plans are complete for both the Life Transition Center and Administrative buildings. Engineering activities will begin soon and DJ Construction will begin obtaining competitive bids from potential subcontractors later this month.

Center for Hospice Care - Elkhart Campus

The first 22 memorial bricks were installed in late April. We also received orders for six benches and four flowering trees. All memorial items were installed in late May and early June. Another mailing for memorial items is in the works and will be sent in July, with the next round of installations taking place in the fall.

We hosted a donor event on June 7th from 5-7 p.m. to formally dedicate the outdoor areas of the Elkhart Campus. More than 130 people attended the event, which included a brief synopsis of the campus's evolution by Mike Wargo, an invocation by Elkhart Spiritual Care Counselor Marge Braden and formal remarks by Mark Murray, Terry Rodino and Elkhart Bereavement Counselor Greg Suderman.

Communications

The spring issue of Crossroads reached mailboxes three days prior to this year's Helping Hands Award Dinner. It was our biggest issue yet, at 48 pages, and featured a cover story on the dinner and this year's honoree, Mary Osmanski Ferlic. Other stories included a donor profile of Michiana Hematology Oncology, site preparation for the new Mishawaka campus and previews of this year's Bike and Walk events.

The next issue is in production and will be in mailboxes in late July/early August. Among the items featured: more on the Mishawaka campus, a recap of the Helping Hands Award Dinner and a story on employee giving.

The new Foundation web site continues to be updated on a weekly basis, particularly the "News & Events" areas. It is also being used to help promote third-party events. It may be viewed at www.foundationforhospice.org.

COMMUNICATIONS, MARKETING, VOLUNTEERS AND ACCESS

Amy Tribbett, Director of Marketing and Access reports...

Outreach in February & March

During this time, our three account managers visited the offices of nearly 400 physicians and made more than 160 visits extended care facilities (ECF). Nearly 75 visits were made to our service area hospitals. Our annual Camp Evergreen was a major focus for a variety of meetings.

Provider Relations / ECF Marketing

- Lunch meeting with administrator, DON, SW and key staff at West Bend to address concerns and improve services
- Took new administrator and new DON at Millers Merry Manor New Carlisle out to lunch to review agency and how we can be helpful in the building and built upon our relationship as we currently don't have any patients there
- REAL Services in-service for care managers and case managers of home makers
- Lunch meeting with Interim Home Care, education on Palliative Care Center
- Elkhart Church Blitz – 42 contacts made
- Community Hospital of Bremen meeting with discharge planner
- Attended EGH/CHC Ethics Seminar
- Various Pharmacy marketing
- Met with Memorial Home Care La Porte, Starke and Plymouth.
- Met face to face with Dr. Holm
- Met face to face with Dr. Kolbe – agreed to submit an article for our physician newsletter, H&P
- Met face to face with Dr. Aldridge
- Met with Nurse at Dr. Peter's office
- Met with Nurse at Dr. Miller's office

- Met with Jeff, administrator at Bremen Health Care
- Met with Social Workers from all three Millers Merry Manors (MMM), Catherine Kasper Home, Life Care, and Sterling House (Michigan City)
- Met with Administrators at Oakwood
- Met with Directors of Nursing (DON) at Pilgrim Manor, MMM Plymouth, MMM Culver
- Met several times with discharge planners at Community Hospital Bremen and Saint Joseph Regional Medical Center Plymouth
- Met with Director of Ryan's Place in Elkhart regarding Camp Evergreen
- Met with Riverview Adult Day Care Director – future presentation to families to be scheduled in June and a reciprocal presentation to our staff
- Met with Boys and Girls Club of Goshen – information about Camp Evergreen
- Performed weekly rounds with Elkhart General Hospital case management team
- In honor of nurse's week, created candy baskets from South Bend Chocolates to distribute to ECF, hospitals, and physicians offices
- In honor of national nursing home week, created strawberry gifts for DON's and administrators served by SB and Plymouth offices
- Facilitated lunch meeting with new DON, marketing and administrator at Inwood Hills Assisted Living. It was a great opportunity to discuss how we are different especially from Heartland Hospice who previously was housed there.
- Provided lunch to 12 nurses at Arborwood Assisted Living in honor of nurse's week. We are now the facility's preferred hospice agency with eight patients on service.
- Lunch meeting with Family Medicine of South Bend. This includes seven physicians, one nurse practitioner and their nursing staff. Learned that Dr. Jacobs is going to Africa on relief trip and was able to discuss our Uganda partnership with him. Updated all physicians on Heartwize, BreatheEasy and our Palliative Care Center
- Lunch meeting at Memorial Advanced Cardio Institute (Drs, Mitra, Fiedler, Meng, Halloran, Ali, Aslam, Pessanha.) and had an opportunity to review Heartwize with Drs. Mitra and Meng in great depth. Also erased impression that patients needed to be DNR. Spoke with Nurse Practitioner, office manager, nurses, about CHC services.
- As a sponsor of Gerontology Consortium, we operated a vendor booth. Our prime location presented numerous opportunities to have in depth conversations with a number of referral sources, including Warsaw and Michigan City which were forwarded to appropriate liaisons. This event has grown over the past five years to now feature a national speaker, with 200 pre-registered attendees.

Community Relations

Our account managers continue to connect throughout our service area via senior networking opportunities, chamber events and health fairs. Highlights include:

- Reception at Southfield Village to welcome new administrator
- Darden Place House open house (group home). Discussed partnership opportunities with owner Paul. He prefers our hospice, but does not feel we refer to him. He has been invited to speak at an upcoming admissions meeting.
- Nappanee Senior Center Bingo sponsor/presentation
- TRIAD Board Meeting

- Attended “Last Will and Extortion” screening event on elder abuse sponsored by Gerontology Consortium with discussion panel
- Presentation to River Bend Cancer Services support group on palliative care
- In-service/presentation to professional care managers at REAL Services on hospice care
- Attended Advisory Board Meeting of Greenleaf Living Center
- Attended the “Catch the Spirit” the Saint Joseph Regional Medical Center -Plymouth Gala
- Attended Doctor’s Hospital Open House
- Met new Manager of Case Management at Elkhart General Hospital, Barb Scanlon and will schedule a future tour of Hospice House for her
- Was a Goshen Chamber of Commerce “Wake Up” Goshen Health System presenter
- Attended La Porte County Continuity of Care (COC)
- Attended Starke Co. COC
- Attended Plymouth Business Connections
- Attended the Plymouth Chamber Annual Dinner
- Attended the Starke Co. Chamber Breakfast
- Attended the La Porte Older Adult Services/Parents and Friends Luncheon
- Attended a meeting of the Marshall Co. Older Adult Services

Media Review

Our paid media continues in full force through a solid campaign on radio, television and print. You can hear our spots on B100, WFRN, Sunny 101.5, WTRC and WZOC. You can see our television spots on Comcast, WBND, WMYS, WNDU, WSBT, WSBT online, and WSJV. Our ad appears in every larger newspaper throughout our service area.

