

choices to make the most of life

New Board Member Orientation January 29, 2021

History of Hospice

- The term "hospice" can be traced back to medieval times, used to describe a place of shelter for travelers on long and difficult journeys.
- 1065: First hospices are believed to have originated in the 11th century, around 1065, when for the first time the incurably ill were permitted into places dedicated to treatment by Crusaders.

History of Hospice

 1967: The name "hospice" was first applied to specialized care for dying patients by physician Dame Cicely Saunders in 1967 when she opened St. Christopher's Hospice in London.



History of Hospice

• 1974: First Hospice program in the United States opens in New Haven, CT.

 1986: The Medicare Hospice Benefit is made permanent by Congress. States given option of including hospice in Medicaid programs. Hospice care available to nursing home residents. The stage is now set for unprecedented social change in care at the end of life.

Our Local History:

Community-Based, Volunteer Founders

Center for Hospice Care

(CHC)

is a freestanding, community-based, not-for-profit entity. We are not owned or legally affiliated with any hospital or other healthcare institution.

Services

- Hospice
- Home Care (Palliative Care)
- Grief Counseling
- Community Education
- Milton Adult Day Services

Mission

To improve the quality of living

Vision

 To be the premiere hospice and palliative care organization for all endof-life issues.

Values

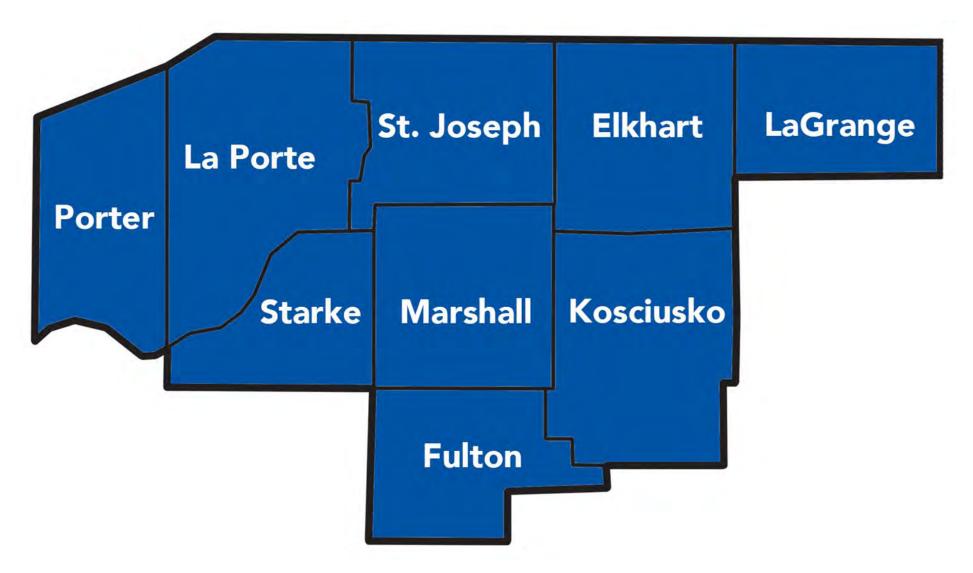
Compassion • Dignity • Innovation • Integrity • Quality • Service • Stewardship

Services are provided without regard to age, gender, race, religion, disability, sexual orientation, diagnosis or ability to pay for services. No one is ever turned away due to the inability to pay.

2020: A Milestone Year for CHC in Caring for Patients



Serving northern Indiana



Locations

Center for Hospice Care

501 Comfort Place Mishawaka, IN 46545

Center for Hospice Care

112 South Center Street Suite C Plymouth, IN 46563

Center for Hospice Care

22579 Old US 20 East Elkhart, IN 46514

Center for Hospice Care

309 West Johnson Road La Porte, IN 46350 Main Office, Administration, Hospice Foundation, Global Partners in Care, Life Transition Center

501 Comfort Place Mishawaka, IN 46545

Center for Palliative Care

211 North Cedar Street Mishawaka, IN 46545

Milton Adult Day Services

922 East Colfax South Bend, IN 46617









South Bend

Plymouth

Elkhart

La Porte



Mishawaka Campus



Center for Palliative Care

Hospice Care

The person must have any progressive or

incurable illness and a limited life

expectancy, and the physician must certify

a prognosis of six months or less... IF THE

DISEASE FOLLOWS ITS NORMAL COURSE.

Palliative Care at CHC

The person must have any progressive or incurable

illness and a limited life expectancy of six months or

less is not a requirement or a consideration.

However, they are frequently on a trajectory toward

eventually qualifying for hospice care.

Palliative Care

To treat a person's symptoms from an illness and provide support to the patient and family.

Palliative Care

To treat a person's symptoms from an illness and provide support to the patient and family.

Hospice Care

Palliative care for those with limited life expectancy

CHC is the only hospice program in its service are to operate Medicare certified Hospice Inpatient Units.

Currently two units, a seven-bed unit in Elkhart that opened in 2008 and a 12-bed unit in Mishawka that opened in 2020, replacing, the seven-bed unit in South Bend that opened in 1996.

Hospice House







Esther's House Nurses Station Elkhart

Center for Hospice Care

Based upon annualized numbers of patients served, CHC now ranks in at least the top 3% of all hospice programs in the United States.

