



OUR MISSION:

Hospice & Palliative CareCenter is committed to providing quality medical, emotional, spiritual, and social support to patients and families who face a serious illness regardless of diagnosis, prognosis or treatment. We advance excellence in compassionate care through related community collaboration, education and service.

PROGRAMS & SERVICES

If you would like information about any of the following programs and services, for yourself, a family member or friend, please call the office nearest you: 336-768-3972 in Winston-Salem 336-753-0212 in Mocksville 336-593-8450 in Walnut Cove 704-633-5447 in Salisbury or 1-888-876-3663, or visit www.hospicecarecenter.org

Hospice Care
Palliative Home Health Care
Kate B. Reynolds Hospice Home
Palliative Care Consults
Carousel Center
Grief Counseling Center
Community Support Program
Community Partnership for End of Life Care

Time With Patients - "Refreshing" *One Medical Student's Reflections*

All third-year medical students at Wake Forest University School of Medicine now spend a significant part of their ambulatory medicine month at the Kate B. Reynolds Hospice Home. Dr. Richard Stephenson, our VP of Medical Services, and the medical school believe strongly that all doctors should know something about end-of-life care. Wake Forest University is one of only a dozen medical schools in the country to provide their students with a mandatory hospice experience. That's all about to change; accrediting organizations have changed their hospice requirement from a "should" to a "must." Wake is way ahead of the game.

Medical students have been coming to our Kate B. Reynolds Hospice Home since 2000. It became a mandatory rotation for all third-year students in



Kyle Brett (L), Medical Student, with friend Zack Whitlow holds her stained glass reflection project.

2003. While at the Hospice Home, students learn the basics about good end-of-life care, attending a series of highly interactive teaching sessions with our medical staff every Wednesday. They explore what it might feel like to be confronted with terminal illness, what they might hope for under those circumstances, as well as what organized hospice services can make available. They also share communication strategies for patients in these difficult circumstances. Last but not least, they develop a solid understanding

of good pain and symptom management.

But this is far from just a classroom experience for our medical students. Each Wednesday afternoon, students go out on home visits with hospice staff, accompanying a nurse, social worker, or chaplain. In addition, each week several of the

(Continued on page 3, Time With Patients Refreshing)

Peace Of Mind Is A Wonderful Gift *A Gift of Certainty in a Time of Uncertainty*

Have you ever imagined what would happen if you were in a coma and couldn't make healthcare decisions for yourself? In these heartbreaking situations, families are often put in an emotionally overwhelming position of having to make life and death decisions for loved ones. If this were the case, would your spouse or loved ones really know what your wishes are?

Unfortunately, Kenny and David Hanna, along with their mother, were forced to make a heart-wrenching decision for their father as he lay in a hospital bed being kept alive by a ventilator. On May 17, 2007, they made the painful decision to remove the ventilator. "Part of me wanted to shout, 'Bring him back,' but I knew my father didn't want to live like that," said Kenny, the younger of the two brothers. "When we found out that he



Kenny Hanna (L) meets with Christopher Martin to discuss wishes for end-of-life care.

had been without oxygen for as long as 15 minutes, and the CT scan came back indicating no brain activity, we had to let go. It was a hard decision to make, and we had to face the issue of quality of life versus quantity of life. My mom kissed him and gave him permission to go home."

"I'm grateful for the many life lessons my father taught me. And I realize now that the final lesson

I've learned from him is that being a responsible person means being prepared for the unexpected. Although my parents talked about getting a living will, they never got around to it. I was determined that my wife and I were going to talk about our wishes and get our living wills and healthcare power of attorney documents completed. This is one final gift we can give our children, making sure we have our medical affairs in order," added Kenny.

(Continued on page 4, Peace Of Mind Is A Wonderful Gift)



Building A Vision For The Future . . .

HPCC is the absolute best choice for hospice care because we provide unmatched care.