WELCOME NEW CHC BOARD MEMBER

I am pleased to announce we have a new member of the Center for Hospice Care board. Melanie Davis will be joining us for her first meeting at our next meeting. Melanie is the Recruiting Consultant for the office of University Relations at the University of Notre Dame. She is responsible for staffing Development, Public Affairs and Communications, and the Alumni Association of Notre Dame. She had a new board member orientation with the Administrative Team on May 22 and joined us at both the Helping Hands Award dinner and the Elkhart Campus grounds dedication.

HOSPICE FOUNDATION CEO AND COO TO PARTICIPATE IN NOTRE DAME FUND DEVELOPMENT CERTIFICATE PROGRAM

Somewhat similar to the Certificate in Nonprofit Executive Leadership program that Mike Wargo, Karl Holderman, and I participated in back in 2009, Mike and I will be take part in the new Executive Fund Development Leadership certificate program at the Mendoza School of Business at the University of Notre Dame. Considering we have a comprehensive multi-year capital campaign on the horizon, the timing couldn’t be better. The program consists of nine day-long sessions beginning in September, 2012, and concluding in the spring of 2013. Unlike seminars that present each topic as a stand-alone unit, this program will connect and contextualize all the material

presented. Numerous case studies will highlight the best practices of other nonprofits, and between-session “take-home” exercises will provide opportunities for in-depth feedback from faculty that will be focused on our individual organization and its needs. This in-depth program is designed to help us make the most of our organization’s fund-raising opportunities, assuring sustainability and growth for your organization in the future. The entire course is facilitated by Jimmie R. Alford, founder and chair of the Alford Group in Chicago and the program’s presenters include national experts from around the country with hands-on practical experience in nonprofit administration, as well as some of Notre Dame’s top development staff.

2011: THE YEAR IN REVIEW

Copies of “2011: The Year in Review” (board version) will be distributed at the board meeting. This version of the report has been created exclusively for members of the board only. A slightly shorter version has been prepared as a stewardship piece for all donors who gave \$1,000 and above during 2011. A cover letter from Hospice Foundation VP/COO, Mike Wargo, is included along with the publication to thank them for what they helped us accomplish during 2011.

REVISED AND UPDATED HIPAA POLICIES

Included on the board website are all of our revised HIPAA policies. All policies related to HIPAA Privacy and protected health information have been written and updated by our attorneys at Krieg | DeVault -- specifically the HIPAA privacy experts in their Indianapolis office -- several months back and we are now asking for formal board approval. This was an outcome of last year’s mysterious delivery by the St. Joseph County police to the South Bend office of an Aldi’s grocery bag with about 20 folders and some other material that included patient documentation covering a period from 2008 – 2010. Most of the patients were deceased. The grocery bag was found next to a truck in a residential neighborhood. All of the records belonged to a single CHC employee who was terminated following an internal investigation. None of the records appeared to have been subjected to the elements, damaged, or compromised in any way. We notified 199 surviving caregivers, and in a few cases patients, as required by law and reported the event to the proper authorities. To date, we have never been notified or made aware that any of the information was misused by anyone. This event caused us to have all of our HIPAA policies reviewed by legal counsel to insure they were current. Staff re-education on HIPAA privacy was also completed. To date, we have never been notified or made aware that any of personal or protected health information contained in the grocery bag was ever misused by anyone. We ask for the board to approve these policies at the next meeting.

2013-2014 HUMAN RESOURCES MANUAL

The Executive Committee has reviewed and approved the 2013-2014 CHC/HF Human Resources Manual. Manuals become effective on July 1 and stay in effect for two years before they are reviewed again. In between, if any changes are necessary, they are placed into draft form and taken to the Executive Committee and then the Board. This manual is currently very comprehensive and the outcome of many years of thoughtful administrative debate and diligent work. This time around, most of the changes to the existing manual are due to modifications in law, to provide

additional clarification, and to reflect desired practice. There are no new policies. A stand alone redlined copy is posted on the board website.

OUT AND ABOUT

On April 19, I was guest speaker for “Inspire Purpose: the Business Side of Non-Profits” sponsored by ND8, Inspire, and the Career Center at the University of Notre Dame.

I was invited to attend a focus group on April 25 on “Blended Strengths” regarding the new corporation bringing Memorial Health System and Elkhart General together. The meeting was attended by 17 individuals from the community and held at Memorial Hospital.

I attended the National Hospice Executive Roundtable meeting May 14-16 at Hospice of Dayton in Dayton, OH. Guest speakers included Pam Morris, President/CEO of CareSource, a leading non-profit managed care company based in Dayton, Ohio. CareSource has grown to be the largest Medicaid managed care plan in Ohio and one of the largest in the country, serving more than 800,000 members in Ohio and Michigan. Other discussion items during our time together included pharmacy services, utilization of physician and nurse practitioners, data sources, and a tour of Hospice of Dayton’s 53 bed, 80,250 square foot inpatient unit and grounds.

I was the opening speaker for the Indiana Hospice and Palliative Care Organization’s “Regulatory and Reimbursement Day” conference held in Indianapolis on June 14.

Three CIIC staff members, including Amy Tribbett and Donna Tieman, attended the Hospice Action Network’s (HAN) Advocacy Intensive, which took place just two blocks from the U.S. Capitol at the Washington Court Hotel in Washington, D.C. on June 18-19. This two day conference will focus exclusively on Hospice Advocacy, and telling the hospice ‘story’ to Congress. We’re specifically calling for the people providing care at the bedside to come explain to Congress exactly what hospice looks like in practice. HAN is an affiliate of NHPCO.