CENSUS

Patients Served Last Nine Years

```
2020 = 2,099 \text{ up } 1.35\%
 2019 = 2,071 \text{ up } 1.27\%
   2018 = 2,045 down 2\%
   2017 = 2,091 down .009\%
      2016 = 2,109 \text{ up } 0.33\%
       2015 = 2,102 down 1\%
        2014 = 2,123, up 7%
          2013 = 1,993, up 7\%
           2012 = 1.866, up 1%
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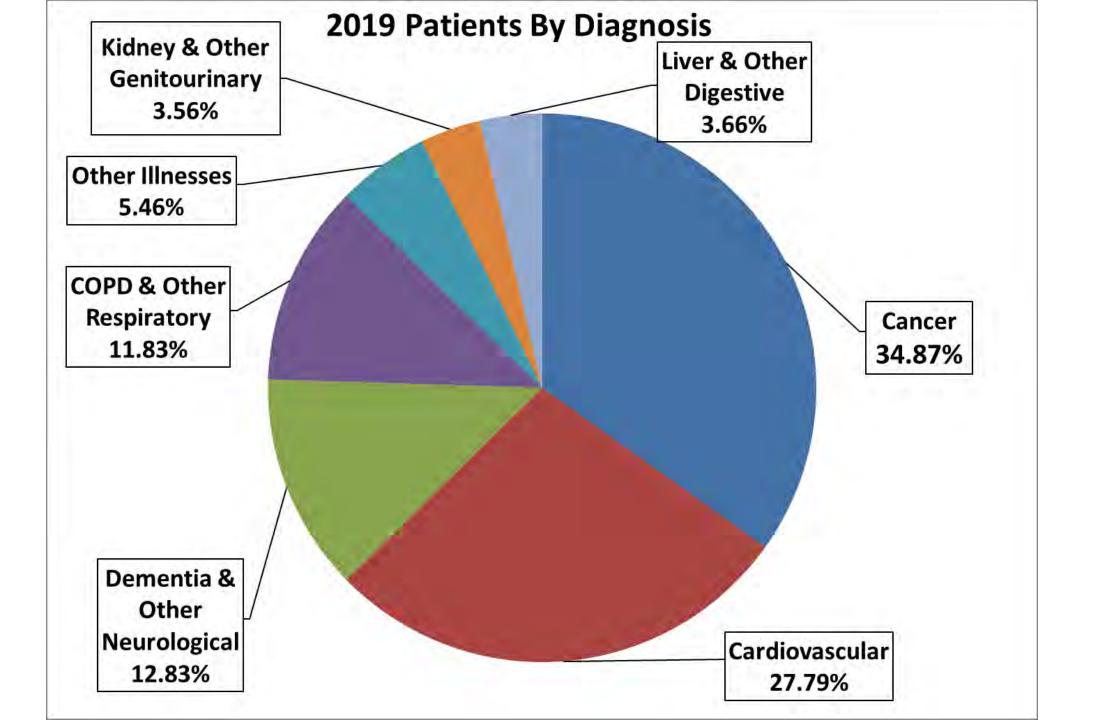
Growth Since the Beginning...

Since 01/01/80 through 12/31/20, on an annually added basis, CHC has cared for **41,177** patients.

Nearly half (49%) of all the patients served by CHC over the course of 40 years have been seen in just the last ten years alone.

25%

of all the patients served by CHC in its 40-year history have been served in just the last FIVE years alone.



CHC: An Education Destination

PHYSICIAN EDUCATION

Mayo Clinic

Indiana University School of Medicine

Residency Programs of Memorial Hospital and SJRMC

Midwestern University (Glendale, AZ)

Lincoln Memorial University-DeBusk College of Osteopathic Medicine (Harrogate, TN)

NURSING

Ball State

Bethel College

Grace College

Indiana University South Bend

Saint Mary's College

Indiana Wesleyan

SOCIAL WORK

Indiana University South Bend

SPIRITUAL CARE

Moreau Se<mark>mina</mark>ry

BEREAVEMENT

Andrews University

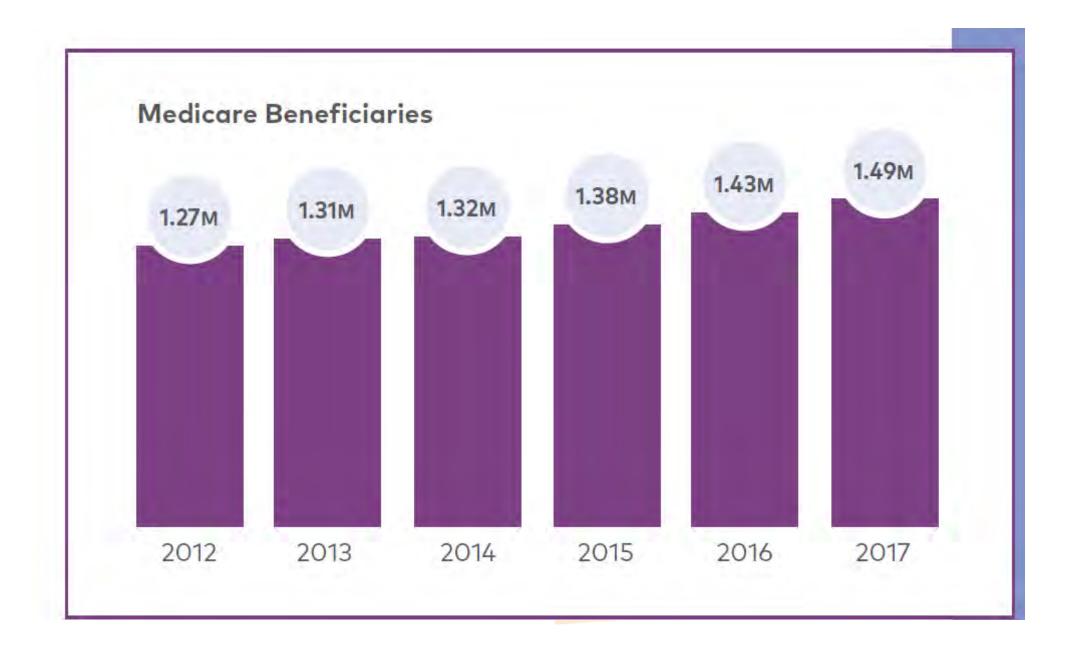
HEALTH AND HUMAN SERVICES

Western Michigan University

COLLABORATION

University of Notre Dame Holy Cross College Goshen College

Recent Hospice Growth in the Unites States

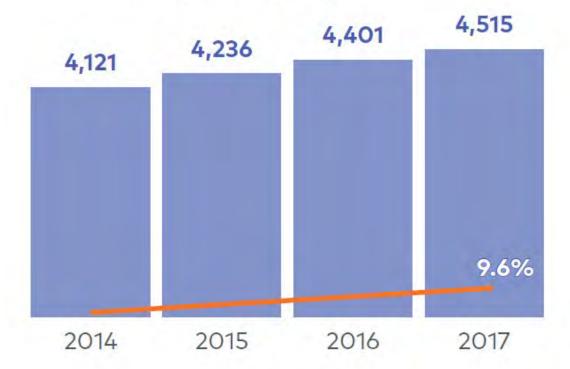


Who Provides Care?

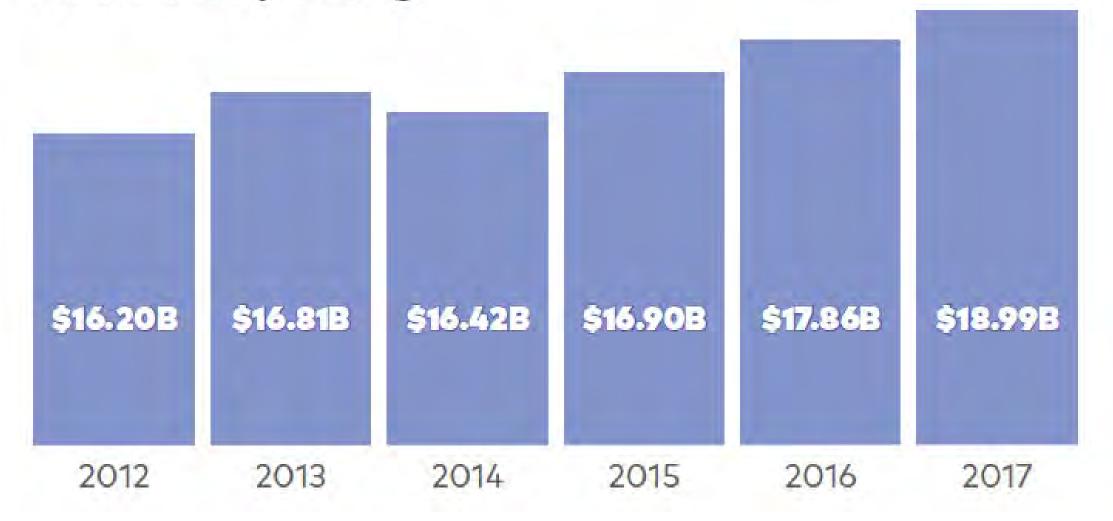
How many hospices were in operation in 2017?

Over the course of 2017, there were 4,515 Medicare certified hospices in operation based on claims data. This represents an increase of 9.6% since 2014.

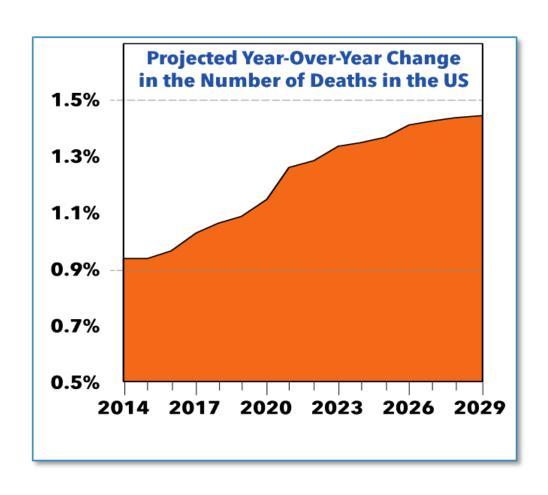
Number of Operating Hospices



Medicare Spending

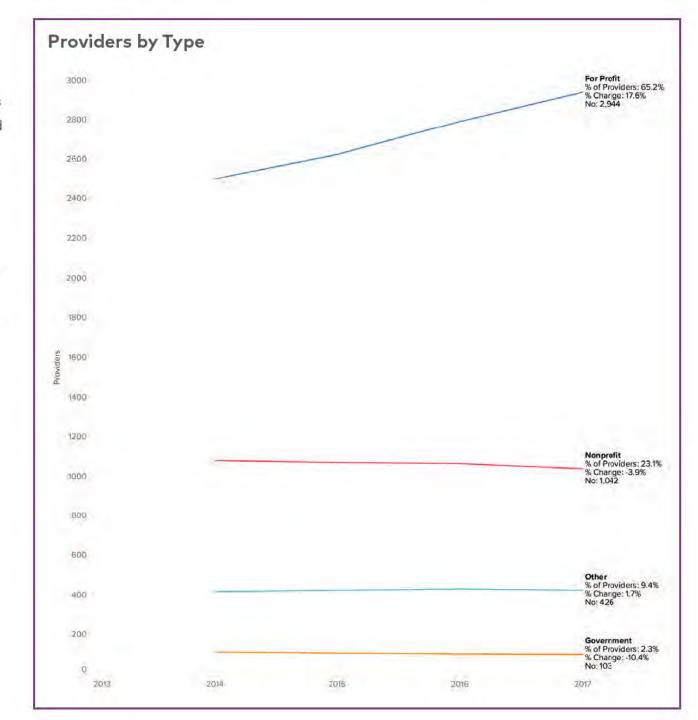


Baby Boomers will Drive Continued Growth and Competition

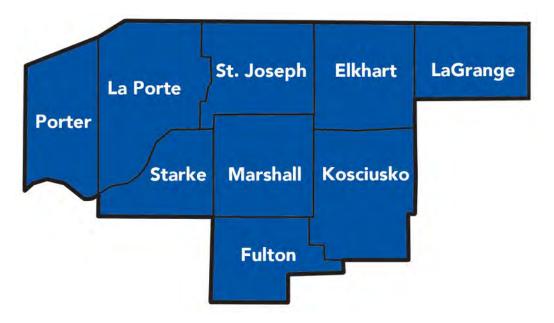


Tax Status

62.2% of active Medicare provider numbers were assigned to hospice providers with for-profit tax status and 23.1% with not-for-profit status. For-profit hospice providers grew more than 17% since 2014 while non-profit hospice providers retracted 3.9%. Government-owned hospice providers comprised only 2.3% and has also declined.



Area Hospices in 2021



There are at least 31 different hospice agencies operating in the CHC service area with at least 22 for-profit, chain hospice programs operating in our service area with some headquartered outside of Indiana.

31 Competitors Within Our Service Area

- CENTER FOR HOSPICE CARE
- ANEW HOSPICE
- ASERACARE HOSPICE
- BROOKDALE HOSPICE
- CAMERON HOME HEALTH CARE & HOSPICE
- COMFORT 1 HOSPICE, LLC
- DUNES HOSPICE
- ELARA CARING
- FAMILY HOSPICE & PALLIATIVE CARE
- FRANSISCAN HOSPICE CARE
- GOSHEN HOME CARE & HOSPICE
- GUARDIAN ANGEL HOSPICE
- GRACE HOSPICE
- HARBOR LIGHT HOSPICE
- HEARTLAND HOME HEALTH CARE AND HOSPICE

- HEART TO HEART-MISHAWAKA
- HEART TO HEART HOSPICE-MARION
- HEART TO HEART HOSPICE FT WAYNE
- HOSPICE OF THE CALUMET AREA
- KINDRED HOSPICE
- KOSCIUSKO HOME CARE & HOSPICE INC
- PARKVIEW HOME HEALTH & HOSPICE
- PHYSIOCARE HOSPICE, LLC
- PREMIERE HOSPICE & PALLIATIVE CARE
- PROVIDENCE HOSPICE
- SOUTHERNCARE SOUTH BEND
- ST ANTHONY HOSPICE
- TRANSISTIONS INDIANA
- UNITY HOSPICE OF NORTHWEST INDIANA LLC
- VIAQUEST HOSPICE OF INDIANA, LLC.
- VNA HOSPICE HOME CARE

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Hospice Patients Live Longer

- A 2010 study released by the New England
 Journal of Medicine found that among patients
 with non-small-cell lung cancer, those who
 received palliative care lived, on average,
 almost two months longer than those who
 received standard care.
- For all diseases, hospice patients generally live 27 days longer than non-hospice patients with similar diagnoses.

Locally, for CHC in 40 years...

- From 27 patients served in 1980 to 2,099 in 2020
- From an ADC of 4 in 1980 to 431 in 2020
- From one county in 1980 to serving nine counties today
- From one care office in 1980 to four today, two inpatient units with 21-beds, a Mishawaka campus headquarters with a community bereavement center, administration & foundation offices, a medical staff building, a palliative care outpatient clinic, and a Guest House
- Added an Adult Day Services agency and an International Partnership agency to promotes hospice and palliative care worldwide

"You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die peacefully, but also to live until you die."

—Dame Cicely Saunders



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THE IMPERFECT BOARD MEMBER

DISCOVERING

the

SEVEN DISCIPLINES

of

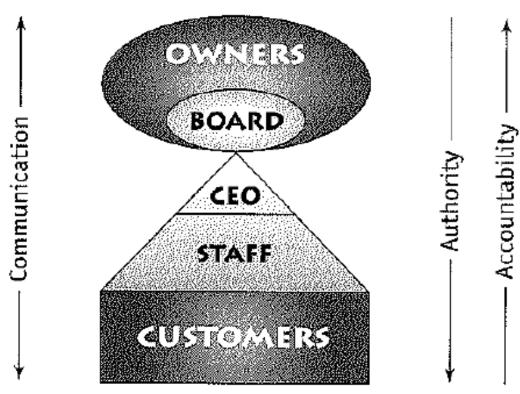
GOVERNANCE

EXCELLENCE



JIM BROWN

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The Board has just a few responsibilities:

- Hire/Terminate the Pres/CEO, their only employee.
- Approve Policies and not become involved in day-to-day operations.
- Be good Ambassadors on behalf of the organization in the community.



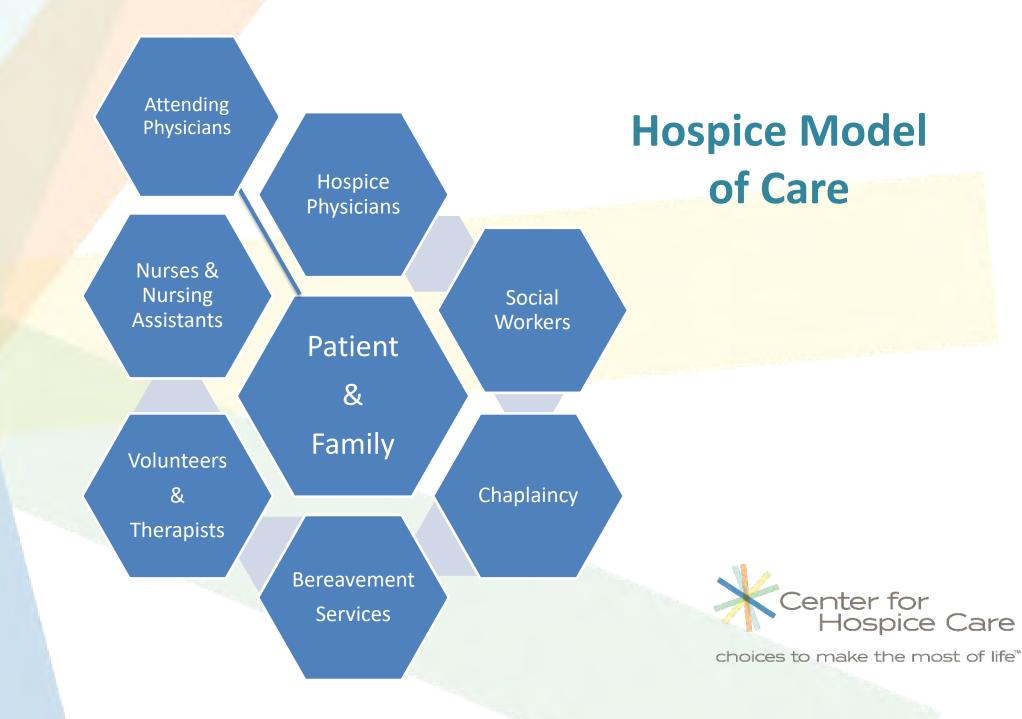
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New Board Member Orientation January 29, 2020

Nursing and Quality

Angie Fox, RN BSN CHPN
Director of Nursing





Levels of Care



- * Home Care
- * Continuous Care
- * General In-patient Care
- * Respite Care



Hospice & Palliative Home Care

- * Home setting
- Family member or designee, serves as the primary caregiver
- * CHC team members make regular visits to assess the patient and provide skilled care or other services