Hospice & Palliative CareCenter has always tried to meet the needs of the communities we serve. We are committed to offering excellent end of life care to patients and families, and we have expanded that mission to include related services, such as grief counseling, assistance with living will and healthcare powers of attorney forms, just to name a few. In 1998 we opened our beautiful Kate B. Reynolds Hospice Home, offering patients and families a *home away from home* when they need it most. We established an office in Salisbury four years ago, and more recently, we opened offices in Mocksville and Walnut Cove where our patient populations were steadily growing. We want to be a part of the communities we serve, and ensure unmatched care to our 13 county service area. Our expanded services and geographic region have been a direct result of our effort to meet the needs of our community, and it has only been possible with continued community support. It has been a decade of change and growth. We are now looking to create a vision for the next 5 to 10 years and we need your help.

We've taken the position that Hospice & Palliative CareCenter is the absolute best choice for hospice care because we provide unmatched care. While this may sound lofty, we believe it wholeheartedly and it drives us to continue looking for new and better ways to serve. We support this position for a number of reasons, all the while acknowledging that our success and growth has been in large part because of our outstanding community support. Let me share a few these reasons with you:

- Outstanding employees* – certified & degree-prepared experts in end-of-life care
- Specialized teams for Hospice homecare patients; pediatric patients, LTC patients; Palliative home health patients; acute care facility patients; palliative care patients*
- Medical Services department* – board certified physicians, palliative care fellow, nurse practitioners, medical students
- The Kate B. Reynolds Hospice Home* – 30 bed 'home away from home' with round the clock acute care, and short-term symptom management
- An In-house pharmacy* – pharmacists trained in palliative care; home delivery
- Experience – the 1st Hospice in NC* - In 29th year of service; started in Forsyth County, now serving over 13 counties
- Programs and services outside of Hospice and Palliative Home Health* – Community Support for persons not eligible for medical programs; Palliative care services; Palliative care consultations in hospitals, LTC facilities and home
- Above & Beyond community programs* – Grief counseling services for the community; Community partnership for end-of-life care; Pediatric community alliance; Advance care planning training, and services for community
- Education* – Approved provider for continuing education (CEU's & CME's); internships for higher education healthcare majors; education provided for United Way agencies, community businesses, and community groups.

We believe our employees and our host of services are unmatched. Our mission and our vision have been our driving force. It is now time to look to the future and 'visualize' where we want to be in the next decade. Our staff and boards have committed the next 6 months to this task. We have a formal process in place whereby we are doing interviews and brainstorming sessions to assess where we are – and we want to go. As your hospice, we invite your input and hope that you will help us serve you better by sharing your vision.

JoAnn Davis, President & CEO

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We would like to thank our Governing Board and Foundation Board of Directors for the contributions they make to Hospice & Palliative CareCenter. Board members volunteer their time and professional expertise for the agency, and their efforts are greatly appreciated.



Bungee Jumper Takes The Plunge For Hospice

Hospice & Palliative CareCenter cared for Chris Barry's wife, Dorothy, a few years ago. In her memory, and to raise money for Hospice, he collected pledges and went on an adventure. Last fall, Mr. Barry traveled to New Zealand where, in memory of Dorothy, he bungee jumped for the first time. Many people his age are retiring, and many are traveling, but few have the nerve to bungee jump. Thanks to his brave ambition, Hospice received pledges of \$1,000, and Mr. Barry has an adventure story to share for years to come.



Time With Patients - “Refreshing” *(Continued from cover)*

students join the medical staff services team, providing direct care to our hospice patients at the Hospice Home. They have a unique opportunity to learn hands-on care under the direct supervision of our medical staff. Dr. Stephenson has often said, “We may be good teachers, but our patients and their families are great teachers. Students learn so much from just sitting and talking with patients and their families; it just can’t be taught in the classroom.”

At the end of their hospice month, students are tested and have the opportunity to evaluate their experience. Dr. Stephenson also asks them to do a reflection project, expressing what this hospice experience meant to them personally and/or professionally. Many students write short essays, some poetry, a few letters, and occasionally a prayer. Others have created drawings, paintings, collages, music, videos, even a birdhouse and a dance.