ATTACHMENTS TO THIS PRESIDENT’S REPORT

4/20/12 article from The Observer on non-profit business class

Executive Fund Development Leadership Program information page

ELECTRONIC BOARD PACKET ITEMS ON THE BOARD WEBSITE UNDER “NEXT MEETING MATERIALS”

The updated 2013-2014 Human Resources Manual

The revised and updated HIPAA Privacy Policies

HARD COPY BOARD ITEMS TO BE DISTRIBUTED AT THE MEETING

The Board Version of “2011: The Year in Review”

May 2012 Financials

The Confidentiality and Conflict of Interest forms we ask board members to sign annually. We normally do this in April and it was overlooked at the last meeting. New board members who have already signed these two forms do not need to sign again. Please note there will be an additional Conflict of Interest questionnaire related to the filing of our IRS Form 990 (the non-profit tax return) later this year.

NEXT REGULAR BOARD MEETING

Our next regular Board Meeting will be Wednesday, August 15, 2012 at 7:30 AM in Conference Room E in Suite 200. In the meantime, if you have any questions, concerns, suggestions or comments, please contact me directly at 574-243-3117 or email mmurray@centerforhospice.org.

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Students explore business aspect of nonprofits

By NICOLE MICHELS
News Writer

Non-profit business leaders spoke to Notre Dame students last night on how to combine commitment to a cause with a career during "Inspire Purpose: the Business Side of Non-Profits." The event was sponsored by ND8, Inspire and the Career Center.

Sophomore Olivia Boykin, president of Inspire, said the club works to increase the number of student connections with non-profits.

"Inspire's purpose is to serve students interested in non-profits, and we found that we were really lacking in serving business students," Boykin said. "Our goal is to bring that side of non-profits to life...non-profits are still a business and they need business students."

Victoria Lam, a biology graduate student, founded "Swell Cause" as an organization to promote entrepreneurial education and sustainable business incubation in Haiti.

"I feel that through providing people with sustainable livelihoods, in the future they will be self-reliant and be able to provide those things for themselves," Lam said.

Lam said she was compelled to start Swell Cause after seeing the very real need in Haiti for sustainable, long-term development.

"I'm taking another trip down to Haiti to make sure that I'm meeting an actual need and not a perceived need," Lam said. "We're looking for funding so we can establish a permanent presence down there."

Lam said the difference between for-profits and non-profits

lies in accountability.

"In a for-profit you're accountable to your stakeholders, but in a non-profit you're accountable to the people you serve," Lam said. "In a for-profit, it's easy to measure how much money you made [or find other measures of success], but in a non-profit you have to come up with different guidelines to measure outcomes."

Mark Murray, CEO of the Center for Hospice Care, also spoke at Thursday's event. He said the agency provides home care and community support for patients dealing with end-of-life issues. The Center is the largest hospice program in the state of Indiana and cares for 350 patients each day, Murray said.

The key to the Center's success as a non-profit is its integration into the communities of patients and their families, Murray said.

"We count on their connections, the people they know, and their capacity to tell our story," Murray said. "We continue to take all those people and really try to engage them, cultivation [of relationships] is really the whole key to everything."

Murray said because the patients are the Center's top priority, it is not afraid to compete with for-profit hospices.

"We're here to do our mission because we believe that the best care will come from our organization," Murray said.

Sean MacCready, the Alumni Director and External Relations Associate at Saint Ignace College Prep in Chicago, said he learned how schools are financed after the school he taught at was closed down. After teaching for a few years, MacCready said he went into school development and has



ASHLEY D'ACQUA/The Observer

Freshman Bre Thomas and graduate student Victoria Lam listen to Mark Murray, CEO of the Center for Hospice Care, speak about the center's integration into its community.

spearheaded the movement for school choice in Indiana.

MacCready said non-profits must focus on the sustainability of the organization in order to ensure success.

"When you're working in a non-profit organization, a lot of times your key stakeholders are individuals who are being served by your organization, and it is a delicate balancing act to focus not only on the needs being served by your institution, but also your sustainability," MacCready said.

MacCready said his experiences with individuals in the non-profit and for-profit sector led him to strengthen relationships with the community to secure

funding for St. Ignace.

"It's about maintaining relationships ... it's a lot easier to get a grant or to get funding for your non-profit if you know someone," MacCready said. "You have to get into the community, you have to make sure everyone knows that you're doing a good job [in order to find funding]."

Sophomore Alex Rogalski said he learned about a side of business not focused on in his classes at Mendoza.

"Today I learned about the amazing opportunities that are out there for someone who is studying business here to get involved in a non-profit," Rogalski said. "Everything that we learn

here is about gaining as much as possible for shareholders, but we don't learn much about the non-profit side."

Freshman Bre Thomas agreed with Rogalski and said the speakers furthered her knowledge of non-profit careers.

"I came because I had high hopes of working with a non-profit in the future, and just thought that it would be nice to get another perspective for the non-profit as a job," Thomas said. "I learned more about how it is a job, but that you can also fuel your passion while taking care of the business side of it."

Contact Nicole Michels at
nmichels@nd.edu



*The Community Foundation of St. Joseph County
and Notre Dame's Mendoza College of Business present*

EXECUTIVE FUND DEVELOPMENT LEADERSHIP PROGRAM

Building on the success of the Executive Leadership Program in 2009, the Community Foundation of St. Joseph County and the Mendoza College of Business at the University of Notre Dame have joined forces to develop a certificate program tailored to the specific needs of **nonprofit CEOs and development officers**. We invite you to participate in this focused, in-depth program that's designed to help you make the most of your organization's fund-raising opportunities, assuring sustainability and growth for your organization in the future.

Facilitated by **Jimmie R. Alford**, founder and chair of the Alford Group in Chicago, the program's presenters include national experts from around the country with hands-on practical experience in nonprofit administration, as well as some of Notre Dame's top development staff.

The program consists of nine day-long sessions, beginning in September, 2012, and concluding in the spring of 2013. Unlike seminars that present each topic as a stand-alone unit, this program will connect and contextualize all material presented. Numerous case studies will highlight the best practices of other nonprofits, and between-session "take-home" exercises will provide opportunities for in-depth feedback from Dr. Alford focused on your individual organization and its needs.

Participants will receive a certificate in nonprofit executive leadership from Notre Dame's Mendoza College of Business. All sessions will take place on the campus of the University of Notre Dame.

COST: \$1,500 for initial participant; \$1,000 for each additional participant from the same organization. Actual costs are being substantially subsidized by the Community Foundation and Notre Dame.