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Care Includes

- * DME
- * Supplies
- * Medications
 - * Teaching
- * Procedures & Treatments
 - * Labs



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Team members

Federal regulations specify that the team must have at least the following:

- Patient's choice of Attending
- Hospice Physician/Nurse Practitioner
- Registered Nurse
- Social Worker
- Chaplaincy
- Bereavement



Additional Team Members

- * Certified Nursing Assistants
 - * Pharmacists
 - * Volunteers
 - Dietary counselor
 and others



Team Communication & Care Planning

- Daily communication among team members as needed
- Warrants, but no less frequently than every 15 days
- An Interdisciplinary Team(IDT) approach: through team meetings & direct communications



Nurses Roles

- CHC has nurses who work in a variety of roles:
- RN Case Managers
- Triage/ Emergency Visit Nurse
- Inpatient Nurse
- Quality Department



RN & LPN's

Highly specialized end-of-life care, such as:

- * CPR, TB validation, Phlebotomy training
- Many are certified in Hospice and Palliative Care (CHPN)
- Pediatric Care—Nurses receive specialty training via End of Life Nursing Education Consortium (ELNEC) curriculum
- Training in care of the Veteran at the End of Life
- Infusions by Central Venous Access(CVAD) or Subcutaneous
 via pumps
- * End of life symptom management



RN Case Management

- Collaborative practice—while managing a case load of patients
- Communicating with Physicians and Nurse Practitioners
- Prioritizing and establishing care needs
- * Educating Patients and Families
- * Critical thinking and problem solving
- Symptom management and care planning

Emergency Visit/Triage Nurse

- * Evaluates symptoms and interventions via telephone or home visits
- Rerforms routine patient care visits and admissions



Inpatient Unit Nurse

- Direct care in our inpatient settings—
 Mishawaka and Elkhart
- Symptom Management to meet General Inpatient Level of Care regulations
- Caring for Patients during a Respite stay



Certified Nursing Assistants

- Certified through the State of Indiana as C.N.A's
 & Home Health Aides
- Receive in-depth training annually—12 hours of inservice in various subjects, such as:
 - ✓ End-of life care
 - ✓ Infection Control
 - ✓ Safety and Body mechanics
 - ✓ Infection Control
 - ✓ Team Communication & reporting observations
 - ✓ Dementia Care



Patient Care Coordinators



Chrissy Madlem



Alice Wolff



Kim Geese



Christine Heinold

ADON and QA/Medical Records Coordinator



Tammy Huyvaert

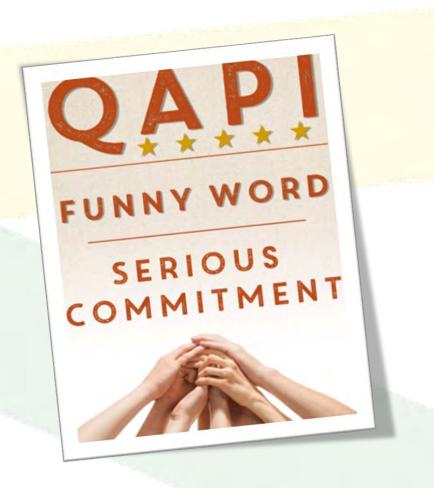


Natalie Barnes



Quality Assessment and Performance Improvement

QAPI Programing





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Who cares about Assessing Quality and Improving Performance?

Internal Stakeholders include:

- Direct patient care employees—Nurses, Social Workers, Doctors/NP's, Chaplains, CNA's
- * Admissions and Access employees
- * Patients Care Coordination Leaders—for Nursing, Chaplaincy, Social Work and Bereavement
- * Executive Leadership
- Board of Directors

External stakeholders

- Federal & State Agencies—CMS, OIG, State Board of Health
- * Community members

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ospice Care

Center for

Improvement Projects

We select Performance Improvement projects(PIP's) for QAPI teams based on:

- •High risk, high volume or problem prone areas
- •Incidence, prevalence and severity of the problems in those areas
- •Improvement in palliative outcomes, patient safety and quality care—not, exclusively clinical
- Prioritized needs of our patients and any internal agency needs



QAPI programming Success Stories

External QAPI Programming:

- "Trouble Breathing" on the Consumer Assessment of Healthcare Provider & Systems (CAHPS) survey
- * Hospice Item Set (HIS)—Comprehensive pain assessment
- Outcome Assessment Information Set (OASIS)



QAPI Programing must haves...

- * Infection Control and Surveillance
 - * Adverse Events monitoring
 - * Consumer Concerns
 - * Family Satisfaction
 - * Ensuring Staff Competence



QI Committee

- Meets quarterly and is comprised of a cross section of agency leaders and board members
- * Reviews current projects
- * Approves new projects
- * Reviews public reporting



CHC Clinical Staff Educator



Amber Doland



Clinical Education

- * Organized and detailed orientation program—includes classroom & hands on learning for all clinical disciplines
- * Clinical staff education is individualized to meet employee's learning styles—such as:
- Live presentation
- Webinars
- Self Learning Modules
- ☐ Small group and 1:1 training
- Preceptor program—training on how to train and educate new colleagues
 Cent

ospice Care

Clinical Education

On going or annual training topics can include:

- ☐ Infection control
- Disaster Preparedness
- HIPAA
- ☐ Hospice and Home Health Compliance
- Abuse and Neglect
- ☐ High risk/low frequency areas
- Any topic associated with Performance Improvement Projects(QAPI's)

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lospice Care

Clinical Education

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 Cent

ospice Care

Welcome to CHC





Clinical Operations

Lance Mayberry, MBA

VP / Chief Operating Officer



Clinical Operations



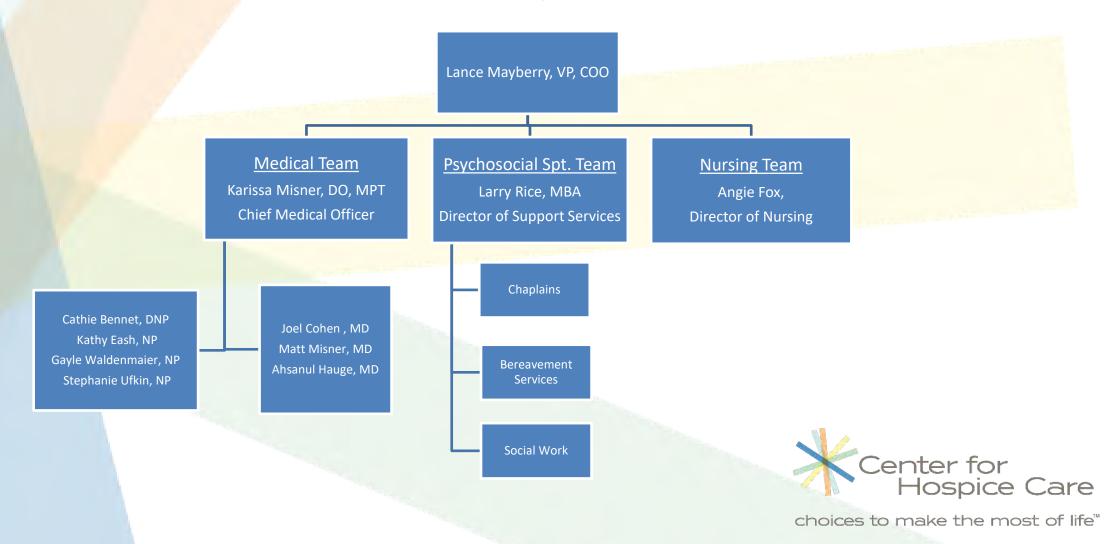


HOSPICE

PALLIATIVE CARE



Clinical Operations



Medical Team

- Interdisciplinary Team Members
- Direct Patient Care and Take Call
- Certify Patients as Terminally III
- Document Patient Decline = Recertify
- Ventilator Withdrawals = about 20/year