Kyle Brett, now a fourth-year medical student at Wake, did her hospice rotation this past spring. Talking with us about her experience, she shared, “What I found most rewarding about my experience was getting to know the patients and hearing their stories. It was really refreshing to have time with them and their families. Everyone here shares a common goal – a peaceful, meaningful, comfortable end-of-life experience. It’s teamwork at its best.” Kyle went on to say, “I like the holistic approach of hospice and knowing that you’re caring for every aspect of the patient, even the bereavement follow-up that the families receive.”

For her reflection project, Kyle chose to create a beautiful stained glass piece of artwork. It now hangs in one of the sunrooms at the Hospice Home. It was her first stained glass project so her partner, Zack Whitlow, who has lots of experience with stained glass, helped her with her creation. There were several elements Kyle wanted to incorporate. “There are so many things that come to mind when I think about my experience at the Hospice Home. I think it’s a place where people spend a lot of time reflecting and

trying to find peace. I imagine for some people, it’s kind of like looking up at the stars and thinking about your place in the universe. With that in mind, I wanted to incorporate a constellation. There is a phoenix in the southern hemisphere and I like how that represents re-birth. I also wanted a sunrise, and I wanted it to look a bit like a children’s book to represent humor. Even though the work is serious and can be heavy, the staff is able to find humor,” shared Kyle.



“The Hospice Home is such a peaceful place; I think that’s what I wanted to capture.”

On a final note, Kyle said that she is already more confident in helping patients deal with pain. “We do not get much exposure to formal pain management, and this experience was really helpful. Before doing this rotation, I had talked with some of my classmates. They said it was a great experience, and I knew I would find it very meaningful.”

Dr. Stephenson notes that since 2000 we’ve had over 700 third-year students rotate through the Hospice Home. “At the end of every group, we eagerly

anticipate their reflection projects. Many of them are so moving, I get chills,” he added. While Hospice gets no significant reimbursement for medical education, it has become part of our mission. Every third-year student spends about 65 hours at Hospice during his or her ambulatory medicine month. “That kind of time commitment is huge on our part,” says Stephenson; concluding, “Medical education may not be our business, but it’s our mission and definitely our passion.”

“What I found most rewarding about my experience was getting to know the patients and hearing their stories. It was really refreshing to have time with them and their families.”



About Kyle Brett – Wake Forest University Medical Student

Home Town – Tulsa, Oklahoma

Family – Oldest of four children

Like most about Winston-Salem? – “It’s a nice size community and easy to feel at home here.”

Future Plans? – “I’m leaning towards internal medicine, and I’d like to live some place warm. I may stay in the Southeast or look at the West coast.”



Dr. Richard Stephenson,
Vice President of Medical Services



Peace Of Mind Is A Wonderful Gift *(Continued from cover)*

On May 30, Kenny came to the Hospice & Palliative CareCenter to meet with his friend Christopher Martin who works with the organization. One of Martin's roles is to encourage people in the community to have conversations about their wishes and have them documented. Hospice will assist anyone in the community with this process, including the completion of the documents, and notary, free of charge.

In addition to completing his own documents, Kenny is on a mission to make sure that his friends and family do the same. "When my co-workers, friends, and family offered their condolences, I told many of them to do me a favor; talk about your wishes and get a living will and healthcare power of attorney in place, and have your loved one do the same. You just don't know what we've been through."

Martin couldn't help but feel great compassion for Kenny and his family, as they had to face such a daunting decision. "I was inspired by the courage Kenny and his family showed. I'm proud of Kenny too for the way he

responded and took responsibility to complete his own living will and power of attorney. I'm excited also because I know I've got a partner who shares my passion for raising

awareness and educating our community so that we are equipped to make informed decisions about the care we want at the end of life."

Martin went on to share something personal. "I have a confession to make. It wasn't until watching Kenny and his family go through this that I actually completed my documents. I had talked with loved ones about my wishes, but put off doing the actual documents, which is such an important part. I'm more eager than ever to offer this gift to others."