TO APPLY: Visit <http://www.surveygizmo.com/s3/760406/CommunityFoundation>. Enrollment will be limited to 40 participants on a first-come, first-serve basis. If you have questions, please contact Christopher Nanni at (574) 232-0041.

COURSE INSTRUCTOR/FACILITATOR:

Jimmie R. Alford, LL.D., LH.D., founder and chair, The Alford Group, Chicago, IL.

With 50 years in the nonprofit sector, Jimmie frequently writes and lectures on issues facing the sector. Dr. Alford has been selected twice by the *NonProfit Times* as one of the 50 most influential leaders in the country in the nonprofit sector.

SEPTEMBER 2012

9/25: The Philanthropic Landscape (followed by a networking reception)

9/26: Strategic Differentiation

OCTOBER 2012

10/22: Overview of Effective Philanthropic Strategies

10/23: Annual Fund Strategies

NOVEMBER 2012

11/7: Major Gifts (part 1)

11/8: Major Gifts (part 2)

DECEMBER 2012

12/4: Planned Giving & Endowment Development

JANUARY 2013

1/15: Self-Generated Income

FEBRUARY 2013

2/5: Pulling It All Together (followed by a reception and awarding of certificates)

Each day, registration/breakfast begins at 8 a.m. Training will take place from 8:30 a.m. - 4:30 p.m. Lunch will be provided.



UNIVERSITY OF
NOTRE DAME

Mendoza College of Business

CHAPTER FOUR

MAY 2012

CENSUS CHARTS

Center for Hospice Care
2012 YTD Average Daily Census (ADC)

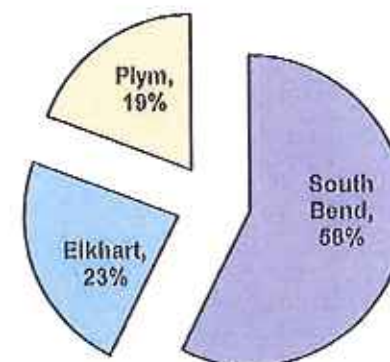
(Includes Hospice House and Home Health)

	<u>All</u>	<u>South Bend</u>	<u>Elkhart</u>	<u>Plymouth</u>
J	355	196	84	74
F	365	207	85	72
M	344	202	75	67
A	336	204	72	60
M	339	207	72	60
J				
J				
A				
S				
O				
N				
D				

2012 YTD Totals	1739	1016	388	333
2012 YTD ADC	348	203	78	67
2011 YTD ADC	334	198	76	61
YTD Change 2011 to 2012	14	5	2	6
YTD % Change 2011 to 2012	4.1%	2.6%	2.1%	9.2%