- Education
 - Hospice and Palliative Medicine Fellows
 - Family Medicine Residents
 - Medical School Students



Faculty Memberships

- Mayo Clinic, Palliative Medicine Fellowship Program
 - Rochester, MN
- Indiana University School of Medicine, Palliative Medicine Fellowship Program
 - Indianapolis, IN
- Indiana University School of Medicine
 - South Bend, IN



Social Work Services

10 Social Workers with Masters Degrees

Interdisciplinary Team Members

Work With Patients and Families (children)

- Social and Financial Counseling
- Community Resources

Teaching

- School Affiliations
- Community Education



Spiritual Care Services

- NON-DENOMINATIONAL not restricted to any particular religious denomination
- 7 Counselors with Masters Degree or equivalent
- NIJH Certification
- Interdisciplinary Team Members
- Annual Memorial Services
- Funerals
- Weddings
- Teaching



- FREE Services for 13 Months
- 31% of Clients are Non-Hospice Related
- 11 Counselors with Masters Degrees
 - Individual and Group Counseling
- Art Counseling Program = 3 days a week
- Services to Employers and Schools
- 2020 Virtual Memorial Services
- 2019 Memorial Services = 508 Attended





- Served 3,055 clients in 2020 and for the past 7 years have served on average more than 3,000 bereaved each year
- Provided 4,685 counseling sessions in 2020, increasing each year since the 3,232 sessions provided in 2015.



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- Living with Loss: time limited group offering education and support
- Finding Resilience: ongoing group for those early in their grief
- Rebuilding Our Lives: ongoing group for those further along in their grief
- Yoga Grief Support Group: facilitated by Bereavement Counselor who is a 500 hour Registered Yoga Teacher
- Loss After Addiction: ongoing group for those who experienced a death from overdose and/or abuse of alcohol/drugs







- Forget Me Not: ongoing group for parents who have experienced the death of a baby
- Loss of Adult Child Group: ongoing group for parents who experienced the death of their adult child
- Young Widows and Widowers: ongoing group for those around 55 years old and younger
- Good Grief Gals Tea: ongoing group for women who experienced the death of their spouse/partner
- Good Grief Guys: ongoing group for men who experienced the death of their spouse/partner
- Children's Grief Support Group: time limited group for 6-12 year olds
- **Teen Grief Support Group**: ongoing group for ages 13-17 (18 if still in high school)
- School Groups: time limited groups offered at area schools



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Palliative Care

- Palliative Care Consultants
 - Elkhart General Hospital
 - Memorial Hospital
 - SJRMC Mishawaka and Plymouth
- Palliative Care Center
- Community in Home Services



Specialty Programs

Hospice & Palliative

HeartWize - Out of 1,228 patients*

99% did not go to the ER

98% were not admitted to a hospital

BreatheEazy - Out of 964 patients*

99% did not go to the ER

97% were not admitted to a hospital

Dementia Care

Clinical pathways

Staff training

Medication Management



Thank You For Your Service and Welcome to the Board!



Financial Summary Board Orientation January 29, 2021

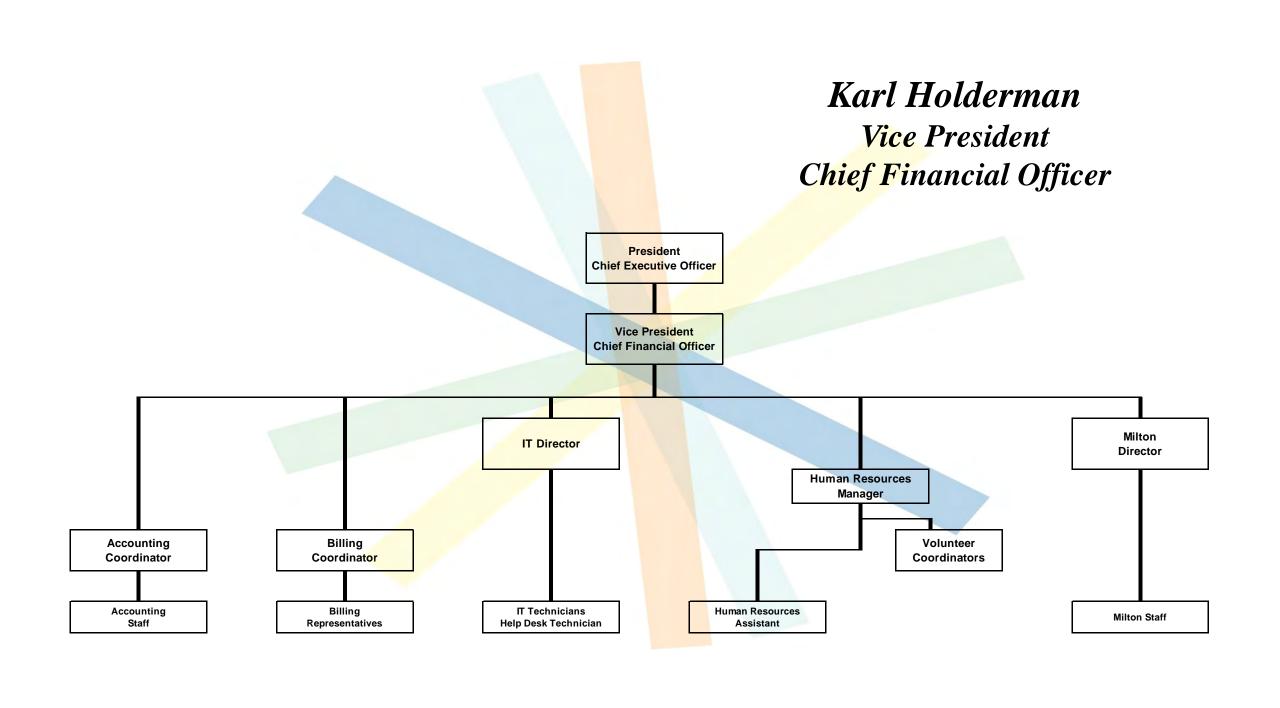
Center for Hospice Care

Hospice Foundation

Milton Adult Day Services

Global Partners In Care

Karl Ho<mark>lder</mark>man Vice President / Chief Financial Officer



Volunteer Services

We are required to utilize volunteers per Medicare guidelines. More importantly, volunteers assist caregivers by providing opportunities to get away for a much needed break. Our well trained volunteers have many opportunities to help, from respite care, to companionship, pet visitation, Life Bios, bereavement services and more. Volunteers tell the family and patient that they are a valued part of the community. Volunteer opportunities are also available in areas aside from traditional patient care settings.

Most Requested Volunteer Needs

Home Visit Volunteer: This is our most requested volunteer opportunity (and our ongoing biggest need). These volunteers provide companionship to patients who live in their homes and respite for their caregivers.

Inpatient Care Facility Volunteer: Provide support to patients and families, as well as our staff, in one of our two facilities located in Mishawaka and Elkhart.

CHC Volunteers annually provide an average of nearly 16,000 hours of service in various capacities We can't thank them enough!!!

Milton Adult Day Services

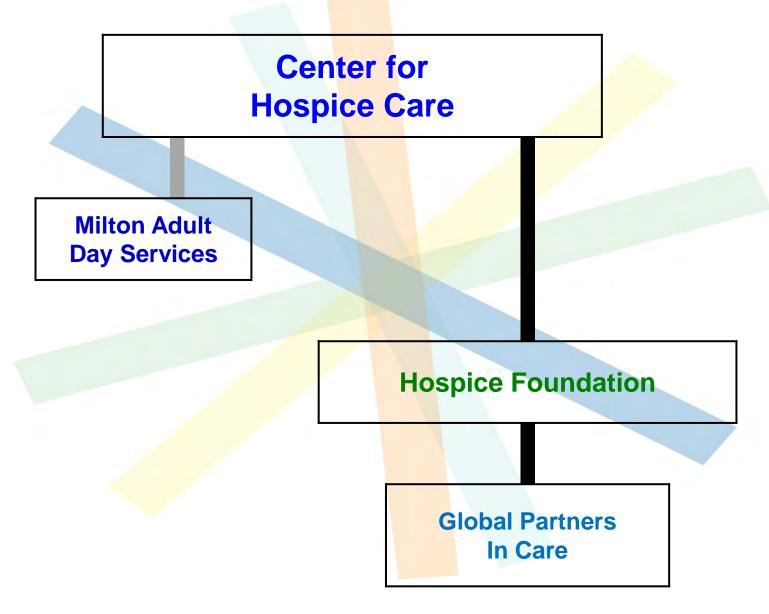
Serving our community since 2004, Milton Adult Day Services provides a structured setting to adults who need health, social, and support services during the day. This community-based service is designed to meet the individual needs of functionally impaired adults who require supervision during the day. Milton Adult Day Services' promise is to be respectful, offer opportunities for an enhanced quality of life, and assure the safety of our clients.

Milton Adult Day Services provides a therapeutic activities-based program designed to serve adults with the following conditions:

Dementia
Alzheimer's Disease
Decrease in physical, mental, or social functioning
Stroke, Parkinson's disease, Multiple Sclerosis, Diabetes, etc
Social isolation
Illness, injury, or surgery recovery

http://www.miltonads.org

Financial Structure



Financial Structure

Global Partners In Care

- Separate 501c3 entity
- Hospice Foundation is sole corporate member
- Financials "roll-up" into Hospice Foundation Balance Sheet & Income Statement Beneficial Interest in Affiliate

Hospice Foundation

- Separate 501c3 entity
- Type II Supporting Organization
- Common control with supported organization Board overlap
 President / CEO; Vice President / CFO
- Financials "roll-up" into CHC Balance Sheet & Income Statement
 Beneficial Interest in Affiliate

Milton Adult Day Services

- Separate LLC (Center for Adult Day Services)
- Center for Hospice Care is sole member ("disregarded entity")
- Separate line item(s) on CHC Balance Sheet & Income Statement

December - YTD

Year to Date Summary	Center for Hospice Care	Hospice Foundation	GPIC	Combined
CHC Operating Income				0
MADS Revenue				0
Development Income				0
Partnership Grants				0
Investment Income (Net)				0
Interest & Other				0
Beneficial Interest in Affiliate				
Total Revenue				0
Total Expenses				0
Net Gain				0
Net w/o Beneficial Interest				
Net w/o Investments				0

Revenue Sources

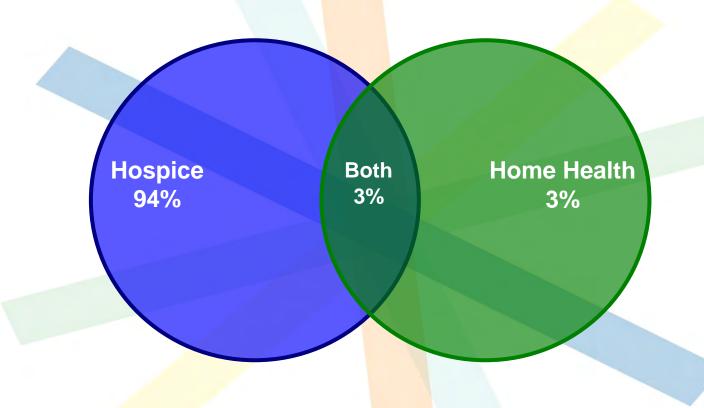
Operations --- "What we do" (85%)

Center for Hospice Care

Development a/k/a Fundraising (10%)

Hospice Foundation

Investment / Interest / Other (5%)
Hospice Foundation



Hospice

(95% of patients; 97% of operating revenue)

Home Health

(5% of patients; 1% of operating revenue)

Hospice

Per diem reimbursement

Responsible for all visits, meds, DME, etc

Based on patient location and level of care

CBSA (STJ, Elk, LaPorte, Rural Indiana)

Routine (Home, ECF, ALF, GH, CHC IPU's)

Different rates for days 1-60 and days 61 and over

Respite (CHC IPU's)

Continuous Care (Home)

Inpatient (Hospital, CHC IPU's)

Medicare / Medicaid / Commercial Insurance / Self Pay Self Pay has a sliding fee schedule

Home Health

Responsible for all visits (RN, HHA, SW, PT/OT/ST)

Not responsible for meds, DME, etc

Medicare pays episodic

New in 2020 ---

Certified in 60 day periods / Paid in 30 day periods

Medicaid / Commercial Insurance / Self Pay

Reimbursed per visit

Self Pay has a sliding fee schedule

Milton Adult Day Services

Billed in 15 minute increments
Meals, snacks, activities
Medicaid Waiver/ VA Insurance / Self Pay

Revenue Sources - Foundation

Development a/k/a Fundraising

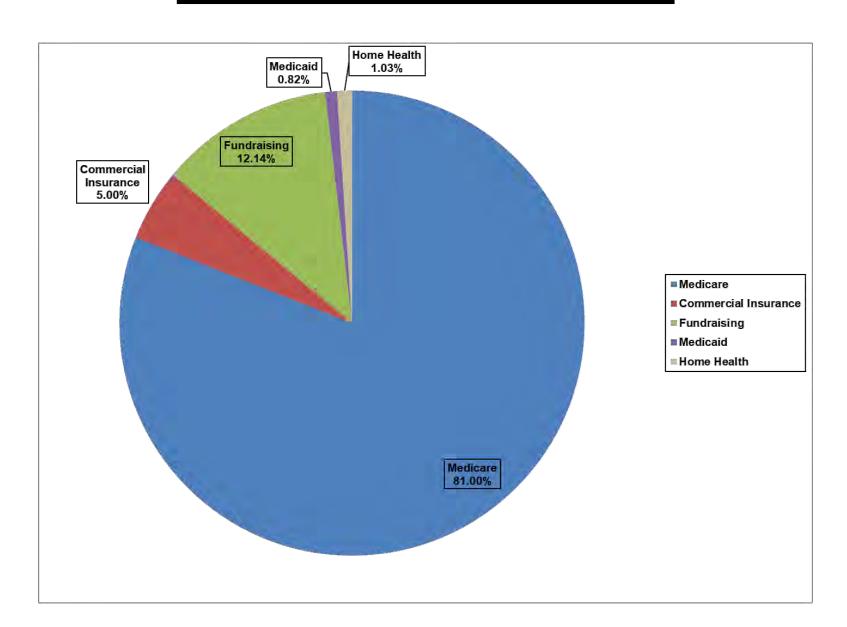
Planned Giving

Crossroads Campaign (completed 2019)

Investment / Interest / Other

Global Partners In Care

2019 Revenue Sources



Expenditures

Salary & Wages

Largest budget item (65% of expenses)

Approximately 225 employees (including PRN)

Determined by position & labor grade

Increases based on annual performance review

Increase scale & labor grades are reviewed to

reflect inflation, local market, etc

Employment Expenses

FICA, Life Ins, Staff Recognition, Recruiting 403(b) Match – 25% of employee contribution Up to \$4,000

Health Insurance – Partially Self Funded
H S A --- CHC & employee contribution
Premiums supplemented by CHC

Expenditures

Direct Patient Care Costs

Second largest budget item (20% of overall budget)

Medications (Optum) / DME (Alicks)

Supplies

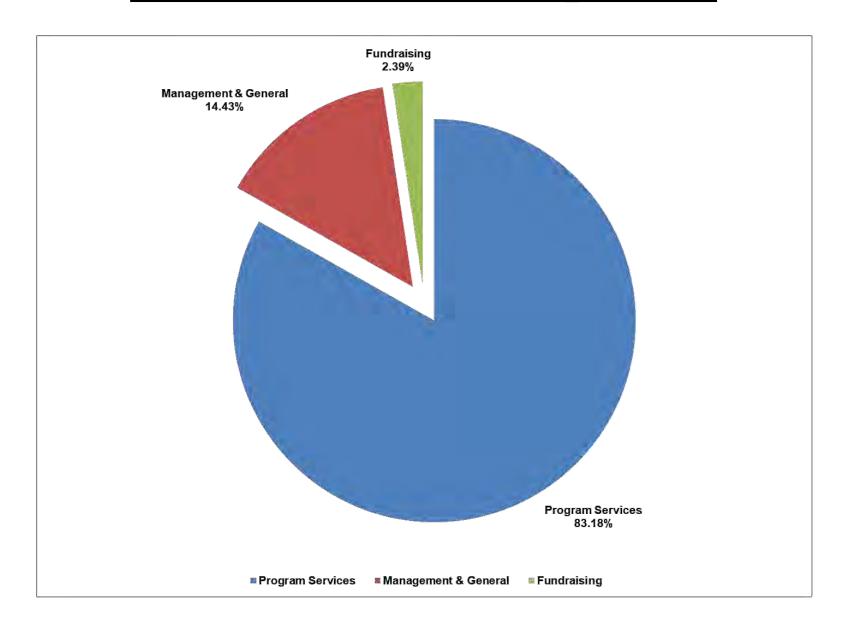
Transportation, labs, etc

Public Awareness
Professional Fees
Software Maintenance
Buildings Grounds

Fundraising

GPIC Partnership Grants

2019 Functional Expenses



Balance Sheet

Cash on Hand
Investment Policies (CHC / Foundation)
Accounts Receivable
Fixed Assets

No significant liabilities



Kruggel Lawton CPA's
Annual Audit
Form 990
403(b) Retirement Plan Audit

Bradley Associates

Medicare / Medicaid Cost Reports



Thank You & Welcome



New Board Orientation

Marketing & Access Overview

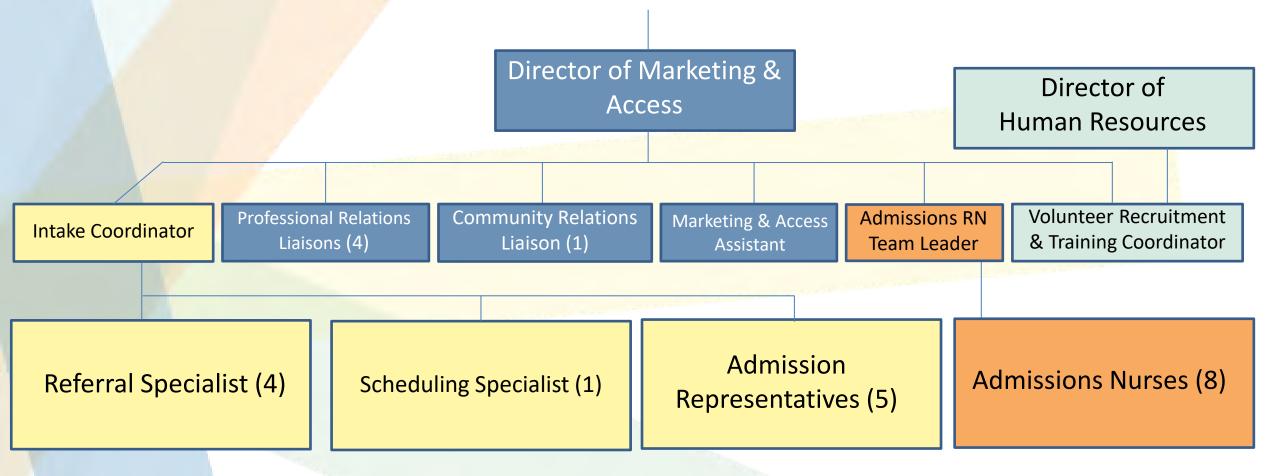


Roles & Responsibilities

Director of Marketing & Access

Marketing – Manage the Center for Hospice Care brand. Literature, CHOICES magazine, H&P (hospice and physician) Team Newsletter, public relations, advertising, website, social media.

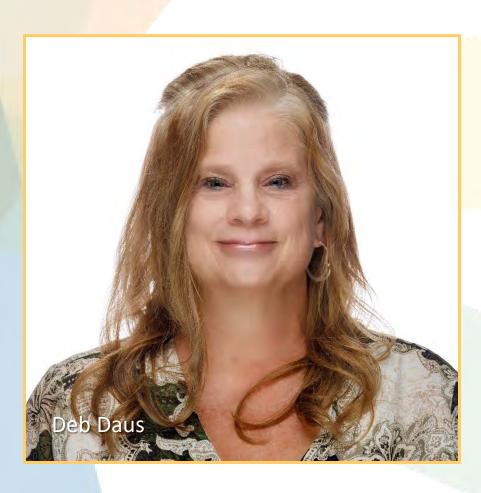
Admissions – First contact with our agency. Developing that exceptional customer experience. Removing any barriers that delay access into our program.





-Roles & Responsibilities

Admissions Coordinator



- * Admissions Representatives (5)
- * Referral Specialist (4)
- * Scheduling Specialist (1)



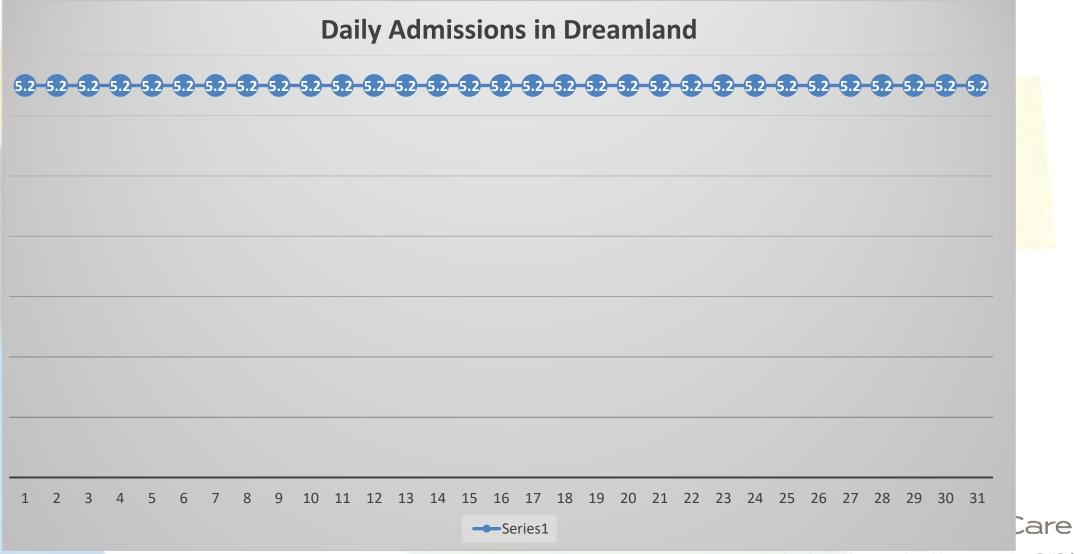
-Roles & Responsibilities

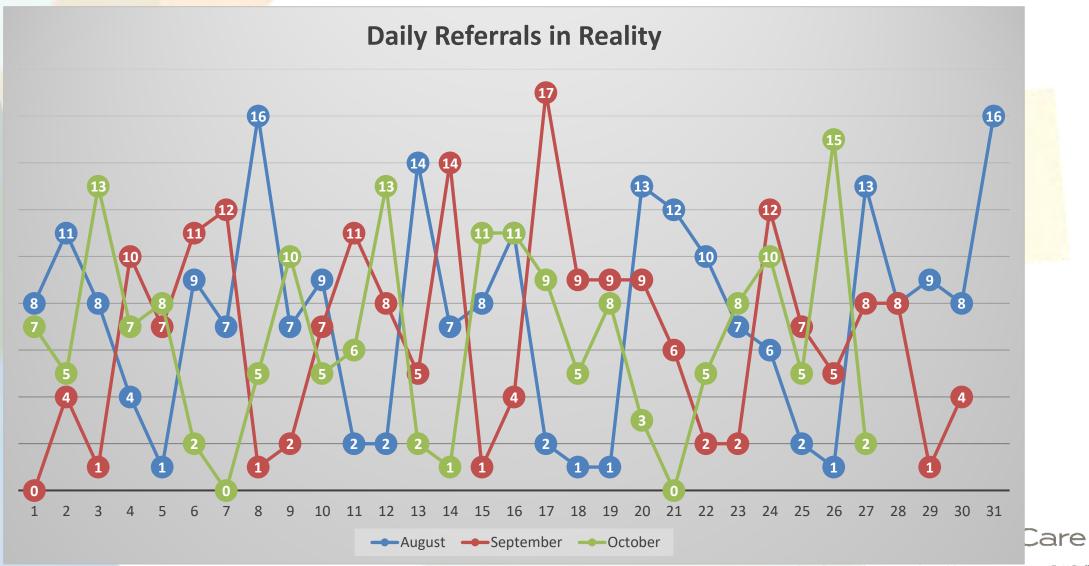
Admissions RN Team Leader



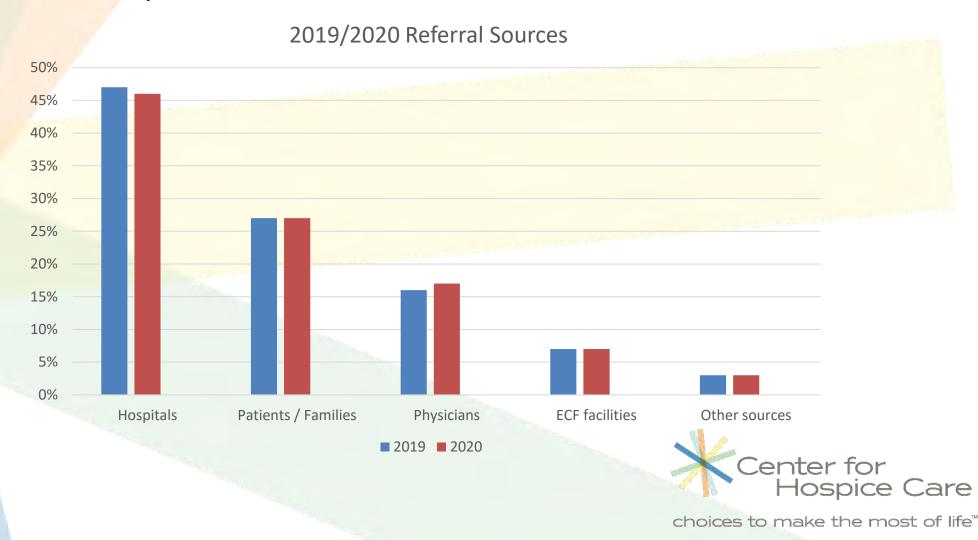
*Admission Nurses (8)







-Referral calls from Family, Self and Others



- -Roles & Responsibilities
- Professional Community Liaison (4)
 - -Manage referral sources (doctors, hospital DC planners, ECF partners)
- Community Liaison
 - -Educate our community (speaking engagements, health fairs, community involvement)
 - -We Honor Veterans, Faith Communities, Chambers and community presentation













-We Honor Veterans











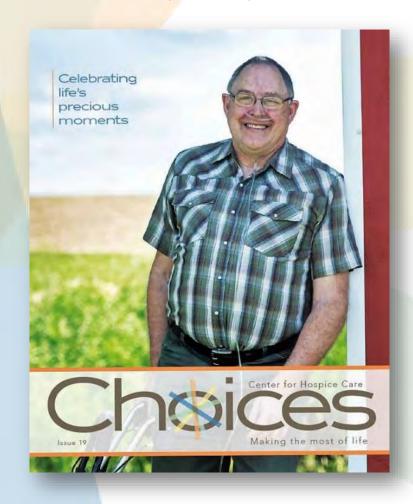
-Social Media





CHOICES

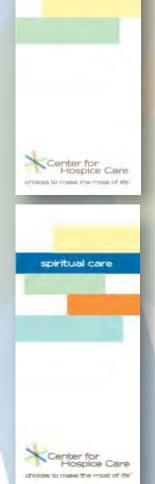
(biannual)





hospice & physician team newsletter (quarterly)

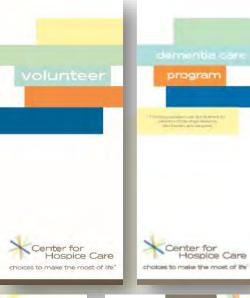




hospice and

palliative care

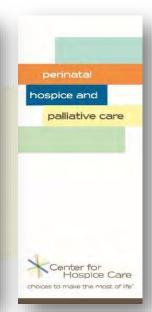
















Agency Collateral



-Television Commercials - 3









Center for Hospice Care

out Us Information For...



-Website





years celebrating life







Patient Stories



The Colors of Healing
Read More



One Man's Dying Wish to be Reborn

Read More



Georgia's Weeping Willow

Read More

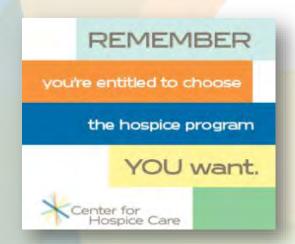


Meet Wilbur Lewis

Read More

A READ MORE STORIES

-Digital Campaign













Thank you & Welcome to CHC!







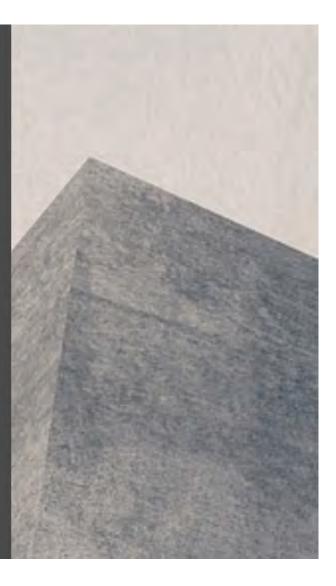
ANNUAL GIVING

Friends of Hospice (May) Annual Appeal (November) Memorial Gifts 3rd Party Events Circle of Caring

- Champion (\$25,000+)
- Chairman Circle (\$10,000+)
- President's Society (\$5,000+)
- Helping Hands Society (\$1,000+)
- Heart of Hospice Club (\$500+)
- Caregiver Alliance (\$250+)

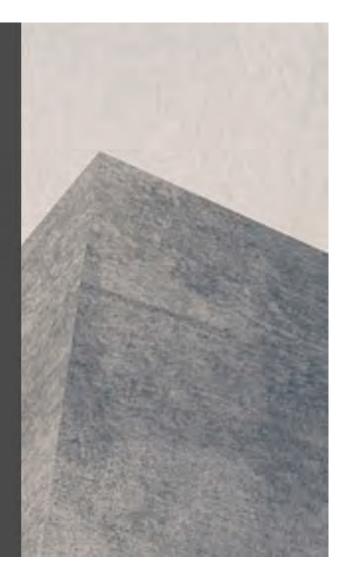
Employee Giving

- We Believe
- Uganda Impact Fund
- Road to Hope



ENDOWMENT GIVING

Vera Z. Dwyer Fellowship in Hospice & Pall. Medicine Linda Lloyd Mission Endowment for Camp Evergreen After Images Art Counseling Program Pediatric Hospice and Palliative Care Program Sister Carmel Helping Hands Fund Life Transition Center Caregiver Training Center "We Honor Veterans" Program



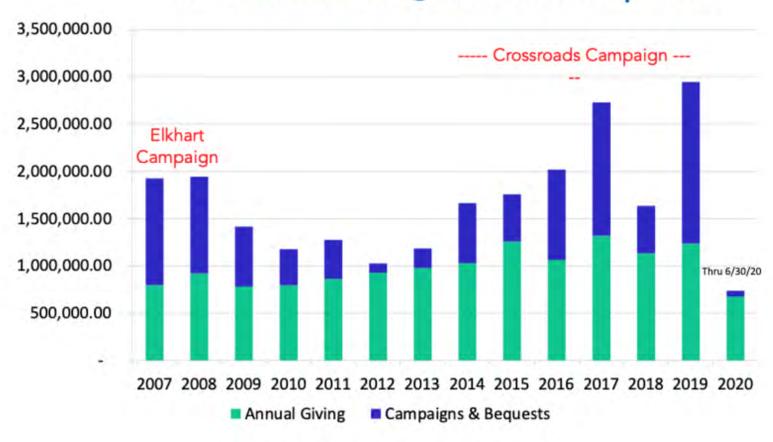


Progress Toward \$10,000,000 Goal thru 12/31/2019





HF Fundraising Since Inception







35th Helping Hands Award to Honor Catherine Hiler

For 35 years, Center for Hospice Care (CHC) has been honoring deserving recipients with our Helping Hands Award. We are excited that the 2019 Helping Hands Award recipient is Catherine Hiler - a true community servant and long-time supporter of CHC and the Hospice Foundation.

The award will be presented during our annual Helping Hands Award Dinner, which will be held at the Hilton Garden Inn on Wednesday, May 1. This year's event is being co-chaired by Kurt Janowsky and Stephanie and Todd Schurz.

Catherine was born in Belfast, Ireland and emigrated to the U.S. with her parents and two brothers. After spending several years in San Francisco working at First Interstate Bank of California, Catherine moved to Washington, D.C., where she served as an advisor to the Committee on Government Relations for the House of Representatives. She also served as Executive Director for both the Federal Mine Safety and Health Review Commission and the White House Conference n Small Business It was in Wishington D.C.

Since living in South Bend, Catherine and John have raised three wonderful daughters - Alison, Caitlin and Morgan, and have served the community in many capacities. Catherine served on The Stanley Clark School Board and was a parent representative on the John Adams High School Committee that established the International Baccalaureate magnet program.

We like to believe that Catherine found her true passion when she began her involvement with CHC and ultimately, the Hospice Foundation. Catherine has been involved with our organization for more than 16 years. She started as a volunteer and served on the boards of CHC and the Hospice Foundation. including five years as board chair. If that were not enough, in 2014 Catherine graciously agreed to chair our five-year comprehensive fundraising campaign "Cornerstones for Living: The Crossroads Campaign." This campaign, now in its final months, is focused on raising money to build a new 12-bed inpatient care facility (now

"I can think of absolutely no one more deserving of our 35th Helping Hands Award," said Mark Murray, President/CEO of CHC and the Hospice Foundation. "Catherine has been a tremendous asset to not only this organization, but also to the entire community. Her desire to give back has left an indelible mark."

For more information about attending or sponsoring the 2019 Helping Hands Award Dinner, please visit foundationforhospice.org/helpinghands2019.

Gardens of Remembrance and Renewal Memorial Dedication

The Gardens of Remembrance and Renewal are situated on the 11-acre property of Center for Hospice Care's Elkhart Campus adjacent to the newly renamed Esther's House. The gardens are a place where patients and families can connect with loved ones or simply enjoy nature in a peaceful setting next to the babbling brook. The gardens also offer opportunities for families to honor their loved ones through memorial bricks and benches, as well as flowering and evergreen trees. The purchase of memorial items also helps ensure that everyone who may be eligible for hospice care in the future

will receive the compassionate care they need, regardless of their ability to pay.

On Tuesday, June 4, 2019, the annual "Gardens of Remembrance and Renewal" ceremony will be held to dedicate the memorial items donated during the past year. The ceremony is a chance for donors and family members to gather and reflect on the lives and memories of those who are being remembered and to see where the items are placed among the gardens.

The ceremony will begin at 5:30 p.m. and include brief remarks, as well as

the dedication of memorial items. Light refreshments will be served following the ceremony. Invitations will be sent in May to those who have donated memorial items both this year and in the past. The event is also open to the public.

If you are interested in purchasing a memorial item for placement in 2020, you can do so online at

foundationforhospice.org/Elkhart-Campus or by contacting Heidi Payton at 574.367.2446 or PaytonH@FoundationForHospice.org.









Improving the Quality of Living





A LOOK BACK

Center for Hospice Care's Veterans Memorial Rededicated as the Captain Robert J. Hiler Jr. Veterans Memorial

Table (Learner to Hauper Care (CHS))

and (Learner to Hauper Care (CHS))

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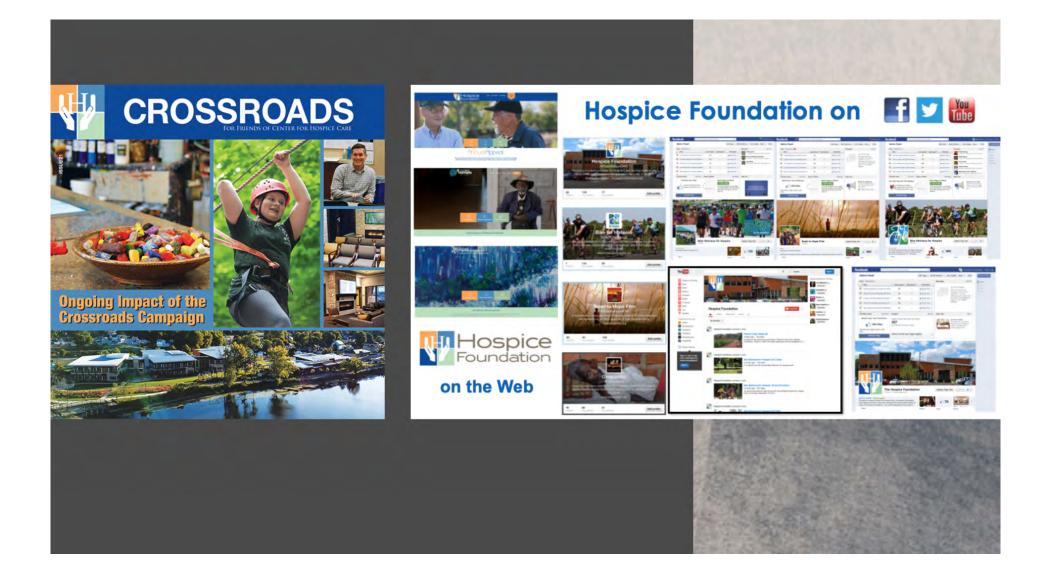
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Ala "We

to an incredible gift from the Robert

The Captain Robert J. Hiler Jr. Veteruns











A Permanent Home in Elkhart County

One of the most significant accomplishments over the past 10 years was the opening of our seven-bed inpatient care facility in Elikhart. Tucked away just north of the US 20 bypass and CR 17, Center for Hospice Care's Elikhart Campus is a wonderful example of the warm home-like setting CHC inpatient units provide patients and their loved ones.

It was made possible through the generosity of numerous Elkhart donors, particularly Dick and Rita Strefling. After experiencing the compassionate care Dick's mother Esther received from CHC both in-home and in our inpatient care facility in Roseland, the Streflings were committed to ensuring that families had access to the same level of care in Elkhart County. In 2007, the Streflings, through the Strefling Foundation, provided the lead gift to make that a reality.

In honor of their generous gift, and to celebrate the 10-year anniversary of the Elkhart Campus, the inpatient facility was renamed "Esther's House" and officially rededicated on August 16, 2018.

\$2,483,955 Raised



An Amazing Place to Be

Cyril "Bud" Stone became a patient in April of 2010. He had been removed from a respirator and the family thought it would only be hours before he passed. That hadn't happened, and they were advised by the hospital that they would have to take him home or to our inpatient care facility. Karen Parsons, one of Bud's seven children, said their family just wanted her father to be able to die in peace.

"Home wasn't an option," she noted. Her father had endured years of pain due to back injuries and arthritis and, while everyone marveled at how tough he was, they also knew it was only a matter of time before he passed. They wanted to be able to share time with him as a family, in a quiet setting. "He received the very best of care in the short time he was at Hospice House," she added.



"I think the staff are God's angels on earth," Karen said. Since the opening of our Elkhart Campus, more than 1,086 families have experienced the compassionate care Dick and Rita Stefling envisioned.



















20 CROSSROADS

Area's Only Free-Standing Palliative Care Center

Center for Hospice Care (CHC) is committed to improving the quality of living for our patients, their families and the broader community. In addition to being the largest hospice provider in the state, CHC also provides palliative care, which is intended to alleviate the pain and symptoms associated with serious, life-limiting or chronic illness. Unlike hospice care, which is intended for patients with a life expectancy of less than six months, palliative care has no predefined time restrictions. To meet the needs of this population, CHC built the area's only dedicated freestanding facility – Center for Palliative Care – as a place to offer palliative care consultation and services.

The first of its kind in north central Indiana, this freestanding outpatient clinic gives patients and families an opportunity to receive the physical, psychosocial, emotional and spiritual support necessary to improve their quality of living. In addition, palliative care can help mitigate the depression that results from receiving the diagnosis of a life-limiting condition or chronic pain. This type of depression can reduce life expectancy, according to a study published in the New England Journal of Medicine.

Patients whose pain is adequately treated tend to sleep better, eat better and communicate more effectively with caregivers

and relatives. Patient- and family-centered palliative care optimizes the quality of life by anticipating, preventing and treating suffering.

The difference between palliative care and hospice care can be confusing. The most significant difference is that palliative care patients may simultaneously pursue active curative treatment. Palliative care includes aggressive symptom management as well as emotional support and assistance. Palliative care referrals may be made by any physician, preferably at an early stage of treatment. Once a referral is made, one of CHC's physicians or nurse practitioners will examine the patient and provide a consultation on options for care. Interdisciplinary teams comprised of physicians, nurses, social workers, chaplains and home health aides confer to support the care of our palliative care patients.

By providing these services to the community, and by raising money to create a dedicated facility, the Hospice Foundation continues to support CHC in significant ways that improve the lives of those in our community.

\$1,000,000 Raised

Fundraising Activities

Generous Matching Gift

To help make Center for Palliative Care possible, the Hospice Foundation received an incredibly generous matching gift from a local foundation. This \$500,000 gift was truly transformational and helped spur the community to action.

The Community Responds

With the \$500,000 matching gift as the impetus for action, our community stepped up in a significant way to match the full \$500,000. Through the commitment of the community, CHC and the Hospice Foundation were able to build the Center for Palliative Care on our Mishawaka Campus.

In addition, the combined \$1 Million gifts have supported the initiation and development of our community-based palliative care program.

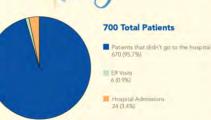


palliate \'pa-le- at\

1. to lessen the severity of pain and disease without curing

2016-2018 STATISTICS









Patients that didn't go to the hospital 870 (97.2%)

TO (1.1%)

Hospital Admissions 15 (1.7%)



Breathe Eazy & HeartWize

To help manage the symptoms of chronic obstructive pulmonary disease (COPD) or of maximally treated heart disease, Center for Palliative Care delivers programs designed specifically for the challenges many patients face during these illnesses.