If you would like to talk about your choices and document your wishes, contact Hospice & Palliative

CareCenter. A trained facilitator will guide you through the important conversation, free of charge. Sharing this information with your physician, family, friends, and other important people in your life can ease some of the burden during a difficult time. What a gift to your loved ones!

"I'm grateful for the many life lessons my father taught me. And I realize now that the final lesson I've learned from him is that being a responsible person means being prepared for the unexpected."

The Triad's Got Talent! *Homestead Hills Hosts Talent Show*

Fire-eaters, baton twirlers, and unicycle riders bravely took the stage this summer to compete in a talent show hosted by Homestead Hills to raise money for Hospice. Homestead Hills is a long-term care facility nestled in Winston-Salem just down the road from the Hospice's Winston-Salem office. In addition to the talent show, they sold refreshments and home baked goods, and to insure even greater success, they organized a silent auction as well as a 50/50 raffle. The event was indeed a success thanks to the determination and energy of the staff at Homestead Hills. Special thanks and hats off to the willing participants in the talent show and the generous individuals who made donations. On June 26, Homestead Hills staff members presented Julie Morris with a check for \$2,000, which will be used to support patients and families in need of Hospice care.



Julie Morris (far right) accepts check from friends at Homestead Hills after successful talent show.

Homestead Hills hosts talent show to help Hospice patients and families.



Annual Volunteer Appreciation Event Recognizes Volunteers

The Russell Award – personifies the “Heart of Hospice” as demonstrated by their dedication to patients and families. Awarded to:

Kelly Sullivan – Visiting patients for 9 years – Currently visiting patients in Mocksville area and patients in Baptist Medical Center.

Bette Dull – Visiting patients for 10 years – Visits patients in the Lewisville area

The Goodson Award – honors volunteers who work in our offices, at special events, or other activities. Also known as the Hospice Hands Award, honoring the exemplary volunteerism of Jane Goodson. Awarded to:

Thelma Houck – Assists with administrative duties, weekly, for over 5 years

Emma Lineburger – A faithful office volunteer for 13 years

The Kate B. Reynolds Hospice Home Volunteer Award – created to honor volunteers who help meet the needs of our patients and families at our 30-patient-room inpatient facility.

Blanche Falkenberry – Visited home care patients for several years and has been providing support to patients and families at the Hospice Home for 3 years

Mary Wilson – Visited home care patients for over 10 years and has been visiting patients and families at the Hospice Home for 2 years

The Spirit Award – recognizes a volunteer who is flexible and willing to help with any special projects, events, or spur of the moment activities. Awarded to:

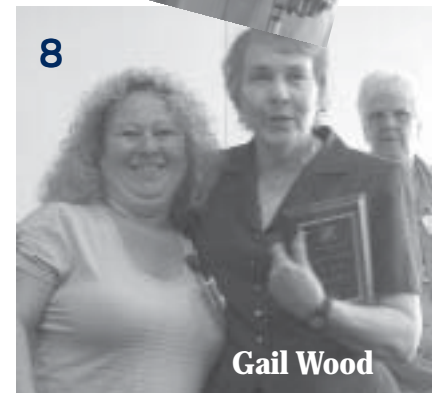
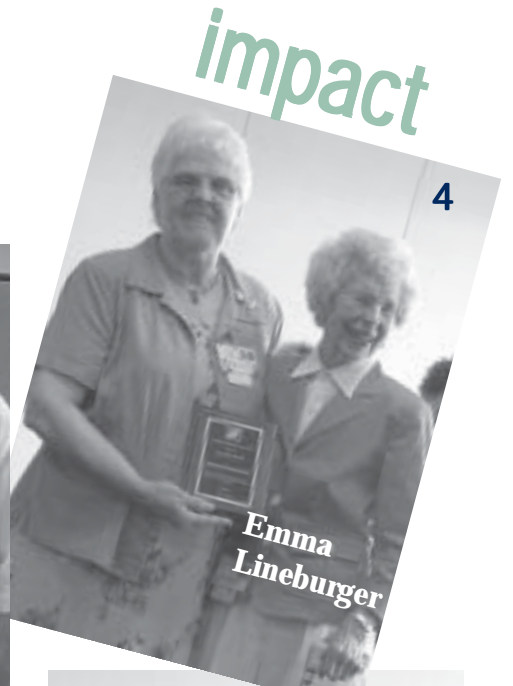
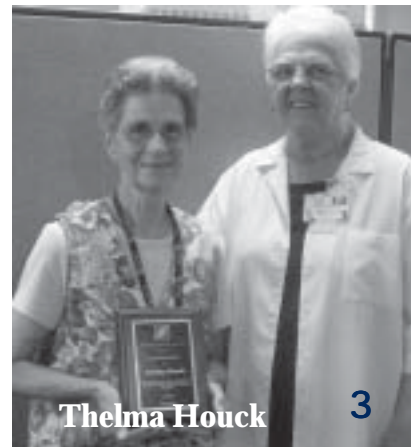
Gail Burgess – A versatile, flexible volunteer working in the pharmacy for nearly 5 years since it opened