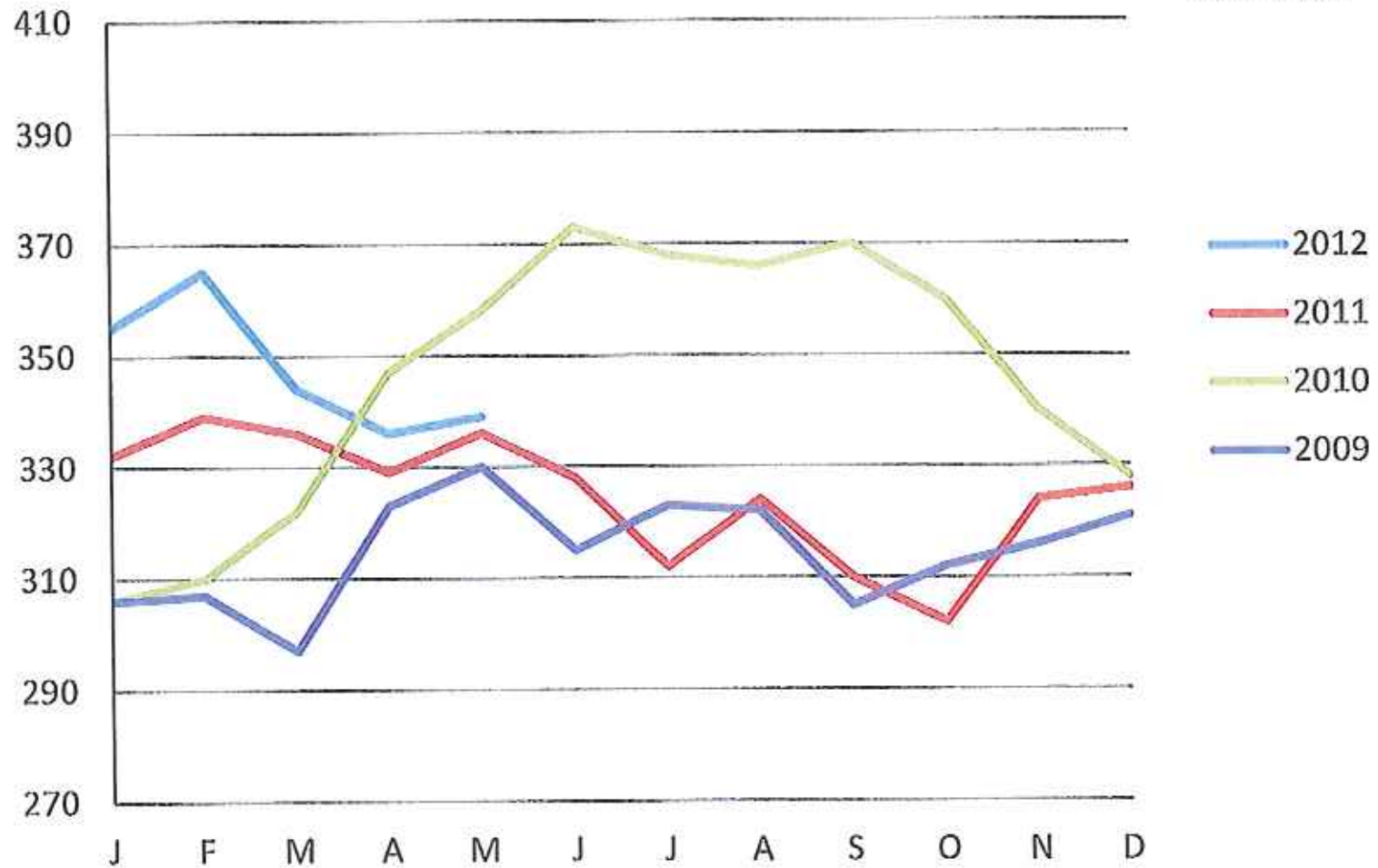
2012 YTD ADC by Branch

South Bend	58.4%
Elkhart	22.3%
Plymouth	19.1%
All	100%



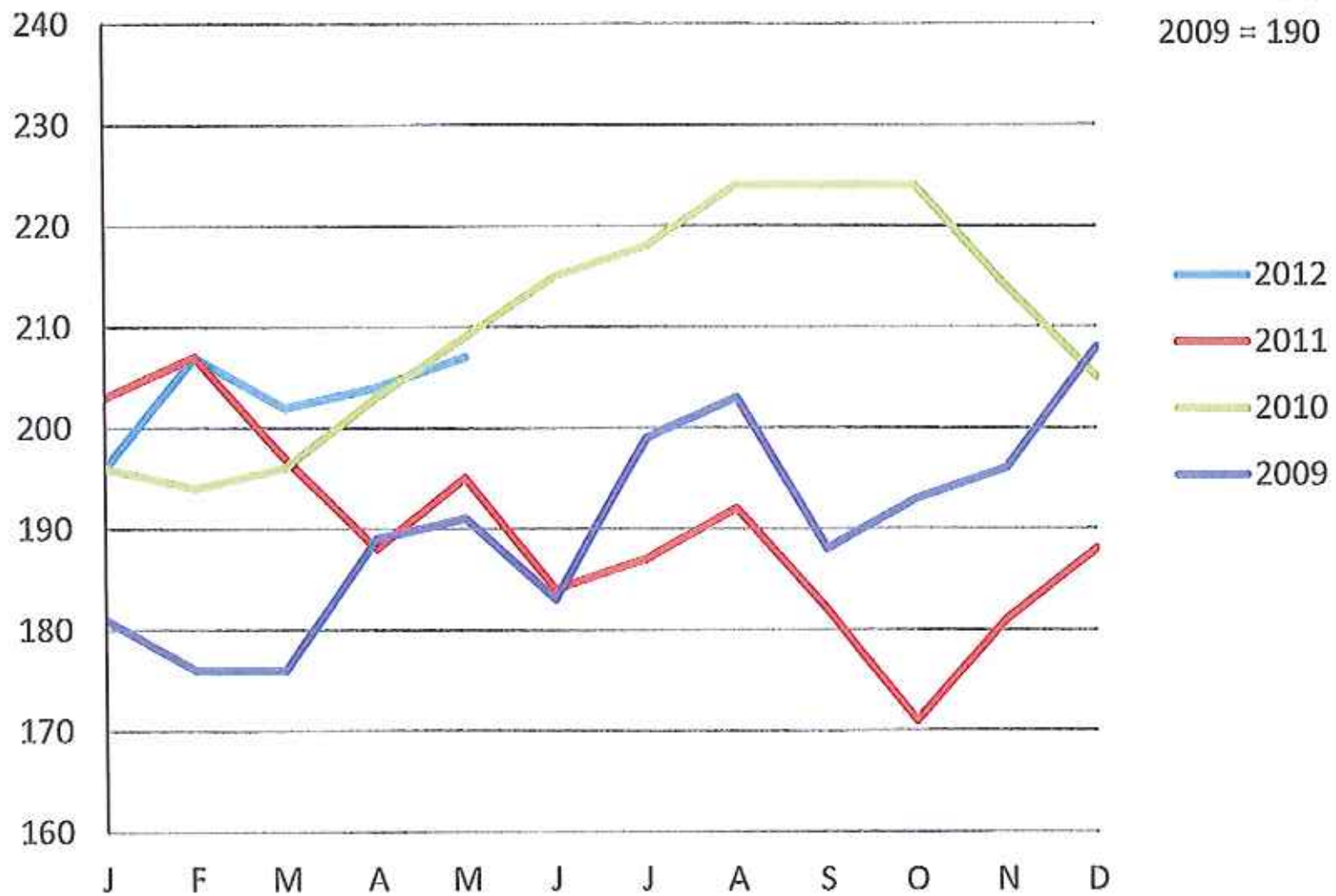
Center for Hospice Care Total Average Daily Census (ADC)