With a focus on symptom management, our BreatheEazy program for COPD and our HeartWize program for advanced heart disease, are designed to improve the quality of living for our patients. These programs led to reduced emergency room visits and re-hospitalizations (see charts to the left).

Each program is tailored to the specific needs of individual patients and includes specialized treatment protocols, medication, and nutritional guidance designed to provide maximum comfort. Since inception, these programs have helped many patients manage symptoms and reduce suffering.



Creating a Centralized Hospice Campus

On August 20, 2013, Center for Hospice Care (CHC) and the Hospice Foundation officially welcomed the public to its new Mishawaka Campus. During a news conference at the time, President/CEO Mark Murray noted, "This facility, this location and this remarkable pastoral setting is not only a testament to a tremendous collaboration between Mishawaka and Center for Hospice Care, but also a tangible example of the incredible growth experienced by the philosophy of hospice care."

Ernestine M. Raciin House made possible by gift of \$1,000,000
Anonymous matching grant of \$500,000

Nestled between Central Park and Cedar Street and situated along the northern bank of the St. Joseph River, the Mishawaka Campus is home base for CHC's various administrative support functions as well the Life Transition Centre and Hospice Foundation. In addition, the site includes a remodeled residential home, used primarily as a guest house for medical fellows rotating through CHC; the freestanding Center for Palliative Care; and our veterans memorial which was recently rededicated as the "Captain Robert J. Hiller Jr. Veterans Memorial" (see pages 6-7). Work is currently underway to construct a new clinical staff building and a new inpatient unit, which will be called the Ernestine M. Raclin House.

None of these accomplishments would have been possible without the generous support of our community and the collaborative nature of the City of Mishawaka. Donors have made gifts of all sizes to further our mission to improve the quality of living, Mishawaka leaders have helped us improve the quality of our community. By working together, CHC and the city have been working to transform our campus location into something in which we can all take pride. The riverfront along which our campus sits is now home to the recently renovated Central Park, miles of walking paths and other amenities.

To help ensure adequate funding for the consolidated campus, CHC and the Hospice Foundation launched "Cornerstones for Living: The Crossroads Campaign," our largest fundraising campaign in history, in July of 2014 (see page 44 for a campaign update).









Impact of a Consolidated Campus

\$260,000 saved per year

Given the growth over the years of CHC in terms of patients and staff, additional office space was required each year. To accommodate these needs, CHC was renting thousands of square feet of space in multiple locations around the city. It became clear that it no longer made sense to continue leasing more and more space. The time had come for CHC to own our facilities. The consolidation of space has many obvious benefits, not the least of which is a significant annual cost savings – savings that help our mission to serve all those eligible in our community – regardless of their ability to pay.

Consolidated Campus **Efficiencies**

The consolidated campus CHC is building has had and will continue to have a positive impact on our patients, families and community. Bereavement clients have been able to avail themselves of our services in a beautiful setting; CHC staff have benefited from working more closely together, and soon, hospice patients will be able to experience the soothing sounds and views of the St. Joseph River. By working closely with the City of Mishawaka, CHC and the Hospice Foundation strive to be "good neighbors" and are committed to improving the quality of living for everyone with whom we come into contact.













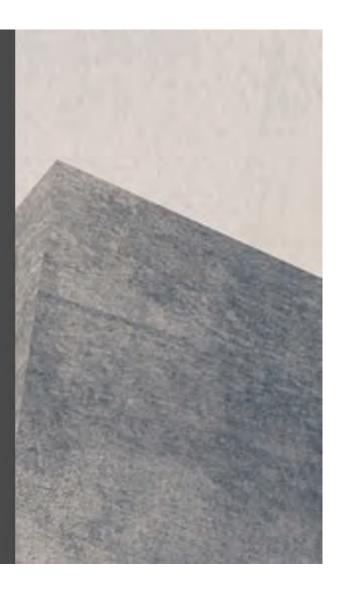
COMMUNITY EDUCATION

Speakers Bureau
Panel Discussions
Webinars
Proprietary Workshops

- "Cupcakes to Die For"
- "Death by Chocolate"

Targeted Presentations

- Extended Care Facilities
- Forever Learning
- Classroom Lectures



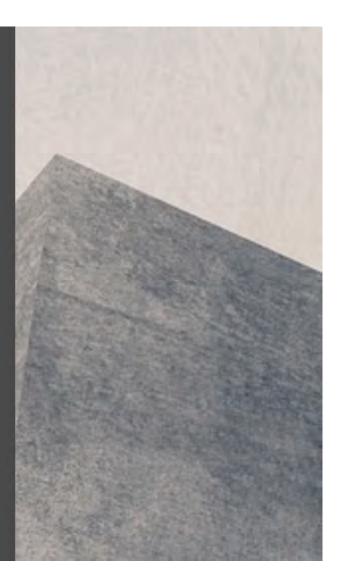
PRACTITIONER EDUCATION

Physician Education

- H&PM Fellowship
- IU Talk
- Residency/Med School Rotations

Trusted Advisors

- Financial Planners
- Trust Officers
- Funeral Directors
- Attorneys
- Accountants



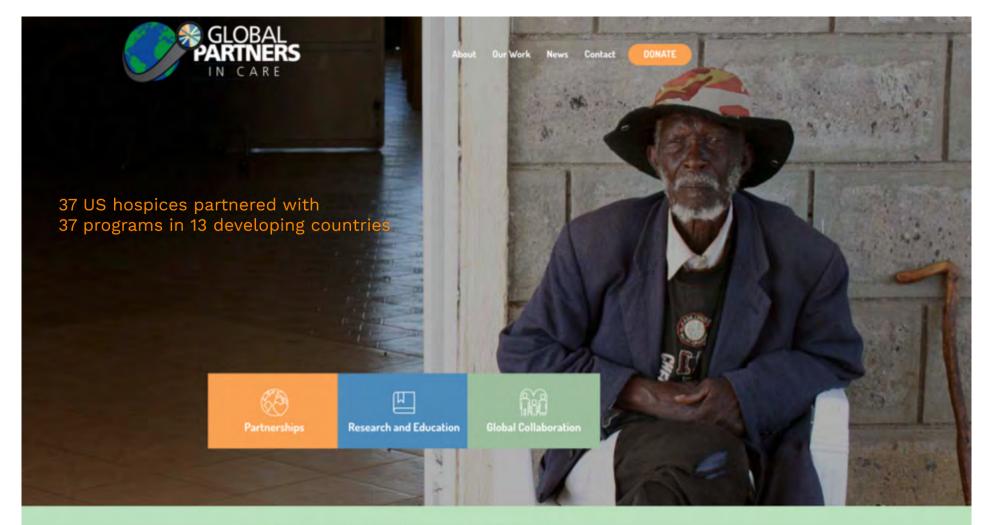


COMMUNITY PARTNERS
Saint Joseph Health System
Goshen Health System
Beacon Medical Group
Memorial Hospital
Elkhart General Hospital
Caregiver Homes
Radiology, Inc.
Press Ganey
Vera Z. Dwyer College of
Health Sciences
River Bend Cancer Services
REAL Services
Ruth M. Hillebrand Center for
Compassionate Care in Medicine





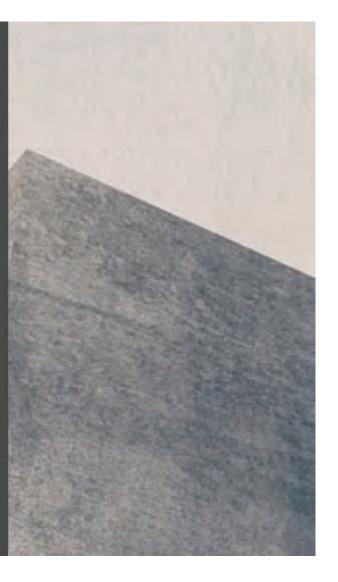




Enhancing Access to Palliative Care Worldwide

ACTIVE COLLEGE & UNIVERSITY PROJECTS

- College of St. Benedict
- IU School of Medicine Indianapolis
- · IU South Bend
- Oxford University
- Ruth M. Hillebrand Center for
- · Compassionate Care in Medicine
- · St. John's University
- Ugandan Martyrs University
- University of Alberta
- University of Leeds
- · University of Notre Dame
- · Vera Z. Dwyer College of Health Sciences



PALLIATIVE CARE ASSOCIATION OF UGANDA

- mHealth Project
- Internships
- Conference Faculty & Sponsorship
- · Road to Hope Children's Program
- Exchange Visits
- Leadership Development
- Documentary Film Production
- Nursing Scholarships
- Philanthropic & Fundraising Support

