

Annual General Meeting 2014

Executive Director's Report

I continue to be privileged to work with an amazing and dedicated group of people who really care about our clients but who also truly care for each other. I appreciate the wonderful volunteers who offer endless amounts of time and energy and our very committed board. I am humbled by the support of our community in every possible way for the work of Hospice

Volunteer contributions

This year Pat Lamont recorded a total of 11,838 volunteer hours. The vigil program relies on more volunteer hours than any other program and we continue to seek more volunteers for it. Some other highlights: we recorded 5,649 hours of direct service to clients, including one to one, hospital visits, care clinic, group support etc. Volunteer support and training took 1,965 hours of volunteer time and fundraising took 1,996 volunteer hours last year. People spent 476 hours caring for our house and the gardens. Pat works diligently to capture these hours which we report to our funders, please make her job easy by replying to her monthly emails. Of course the gifts of volunteers cannot be well expressed in numbers alone, you bring a myriad of gifts in service of Hospice clients.

Staff Changes

Kalon Kappenman took time off to take care of some health issues and we are grateful that Karen McDougall stepped into the part-time receptionist/office assistant role. We were happy to greet Kalon in her part-time return to work just before Christmas.

Candace Kirby joined us as a second client services counsellor in 2014. In addition to welcoming clients to hospice care, she had a year of building relationships with new and existing teams at CDH and Chemainus Health Care Center and working to help implement the new integrated team services.

Public Policy Institute

2014 started out with an exciting opportunity and challenge. With the support of the Board I was able to participate in the Public Policy Institute, a series of two day training sessions from January to June that offered a wide variety of expert advice as participants developed a strategy

Cowichan Valley Hospice
Caring for families through advancing illness and grief
Since 1981



for the development of a public policy. Of course I chose to work on policy around residential hospice care and learned much about research, identifying decision-makers, strategy development, presenting a case, evaluation, etc. This experience will continue to inform our work to move hospice palliative care ahead in our community.

Community Consultation

With funding support from the Cowichan Community Health Network and Shared Care (which is a partnership between Doctors of BC and the Ministry of Health) we consulted with Hospice clients in order to develop questions for a focus group on experiences of end of life care, the first step in the community consultation that rolled out in February 2015

CRVD Funding

We are very grateful for the establishment of a CVRD service function for Hospice. The region's taxpayers will now contribute about 33 cents annually for every \$100,000. of assessed value on their homes. We plan to continue to partner with the CRVD to develop the services that we will need in the future.

Renovation

Over the years Hospice has always attracted skilled volunteers with a wide variety of experiences. In 2014 with increasing numbers of skilled counselling volunteers willing to see several clients a week, we shifted to offering more care on-site. Our volunteers still visit people in the hospital and in their homes as needed, but many grieving clients prefer to come to the house. This trend lead to the decision to renovate in our building once more to create two more client rooms and a wellness room, as well as better sound separation between the meeting room and the living room. Thanks to funding support from the Chemainus Health Care Auxiliary and with Dan Nugent's Wisdom Philanthropy as contractor and Dee Pope's coordination, the renovations are continuing into 2015.

Program Highlights:

We are excited about some new collaborations that started in 2014 to provide a more integrated approach to end of life care, we hope that these are only the beginning.

Client Services: Shelley Kuecks & Candace Kirby

Shelley asked a client a few months ago how she'd heard about Hospice, and her reply was "Who hasn't heard of Hospice??!!" Quite a change from some years back, when we were certainly not the household name we apparently are for some!

And we definitely are busy. The number of people we serve continues to be steady, we had contact with around 750 community members in 2014. This number includes grief and

palliative clients, caregivers, and people calling for information about our services for friends and family. Sometimes people come for short term support, maybe even just for one appointment to make sure they're "on the right track"... others have regular support over several years with several of our services.

Two new initiatives in 2014 are providing integrated palliative care in our community.

We are most excited about the launch in 2014 of a Pain and Symptom Management consultation team lead by Dr. Valorie Masuda with palliative nursing specialist, Charlotte Robinson and one of the two hospice counsellors. In the hospital the team sees patients referred by their physicians, and can attend to the physical, social, emotional and practical components of managing pain and other symptoms. Patients and family members meet the whole team and make connections with more than just one person or service. With a more complete picture of a patient's situation, the Pain and Symptom Team can provide more meaningful whole person care.

Also new in 2014 was the involvement of hospice counsellors in community palliative rounds with Dr Masuda and the community home care nurses, an addition to the palliative rounds at CDH that we have been attending for many years now. Community rounds provide the opportunity to collaborate on our support of the palliative clients in their homes, updating home care and other team members on the care we're providing and, as with the Pain and Symptom Clinic, responding to a more complete picture of clients' needs.

Both of these initiatives add immensely to the much needed integration of supports for community members living with palliative diagnoses, and their families.

Also new in 2014 was better support at Chemainus Health Care Center to patients who are in the palliative room there and also to residents, including 1:1 support, Therapeutic Touch and volunteer support at their monthly memorial service.

Hospice Volunteer Training: Kathy Skovgaard

2014 saw a change in our delivery of Hospice Volunteer Training to encompass the broad range of volunteer interests and skills which our fabulous volunteers present to us upon application. The training modules were redesigned into two sub-sections so those volunteers whose initial areas of interest were not direct one on one volunteer companionship with our clients, could take four modules of Hospice Orientation training and thus begin to volunteer in their chosen specific areas more quickly! This redesign also allowed for volunteers to complete the training in two timeframes if they could not immediately commit to a ten or eleven week training program - and allowed volunteers whose interests expanded over time to include client support to consider entering the latter section of training modules at a later date. In 2014, 19 new volunteers were trained in this newly designed, two part, 44 hour training program.

As always, our volunteers enjoy ongoing continuing advanced training workshops to hone their skills and to build connection and support for them in their volunteering endeavours. Our volunteers also regularly attend the bi-annual Vancouver Island Federation of Hospices Education Day in Parksville, B.C.

In 2014, the following advanced training workshops were offered free to all Cowichan Valley Hospice volunteers:

‘Advanced Issues in Non-Violent Communication’ with Penny Wassman

‘Cultural Awareness in Serving First Nations Clients’ with Helen Dunlop

‘Advanced Care Planning Issues’ with David Pope

‘Heart Presence in Supporting Palliative and Grieving Clients’ with Jill and Joe O’Carroll

‘Boundaries, Self-Care, and the Dance floor’ with Elizabeth Causton

‘Multi-Faith End of Life Issues: 11 faith groups’ with Spiritual Care, Island Health