ADC
YTD 2012 = 348
2011 = 325
2010 = 346
2009 = 315



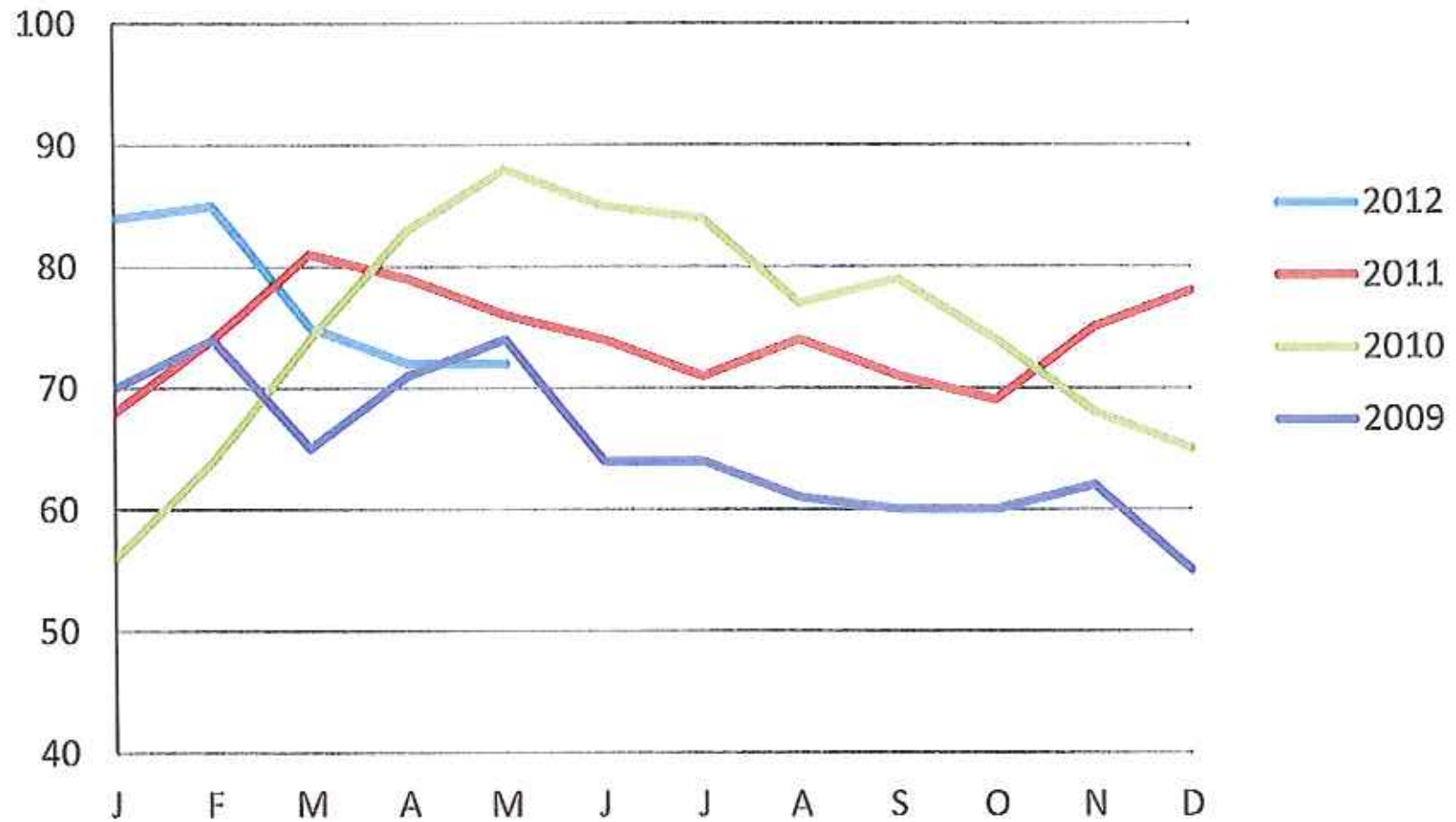
South Bend Average Daily Census

ADC
YTD 2012 = 203
2011 = 190
2010 = 211
2009 = 190



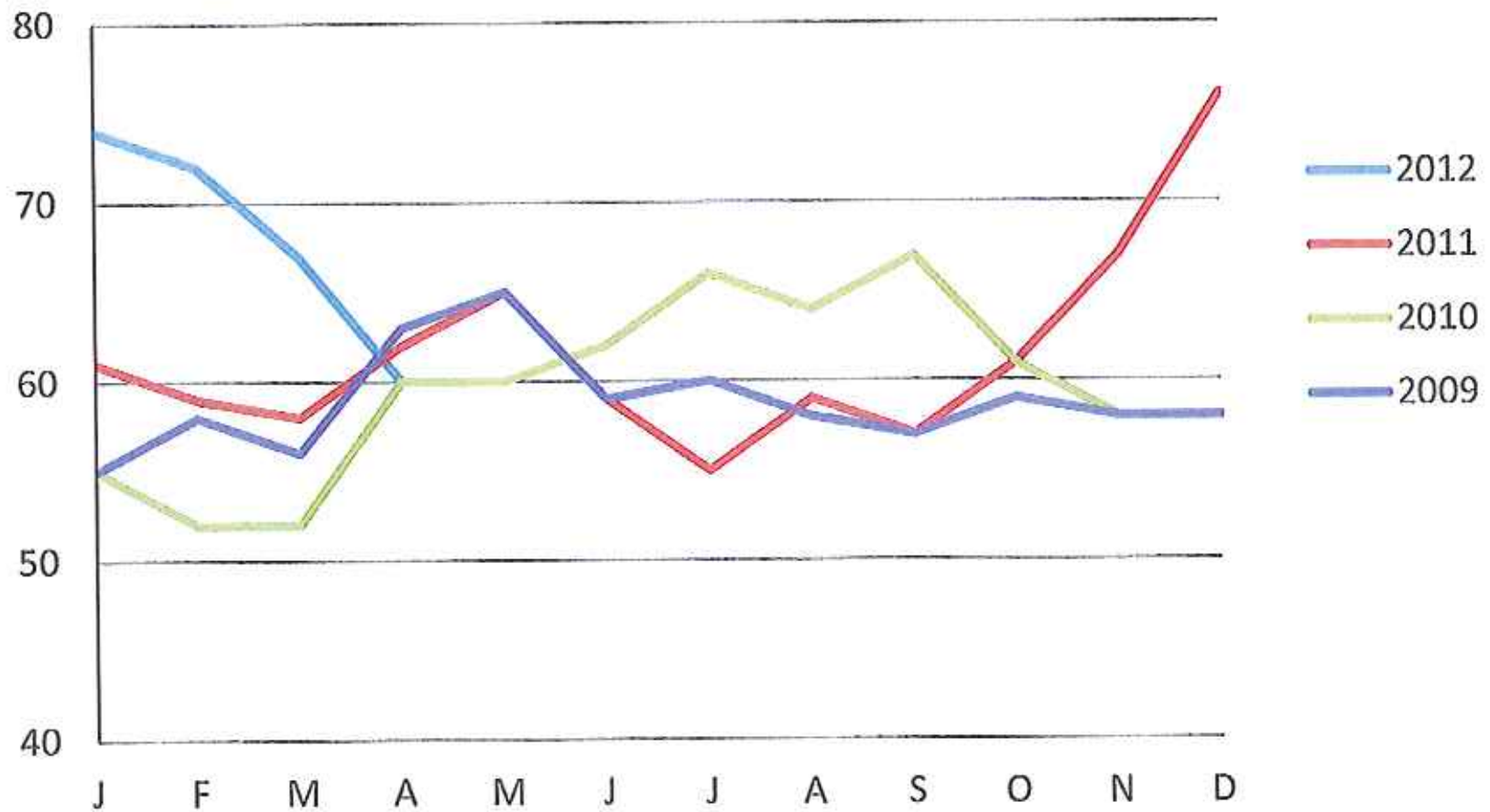
Elkhart Average Daily Census

ADC
YTD 2012 = 78
2011 = 74
2010 = 75
2009 = 65



Plymouth Average Daily Census

ADC
YTD 2012 = 67
2011 = 62
2010 = 60
2009 = 59



CHAPTER FIVE PATIENT CARE POLICIES

Center for Hospice Care
ABBREVIATIONS LIST

Section: Patient Care Policies

Category: Hospice

Page: 1 of 1

PURPOSE: To ensure the use of approved abbreviations whenever documenting information in the patient's chart.

POLICY: All documentation in the patient's file will contain only abbreviations from the approved abbreviations list.