The Camp Carousel Award – recognizes outstanding volunteer support of our annual Camp Carousel bereavement retreat for children and adults who are grieving the death of a loved one. Awarded to:

Gail Wood – Volunteering for Camp Carousel since its inception in 1990

The Impact Award – designed to recognize and reward young people for making a positive impact in their community, and particularly within Hospice. Awarded to:

Melissa Dellinger – Volunteering for 3 years in a variety of areas including special events, Camp Carousel, office work, and other special projects



1. **Kelly Sullivan** and Cindy Flanner (Volunteer Coordinator)
2. Cindy and **Betty Dull**
3. **Thelma Houck** and Faye Everhart (Volunteer Coordinator)
4. Faye and **Emma Lineburger**
5. Becky Bailey (Volunteer Coordinator) and **Blanche Falkenberry**
6. Becky and **Mary M. Wilson**
7. Gail Burgess and Faye
8. Cindy and **Gail Wood**
9. Angela Henrichs (Volunteer Coordinator), **Melissa Dellinger** and Kay Watson (Community Education)

Volunteer's are the “Heart of Hospice”



Quality, OR Quantity, OR Both?

**People often think that choosing hospice care means choosing *quality of life over quantity of life*.
New research proves that choosing hospice care means choosing both quality and quantity.**

New Research Finds

Patients Do Live Longer Under Hospice Care

Hospice Patients Lived an Average 29 Days Longer Reports NHPCO

A new study published in the March 2007 issue of the *Journal of Pain and Symptom Management* reports that hospice care may prolong the lives of some terminally ill patients.

Among the patient populations studied, the mean survival was 29 days longer for hospice patients than for non-hospice patients. In other words, patients who chose hospice care lived an average of one month longer than similar patients who did not choose hospice care.

Sponsored by the National Hospice and Palliative Care Organization, the study was conducted by NHPCO researchers in collaboration with the highly regarded consulting and actuarial firm, Milliman, Inc.

Researchers selected 4,493 terminally ill patients with either congestive heart failure (CHF) or cancer of the breast, colon, lung, pancreas, or prostate. They then analyzed the difference in survival periods between those who received hospice care and those who did not. Data came from the Centers for Medicare and Medicaid Services and represented a statistically valid five percent sampling from 1998-2002.

Longer lengths of survival were found in four of the six disease categories studied. The largest difference in survival between the hospice and non-hospice cohorts was observed in CHF patients where the mean survival period jumped from 321 days to 402 days. The mean survival period also was significantly longer for the hospice patients with lung cancer (39 days) and pancreatic cancer (21 days), while marginally significant for colon cancer (33 days).

“There’s an inaccurate perception among the American public that hospice means you’ve given up,” said J. Donald Schumacher, NHPCO president and CEO. “Those of us who have worked in the field have seen firsthand how hospice can improve the quality of and indeed prolong the lives of people

receiving care. Benefits of hospice have been reinforced by positive stories like that of Art Buchwald who seemed to thrive under the care of hospice.”

Researchers cited several factors that may have contributed to longer life among patients who chose hospice. First, patients who are already in a weakened condition avoid the risks of over-treatment when they make the decision to receive hospice care. Second, hospice care may improve the monitoring and treatment patients receive. Additionally, hospice provides in-home care from an interdisciplinary team focused on the emotional needs, spiritual well-being, and physical health of the patient. Support and training for family caregivers is provided as well.

This may increase the patient’s desire to continue living and may make them feel less of a burden to family members.

“There is a perception among some healthcare providers that symptom relief in hospice, especially the use of opioids and sedatives, could cause patients to die sooner than they would otherwise. This study provides important information to suggest that hospice is related to the longer, not shorter length of survival – by days or months – in many patients,” said Dr. Stephen Connor, NHPCO’s vice president of research and international development, and lead author of the study. “This additional time may be valuable to patients and families to give more time for resolution and closure.”

Co-author Bruce Pyenson, an actuary at Milliman in New York, added, “We believe this study helps support the growing quality movement within healthcare. For some patients, hospice care is not a choice about cure, it is a choice for the best care.”

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**“This additional time
may be valuable to
patients and families
to give more time
for resolution
and closure.”**



“Sergeant” Becky Bailey – *Still* Reporting For Duty!

Becky Bailey, affectionately known as “Sarg” by some of her co-workers at Hospice & Palliative CareCenter, has flirted with the idea of retirement a few times. In fact, she actually has retired twice, but not from Hospice. After a 27-year relationship with hospice organizations, eight of those years with this organization, we’re glad she is still reporting for duty! Sergeant Bailey can be found at the Kate B. Reynolds Hospice Home doing a variety of things that, oddly enough, seem to always demand the use of a pushcart. Her primary duty is organizing work for volunteers, but she’s quite a natural when it comes to bossing everyone else around.

Susan Beach, who wears many hats at the Hospice Home, works closely with Becky. “This place couldn’t run without her. She thinks the world of our volunteers and our patients. She goes above and beyond and takes care of everyone. We tease her, calling her ‘Sarg,’ and I think we could call her *Mom* too,” shared Beach.

In 1979 Becky’s husband died of lung cancer. At that time, they were living in West Virginia, and Becky, a nurse, had only heard the word *hospice* and had only a vague idea of what hospice was. Experiencing her husband’s illness and death, coupled with the horrible experience a friend had with his father’s death, influenced her decision to explore the world of hospice.

Q. How did you get started in hospice?

A. “It all started with my husband’s death. At first, I was pretty comfortable taking care of him at home, and I had good family support, but I was really on my own when it came to keeping him comfortable. The physical pain, and the emotional pain were simply more than anyone should have to bear. The doctors wanted to help, but end-of-life pain management had not been a focus for the medical community yet.”

“When my friend’s father died, he too had a horrible experience. His father had a horrible death after fighting a painful, drawn out disease. My friend, who knew more about hospice than I did, said, ‘Hey, I’m going to look into getting a hospice organization started because no one should have to go through this.’”

Q. What did it take to create a hospice?

A. “It was an all-volunteer effort and there were 30 of us in the first training class. I was so enthused that I agreed to be the director, working as a volunteer, to create a full-fledged hospice. I actually came to Winston-Salem to consult with this hospice, which had been organized for about a year. We ended up with a nurse, social worker, and chaplain who were truly volunteering since it was long



‘Sarg’ Bailey making deliveries at the Kate B. Reynolds Hospice Home

before Medicare would pay, and very few insurance companies understood it enough to pay. So we established Kanawha Hospice Care and it grew very fast. I had a 12-year career there and retired in 1992.”

Q. What did you do after your first retirement?

A. “I went back to work. I ended up spending five years working for a church until I retired for the second time (she said smiling). Then I decided that it was time for me to move to Winston-Salem because I really wanted to be near my two daughters.”

“I started volunteering for this hospice as soon as I arrived and I loved it. After about 3 years, I joined the work force once again! We had opened the Kate B.

Reynolds Hospice Home and realized we needed a volunteer coordinator at the Hospice Home. I couldn’t have found a more fulfilling role.”

Q. So, will you retire a third time?

A. “I’ve been on the payroll for about seven years, and I figured that when I hit 75 I’d retire again. Well, now that I’m on the cusp of hitting 75, I’m not interested in retiring. I guess I’ll stop talking about it. Perhaps I’ll just stay here until it’s my turn to die. In fact, I’ve been bossy enough to earn the nickname ‘Sarg.’ I’ve told my co-workers that my final order is for them to carry me out of here in a pine box. I don’t want anything fancy, and as everyone here should know, don’t bury me without one of my carts. I’m sure I’ll need it wherever I end up.”

Family: Two daughters, Lynn and D’Ann, who is married to Jack. Both daughters work at Wake Forest University Baptist Medical Center.

Home: Recently moved to Clemmons

Church: Maple Springs United Methodist

Favorite Pastime: Traveling

Favorite Vacation Spots: Alaska or Hawaii

Most Rewarding Professional Experience:

Working with volunteers at the Kate B. Reynolds Hospice Home. Grew volunteer base from 10 to 60. Guide volunteers at the Hospice Home with a wide variety of assignments, including visiting patients and families, answering phones, greeting guests at the front desk, making or delivering meals, assembling donated items for welcome bags for families and personal care items for patients, watering plants, and a host of other projects.



2007 Counseling Series

Support Groups

Grief 101 Educational Workshops For Those Grieving the Death of a Loved One

6:00-7:30pm

Tuesday, September 4

Left Behind: A Group for Survivors of Suicide

2nd & 4th Tuesday of each month

6:00-7:30pm

A mutual support group for family and friends of those who have died by suicide.
Call Kelley Ryan at 336-768-3972 for registration and a brief intake interview.

Location:

Hospice & Palliative CareCenter
101 Hospice Lane, Bldg 121 • Winston-Salem, NC
Williams Education & Counseling Center
To register, call 336.768.6157, ext. 600

Caregiver Support Group

4th Monday, 1:00 - 2:00pm

Coping with the Death of a Spouse

4th Monday, 2:30 - 3:30pm

Aug 27, Sept 24, Oct 22, Nov 26

Location: BestHealth Center Hanes Mall (near Post Office) • Winston-Salem, NC
To register, call 336.716.2255

6-Week Counseling Groups for Adults

Death of Spouse

6:00-7:30pm

Mondays: Sept 10, 17, 24; Oct 1, 8, 15

Death of Parent

6:00-7:30pm

Tuesdays: Sept 11, 18, 25; Oct 2, 9, 16

Location:

Hospice & Palliative CareCenter
101 Hospice Lane, Bldg 121
Winston-Salem, NC
Williams Education & Counseling Center
To register, call 336.768.6157, ext. 600

Grief Support Group - Mocksville

Meets on the 1st and 3rd Tuesday
of each month
10:30am to Noon

Location:

Senior Services of Davie County
278 Meroney St • Mocksville, NC
To register, call 336-753-6230

Individual Grief Counseling is available at each of the offices listed below



Hospice & Palliative
CARECENTER

**Hospice & Palliative CareCenter
serves 13 counties** from four
offices located in Winston-Salem,
Mocksville, Walnut Cove, and
Salisbury:



Please contact our office nearest you:
336-768-3972 in Winston-Salem
336-753-0212 in Mocksville
336-593-8450 in Walnut Cove
704-633-5447 in Salisbury
1-888-876-3663 from Anywhere

There is no fee for groups, though advance registration is requested.

The Circular - Summer 2007 Issue

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**We gratefully acknowledge
all of you in the
community who support
Hospice through your
United Way donations.
You have helped to
make care available to
many in need in your
neighborhoods, churches,
schools and businesses.**



United Way



Hospice & Palliative
CARECENTER

101 Hospice Lane
Winston-Salem, NC 27103
www.hospicecarecenter.org