Effective Date: 02/97
Reviewed Date: 05/11

Revised Date: 04/1203/02

Board Approved: 12/16/09
Signature Date: 12/16/09

Signature:



Symbol	Abbrev
# or no.	Number
(-)	Negative
(+)	Positive
(L)	Left
(R)	Right
a	Before
A&Ox3	Alert & Oriented x 3
ac	Before Meals
ad lib	As Desired
ADL	Activities of Daily Living
AIDS	Acquired Immune Deficiency Syndrome
AKA	Above Knee Amputation
AL	assisted living
ALL	Acute Lymphocytic Leukemia
ALS	Amyotrophic Lateral Sclerosis
AM/am	Before Noon
AP	Apical Pulse
APP	Alternating Pressure Pad
AROM	Active Range of Motion
as tol	As Tolerated
ASAP	As Soon As Possible
ASHD	Arteriosclerotic Heart Disease (Coronary Heart Dis
BERV	Bereavement
bid/BID	2 x day
BKA	Below Knee Amputation
BM	Bowel Movement
BP or B/P	Blood Pressure
BS	Bowel Sounds, Breath Sounds, Blood Sugar
BSC	Bedside Commode
c	With
c/o	Complaints of
CA	Cancer
CAD	Coronary Artery Disease
Cap	Capsule
cert	Certification
cg	care giver
CHF	Congestive Heart Failure
CLL	Chronic Lymphocytic Leukemia
COMM	Commercial
COPD	Chronic Obstructive Pulmonary Disease

CRF	Chronic Renal Failure
CVA	Cardiovascular Accident
DAT	Diet as Tolerated
decub	Decubitus
DNR	Do Not Resuscitate
DOA	Dead on Arrival
DOB	Date of Birth
DOD	Date of Death
drsg	Dressing
Dtr	Daughter
DVT	Deep Vein Thrombosis
Dx	Diagnosis
ECF	Extended Care Facility
EF	ejection fraction
ELK	Elkhart
Elix	Elixer
esp	Especially
ESRF	End Stage Renal Failure
EV	Emergency Visit
Fr	french
fx	Fracture
GI	Gastrointestinal
GS	Grandson
GT or G-Tube	Gastrostomy Tube
Gtt or gtt	Drop
GU	Genitourinary
H/A	Headache
HHA	Home Health Aide, Home Health Agency
HHM	Home Health Medicare
HIV	Human Immunodeficiency Virus
HMB	Hospice Medicare Benefit
HOH	Hard of Hearing
Hos	Hospice
HP	history and physical
ht	Height
HTN	Hypertension
Hx	History
I&O	Input and Output
IDDM	Insulin Dependent Diabetes Mellitus
IDT	Interdisciplinary Team
IHPCO	Indiana Hospice & Palliative Care Organization
IM	Intramuscular
IV	Intravenous
lb or #	Pound
lg	Large

Liq	Liquid
LL	Lower Lobe
LLE	Left Lower Extremity
LLL	Left Lower Lobe
LOC	level of care
LUE	Left Upper Extremity
LUL	Left Upper Lobe
LUQ	Left Upper Quadrant
Mcaid	Medicaid
Mcare	medicare
med	Medication
MHB	Medicaid Hospice Benefit
MI	Myocardial Infarction, Heart Attack
mod	Moderate
MMM	Miller's Merry Manor
MOM	Milk of Magnesia
MPOA	Medical Power of Attorney
MSG	Message
MSW	Medical Social Worker
n.c./nc	Nasal Cannula
N/G or NG	Nasogastric
N/V	Nausea/Vomiting
NAD	No Acute Distress
NHPCO	National Hospice & Palliative Care Organization
NIDDM	Non-Insulin Dependent Diabetes Mellitus
NKA	No Known Allergies
NOC	Night
NPO	Nothing by Mouth
NS	Normal Saline
O2	Oxygen
OBT	over bed table
OMM	Oral Mucus Membrane
opth	Ophthalmic
OT	Occupational Therapy
OTC	Over the Counter
PA	pre-assessment
p	After
PC	Phone Call
pc	After Meals
PCC	Patient Care Coordinator
PCG	Primary Caregiver
PCN	Penicillin
PLY	Plymouth
PM or p.m.	Afternoon

PN	Primary Nurse
po	By Mouth
POA	Power of Attorney
POC	plan of care
POT	Plan of Treatment
PRN	As Needed
PROM	Passive Range of Motion
pt	Patient
PT	Physical Therapy
pulm	Pulmonary
PVD	Peripheral Vascular Disease
PVT	Private
qs/QS	Quantity Sufficient
qt	Quart
R or r	Right
R/O	Rule Out
RLE	Right Lower Extremity
RLL	Right Lower Lobe
ROM	Range of Motion
RR	Respiratory Rate
RRR	Regular Rate & Rhythm
RUE	Right Upper Extremity
RUL	Right Upper Lobe
RUQ	Right Upper Quadrant
Rx	Prescription
s	Without
SB	South Bend
SNV	skilled nurse visit
S&S	Signs and Symptoms
SQ	subcutaneous
S/P	Status Post
SC	Supportive Care
SCC	Spiritual Care Counselor
SHB	Self-Pay Hospice Benefit
SL	Sublingual
sm	Small
SNV	Skilled Nursing Visit
SOB	Shortness of Breath
sol or soln	Solution
SSE	Soap Suds Enema
ST	Speech Therapy
STAT	Immediately--NOW!
Suppos	Suppository
SW	Social Worker
TIA	Transient Ischemic Attack
tid/TID	3 x day
TPR	Temperature, Pulse, Respiration

TTE	Titrate to Effect
TUR	Transurethral Resection
Tx	Treatment
UNK	Unknown
UO	Urine Output
URI	Upper Respiratory Infection
UTI	Urinary Tract Infection
VAD	Vascular Access Device
VOL	Volunteer
VS	Vital Signs
VSS	Vital Signs Stable
w/ or c	With
w/c	Wheelchair
w/o or s	Without
wk	Week
wt	Weight
x	Times
y.o.	Year Old
y.o.a.	Years of Age

Rev 03/23/12

CHANGE OF DESIGNATED HOSPICE

Section: Patient Care Policies

Category: Hospice

Page: 1 of 1

- REGULATION:** 42 CFR 418.52 – Patient’s rights
42 CFR 418.104(e) – Clinical records; Discharge or transfer of care
- PURPOSE:** To establish a uniform way that an individual or representative (as appointed by the patient) may change, once in an election period, the designation of the particular hospice.
- POLICY:** The change of the designated hospice is not a revocation of the election for the period which it is made. A change of designated hospice may only occur once for each certification period.
- PROCEDURE:**
1. To change the designation of hospice services, the individual must file a statement with the Agency and with the newly designated hospice. ~~That statement must include~~ Utilizing the Change of Designated Hospice form located on the staff website under Files > Tools, the following information must be provided:
 - The name of the hospice from which the individual has received hospice care
 - The name of the hospice from which the individual plans to receive care.
 - The date the change is to be effective.
 - The certification period in which care is identified
 2. The Agency follows its discharge and transfer policies and procedures when a patient chooses to transfer to another hospice program.
 3. The Agency follows its admission policies and procedures when a patient chooses to transfer from another hospice program to the Agency.

Effective Date: 02/94

Revised Date: 04/12-11/08

Board Approved: 11/05/08

Reviewed Date: 05/11

Signature Date: 11/05/08

Signature:



HOME HEALTH AIDE/CNA ASSIGNMENT AND DUTIES

Section: Patient Care Policies

Category: Home Health

Page: 1 of 1

REGULATION: 42 CFR 418.76(g) -- Home Health Aide and Homemaker Services

PURPOSE: To assist the patient and family with the patient's personal hygiene needs at the end of life.

POLICY: Hospice aides are assigned to specific patients by a hospice RN and follow written patient care instructions in providing care to those patients. These patient care instructions will be documented on the ~~Hospice Aide/CAN Care Plan by the Care Plan~~ by the Registered Nurse in consultation with the patient and primary caregiver. ~~A copy of this plan will be left in the patient's home, with the original in the patient's chart.~~

PROCEDURE:

1. A home health aide/CNA provides services that are:
 - ordered by the Interdisciplinary Team
 - included in the plan of care
 - permitted to be performed under state law by home health aide/CNAs
 - consistent with the home health aide/CNA's training
2. The duties of the home health aide/CNA include the following:
 - the provision of hands-on personal care
 - the performance of simple procedures as an extension of therapy or nursing services
 - assistance in ambulation or range of motion exercise
 - assistance in administering premeasured medications that are ordinarily self-administered
3. Home health aide/CNAs must report changes in the patient's medical, nursing, rehabilitative, and social needs to a registered nurse, as the changes relate to the plan of care and quality assessment and improvement activities.
4. Home health aide/CNAs must complete accurate and legible documentation of services provided to the patient.

Effective Date: 06/04
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Signature:



Center for Hospice Care
PROTECTION OF CLINICAL RECORD

Section: Patient Care Policies

Category: Home Health

Page: 1 of 1

PURPOSE: To ensure protection and confidentiality of clinical records.

PROCEDURE: Clinical records are kept in a nonpublic area. When not under the observation of staff, they are kept in a locked file cabinet. All staff has access to clinical records pertinent to their responsibilities.

Original clinical records can only be removed from an office for the purpose of audit or peer reviews.

The agency backup tape, which includes clinical database, will be secured by the Chief Financial Officer or designee each day.

Release of information is done with written consent in conformity with applicable state laws.

Per Indiana Code 16-39-9-4 ~~a fee of 25 cents per page~~ the Agency may charge a fee for making and providing copies of medical records will be charged for requests for medical records not related to treatment, payment, or health care operations. Payment must be received before the release of the records.

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Signature:



EMPLOYEE SCREENING PROCEDURES

Motor Vehicle Check - verifies validity of driver's license and driving record of individual for last seven years.

State Criminal History Check - this is performed in either Indiana or Michigan depending on current residence of individual being checked. Limited criminal history information is defined as all arrest, indictment, information or other formal criminal charges less than one year old, but only those arrest, indictment, information or formal criminal charges over one year old that include a final disposition.

Professional License Verification - all professional licenses, i.e., nursing, social work, counseling, are verified through the Indiana State Department of Health.

Education Verification - degrees are verified as part of the professional license verification.

Nurse Aide Registry - the Indiana Nurse Aide Registry is checked prior to employment of any home health aide. The registry provides verification of certification and that the home health aide is "in good standing."

IRCA Verification (I-9 form) - new employees are required to provide proof of their identity and work authorization.

Previous Employment - a minimum of two references are checked for employment candidates.

Social Security Number Verification - this is done indirectly by using the social security number to perform the driver's license and professional license search.

Medicare Sanction Check - verifying employee has not been sanctioned by the federal Medicare program.

National Criminal History Check - in accordance with Indiana state regulations, a national criminal history check, done via fingerprinting, is completed on employees hired after 07/01/09 if they provide patient care under CHC's home health program and lived outside the state of Indiana during the two year period prior to their hire date.

Pre-Home Placement Physical – According to Indiana State Department of Health guidelines, prior to beginning work with CHC, all direct patient care employees must submit documentation showing their status regarding infectious and communicable disease.

Center for Hospice Care
TRANSFER OF A HOSPICE PATIENT

Section: Patient Care Policies

Category: Hospice

Page: 1 of 1

REGULATION: 42 CFR 418.104(c) – Clinical records; Discharge or transfer of care

PURPOSE: To provide for continuity of care for patients transferring to or from our Agency. This will apply for Hospice Medicare Benefit (HMB) patients, and Medicaid Hospice Benefit (MHB) patients who have Medicare/Medicaid in the state of Indiana.

PROCEDURE: An IDT meeting will be held to coordinate patient care when transferring to or from another hospice.

Determine the patient's present insurance coverage. If they are HMB, determine if the hospice they are transferring to is certified to provide the Hospice Medicare Benefit. This also applies to MHB if the patient has Indiana Medicaid and transferring within the state of Indiana.

Contact and provide the transferring hospice the following:

- **Change of Designated Hospice form (see Change of Designated Hospice policy)**
- Transfer Summary
- Patient Profile
- Medication Profile
- Certification of Terminal Illness
- No Code Blue (if applicable)

The patient will be informed of the financial implications. If the patient is not enrolled in either the Medicare/Medicaid systems, it will be considered a discharge from the Agency.

The Discharge Summary would be completed as usual and sent to the physician.

Documentation on the IDT note must include:

- reason for the transfer or discharge
- the forms completed
- the name and phone number of the receiving hospice

Document transfer or discharge in the admissions/discharge section of the computer.

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Signature Date: 01/17/06

Signature:

