A ewel of a patient

She's a social activist who has traveled the world. And before she was even born in Springfield, Illinois in 1919, Jewel Procter Hines had ties to a past American president, and a possible future one.

Jewel's grandfather worked as a custodian where Abraham Lincoln had his law office in Springfield — fast forward to today, it's the same place where Sen. Barack Obama announced his candidacy for president.

It's also the same place where Jewel would play as a child because she was raised by her maternal grandparents. Jewel's parents divorced when she was very young, and her mother, Eulalia, worked in Chicago because there were few opportunities in a small town for African-American professionals. Her mother was heavily involved at

Hull House, working under Jane Adams, who was considered a pioneer of the modern social work movement.

Hull House was dedicated to all aspects of social care — fighting homelessness, helping mental disease, advocating health care.

Eulalia worked at Hull House around the time of the Great Depression, and Jewel recalled masses of people

waiting for assistance. She revered her mother, calling her a "fairy princess" because of the caring work she did and the strong, independent woman she was, both unusual for the times.

At age 16, Jewel graduated high school, and headed immediately to Howard University in Washington, D.C.

✓ Jewel then.

✓ Jewel now.

"My family had all gone to college and they believed education was very important," Jewel said. Because of the great passion she developed for her mother's social work, Jewel majored in sociology and minored in psychology.

At age 18, Jewel fell in love with Wilton Hines, whom she met on a blind date. After a year of dating, they married, preparing for a life of adventure and travel.

Wilton was a reserve officer in the Army and was called out in 1942 where he worked at several posts. Jewel stayed in Chicago with her mother and began a long connection with the Red Cross working

in "Home Services" (known as Armed Forces Emergency Services today). When Wilton was discharged in 1945, the couple moved to Washington D.C. for a few years, though Wilton's work in civil engineering eventually led him to an opportunity with a U.S. government training program in Liberia. Jewel joined up with her husband, eager for the opportunity to experience another culture.

"It was fascinating, meeting so many different kinds of people. It was almost like a little United Nations," Jewel said.

Jewel worked many jobs there, including teaching at an elementary school, private tutoring and cashiering at the local market. She quickly adapted to challenges the different culture brought, like learning the metric system backwards.

Jewel and Wilton lived in Liberia on and off for 10 years, eventually moving back to the States and settling in Connecticut and after another brief stint in D.C., Jewel put her sociology degree to work at Hall Neighborhood House, a local non-profit that helped children and senior citizens in need. Jewel worked her way up to executive director before leaving to move to Newark, New Jersey while Wilton went to Columbia University to get his PhD in education. The area proved to be the one place Jewel liked least in her travels.

Jewel continued on page 4.

volunteer spotlight

THE HEART OF

Hospice of Green Country started with volunteers 20 years ago, and Sharon Thoele remembers the force behind it all.

"If it hadn't been for the late Rhoda Chastain, Hospice of Green Country wouldn't have happened," Sharon declared. "It was her tenacity that kept us going."

Rhoda had lost a daughter to leukemia while living in Milwaukee and experienced hospice firsthand. Later when she moved to Tulsa, she recognized the need for one in the area.

In the mid 1980s, Sharon, Rhoda and many other volunteers gathered to plan the beginning stages of Hospice of Green Country. The group met regularly wherever they could, including Rhoda's kitchen. "To be credible, we really needed to get out of Rhoda's kitchen," Sharon said with a laugh.

After two years of planning and fundraising, a lease was signed on the first location of Hospice of Green Country — a three room suite at 51 Parkway, and two nurses were hired, Becky Armstrong and Pat Johnson. Sharon moved from the board and became the first volunteer coordinator for Hospice of Green Country.

Sharon recalls the first patient that was admitted in September of 1987, a Native American man who passed away on Christmas Eve.

"He was very poor, but a very real gentleman. He got the best care," Sharon said. "Honestly, the work wasn't



easy. You are dealing with people who are terminally ill, but actually, on the flip side, it was easy because it's so honest."

Though caring for the patients was rewarding, one of the biggest challenges to that care was raising money. "Raising the money so this work could continue was so important. We wanted to have an organization that focuses more on the care than the bottom line."

Because Hospice of Green Country could only afford a few paid staff, volunteers were still the main life force of the organization. The first volunteer appreciation dinner was a special time for all involved, allowing volunteers to enjoy an evening without having to do anything. "I remember, for me, how great it was to pay tribute to the glue of the organization," Sharon said.

Today, as executive director for Tulsa C.A.R.E.S, Sharon still believes in the mission of Hospice of Green Country and consistently refers clients in need of hospice.

"I still believe that the non-profit hospice, Hospice of Green Country, is where the heart of hospice is." **



Just Otay Home

Looking for an opportunity to help Hospice of Green Country without leaving the comfort of your home? Your chance is right around the corner.

Pattie Bowman, honorary chairperson for the seventh annual Hospice of Green Country Stay at Home Tea, invites you to an afternoon of fine tea while helping a great cause.

On Saturday, December 8, make a cup of tea, put your feet up and bring out the checkbook. Patients and families in need of compassionate and quality care will benefit from your generosity, while you enjoy a relaxing afternoon at home.

⋖ Pattie Bowman

Honorary chairperson of the seventh annual Stay at Home Tea.



paving the ROA

Dr. George Pikler can remember when he was first exposed to the world of hospice.

From 1969 to 1971, he was a resident at the Mayo Clinic, and he attended a seminar where he was introduced to a nun who had trained with Dame Cicely Saunders, the founder of the modern hospice movement. The nun was on her way to New Haven, Connecticut, to start the first hospice in the United States.

After that experience, it's only fitting that Dr. Pikler and his wife Elaine, a licensed professional counselor specializing in cancer counseling, were among the first people to become involved in the founding of Hospice of Green Country.



George and Elaine Pikler

Dr. Pikler had been working at M.D. Anderson Cancer Center in Houston, Texas when he moved to Tulsa in 1978 and became the director of oncology at Hillcrest Medical Center. Elaine worked in his practice as a cancer counselor, providing social and psychological care to cancer patients and their families. They were one of the few practices in the country that provided this counseling at no charge — a practice that would soon become the backbone of Hospice of Green Country.

Because of the medical and social work the Piklers did with cancer patients, both noticed the lack of palliative care for the dying.

"There were a few of us in the community who were looking to start a hospice. We recognized that what we needed was not an institutional hospice, but more of a community hospice. We didn't want to limit access to anyone who could benefit from hospice care," Dr. Pikler said.

"The idea was for the hospice to be in its own building, so it was stand-alone. It had to be non-profit. We really needed community support because at the time, hospice was something that Medicare didn't fund," Elaine said.

The Piklers and other volunteers that met knew the need was there — the biggest challenge was figuring out how to get the program going. Private insurance and Medicare did not pay for hospice, and money was tight. Eventually the group secured grants from the Founders of Doctor's Hospital and Hillcrest Foundation — but money was just half the battle. They knew they needed the medical community to accept the hospice philosophy.

"In order to have a successful program, we really had to instruct physicians and nurses about hospice. This included all types of physicians, because there were so many life-threatening diseases. Many of us went around talking to the medical community to educate them," Dr. Pikler said.

Reaction was mixed at first. "Physicians were unsure how to deal with it. When do you approach a patient and say 'You have six months to live and you should call hospice," Elaine said. "It's hard for physicians to say, and patients don't want to hear it."

"We had to teach that quality of dying is very important, and that hospice can make it better, so the timing of referral is very important. You don't want to refer at the last minute when the patient is unresponsive," Dr. Pikler

The Piklers hope this is something that continues to change, and Dr. Pikler would like to see education about hospice start even earlier for doctors. "I feel there is a need to expose medical interns to the program, instead of waiting until doctors are in practice 10 or 15 years. It should really be a part of training in medical school. If you teach about hospice when they are starting out, it's already ingrained and it becomes easier [to refer]."

Looking back on the past 20 years, the Piklers can say they like where Hospice of Green Country is now. "The seed that was planted so long ago has grown into all these different programs and options," Dr. Pikler said.

"We were proud of what we accomplished, in spite of all the growing pains," Elaine added.

So what would Dr. Pikler like Hospice of Green Country to accomplish in the next 20 years?

"I would like to see it still active and continuing in the direction it's going — educating the medical community and the community at large about hospice care, as well as recognizing the change in the community in terms of demographics, like what is being done with the Hispanic Outreach program. It's important to make sure all people still get care."∗

YEILD to your grief

"Why would we want to yield to something like grief?

How can we embrace it and find significance in it?

Doug Manning, a wonderful author and counselor in the areas of grief and elder care says 'significance is not only the key in grief; it is involved in almost every aspect of our lives. When bad things happen to us the first thing we want to do and the first thing we need to do is to establish the significance of that event.'" (Special Care Series, Book Two, Discovering Significance, 2003, In-Sight Books, Inc.)

We've all heard the old saying "You don't know what you have until it's gone." Songs have been written about this saying, we teach our children the value of life's treasures from this saying, and it has become an automatic response to loss. Many times, what this saying actually creates within us is a feeling of guilt. We guilt ourselves into thinking we never fully appreciated someone or something until they/it was gone. In grief counseling, it's called 'taking inventory' and what we must do is inventory those things we loved and discover the significance and the sense of worth in them and bless them.

That sense of worth, the value of it all, is what you must begin to embrace.

Establishing worth and value to a person may seem a foreign concept, yet we do it daily in our stories of loved ones. We find healing moments in those stories — moments of shared love,

memories worth keeping, value. In these stories we establish significance of our loved ones.

When our loved one dies, the issue of meaning is central for the survivors: What does this death mean? What does this life mean? What did this person mean to me and others?

As intensely painful as grief and mourning can be, much can be done to bring comfort to those in pain. Having a meaningful service of farewell, a funeral, a celebration of life; receiving support from loved ones; remembering anniversaries and special times and holidays throughout the year; giving in memory of a loved one; creating a personalized or unique remembrance ritual is often the most healing.

Simply telling a story about someone, yielding to our grief and acknowledging the nature of the process, allows us to find and establish significance."*

~ An excerpt from *From Grief To Grace* by Chaz Gaut An advocate for end-of-life choices, compassionate care for the dying and dignity and justice issues, Chaz Gaut has worked for Hospice of Green Country for over two years. He serves as Community Relations/ Marketer, On-Call Chaplain and Grief and Bereavement Lecturer. Chaz is an inspirational keynote speaker and published author in the areas of bereavement, grief journeying and spirituality.

Jewel continued from page 1.

"It was a tense time, lots of race riots. There was a lot of racial tension and corruption everywhere," Jewel said. "I didn't care for it all, and went away every weekend that I could."

The Hines eventually found their way to Tulsa, deciding to move here after visiting Jewel's aunt because Wilton wanted "someplace warmer." It turned out Tulsa would be the final stop in the Hines' journey, as they've lived here for over 30 years.

As Jewel did everywhere she lived, she jumped right into helping the community by working with Friends of Day Care at a location in the old Southroads Mall. She also volunteered for the Oklahoma Eagle where she wrote an opinion article called "Hinesight," and served on the advisory committee for elderly care with LIFE Senior Services. As part of her social work during her life, Jewel helped lead the fight for things such as nutrition and respire care for seniors that are now standard as part of the Older Americans Act.

It would be ironic that the very things Jewel advocated for

in senior care would be things she would need as she got older. After a terminal diagnosis, Jewel sought out the advice of her friend Suzy Sharp, development manager with LIFE Senior Services, about good hospice care.

"My personal and professional experience with Hospice of Green Country has always been nothing less than wonderful. Their caring team of professionals provides just what a family needs to adjust to difficult times, making it the best choice for Jewel," Suzy said.

Looking back on her life, the one thing Jewel never did during anything she encountered was back down when the going got tough. It's that same quality within herself that she sees and respects in Hospice of Green Country.

"One of the best things about Hospice of Green Country is they don't give up — if plan A doesn't work, then they try plan B. Then plan C. Everyone has been wonderful, and knowing they are there for me whenever I need them has been a blessing."



Connecting with Life

According to an English language dictionary, the word appriversary means, "the day of the year on which something once happened and is remembered." As busy human beings, it is so easy to get caught up in day to day tasks that we forget to stop and remember significant events that have shaped our lives. We often choose only to remember dates without allowing ourselves to reexperience the emotional significance of the places or the people who participated in those events. For me, one of the most rewarding aspects of chaplaincy involves listening to our patients recall the stories that impacted them most significantly over the course of their lifetimes. There are stories of battles won and lost, love relationships that stood the test of time and those that faltered, family and friends who came and stayed, those who came and went, and some who never came at all. It is a sacred and special privilege to be entrusted with the stories of those who are nearing the end of their lives.

As a pilgrim on my own journey, I have learned many lessons from those who have shared their stories with me. For example, I have learned to take time to stop and reflect on the direction my life is taking. Am I making choices I will be happy to recall at the end of my life? Am I investing my time in the relationships I value? Are there things I wish to do or places I wish to see on my journey? Sometimes we forget we have the power to change the course of our lives. Each day gives us the opportunity to begin again, to decide how we want to live and who we want to be. Changing the course of a life takes both intention and action, otherwise life carries us on the path of least resistance.

I have also learned to celebrate not just the usual anniversaries, but the ones that gave me hope and strength when I needed it. One way I do this is by collecting items that remind me of those times. Cards and notes of encouragement, tokens and symbols of significant events, photos of people I met along the way are all kept together in a "joy box." I review these things periodically, especially when I need a reminder that all is well. Reliving these memories, seeing the faces and hearing the voices of those who believe in me lift my spirit and sustain me through difficult times.

Finally, I remember to carve out time to experience the things that feed me spiritually. Prayer, meditation, reflection on sacred writings, conversation with others of similar or different spiritual beliefs — these things help me view the world as larger than myself, yet also know that I have a unique place in it. Today, this day, is my time to live and it's up to me to make the most of it. Connecting with the One who gives me strength helps me keep life in perspective.

What or who do you need to remember today?

Rev. Delana Taylor is the director of spiritual care and coordinator of Pet Peace of Mind for Hospice of Green Country.

¹ "anniversary." Kernerman English Multilingual Dictionary. K Dictionaries Ltd. 27 Aug. 2007.

family matters



Leace of Mind FOR PATIENTS

Hospice of Green Country has launched a new program that provides its patients with the peace of mind of knowing their pets will be cared for when they are unable to physically or financially.

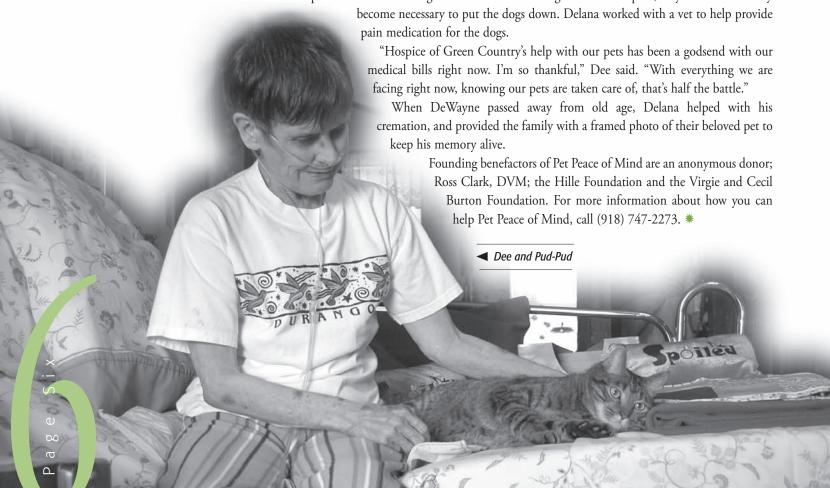
"Pet Peace of Mind" is unique to hospice care in that it targets hospice patients who are unable to maintain appropriate routine health care and nutrition for their animal companions due to medical expenses or caregiver disability. Development and oversight of the program is led by Hospice of Green Country's director of spiritual care, Delana Taylor, who is also a veterinarian no longer in private practice.

"As a veterinarian, this is very close to my heart. As a chaplain, I could go house to house and see how important pets are to the family dynamic," Delana said. "Because Hospice of Green Country cares for the whole family — not just the patient — we recognized the need to develop this innovative program."

Some ways Pet Peace of Mind cares for Hospice of Green Country patients and their pets include financial support for routine veterinary care to maintain pet health and decrease patient stress, spaying and neutering assistance, pet boarding or pet-sitting services in case of patient hospitalization, pain and comfort medications for elderly pets and pet transportation to nursing facilities to visit owners. Hospice of Green Country will also network with local rescue organizations, veterinarians and animal welfare groups to provide pet care as needed.

Hospice of Green Country patient Dee Rosewitz knows how beneficial the program can be. Dee describes her family's pets, dogs Amanda and DeWayne, plus cats Pud-Pud, Pinkerton and Tip as "just like our babies."

DeWayne and Amanda had been with the Rosewitz family for 12 years, and as they were getting older, arthritis settled in, making it very difficult for the dogs to get around. Mounting bills and other issues were piling up for the Rosewitz's and they couldn't afford the heartworm and pain medication the dogs needed. Because the dogs were in such pain, they were afraid it may



ofgreencou

from the executive director





Tamra Moore, RN

As we round the corner toward fall and winter, my mind turns to planning for 2008. How can we improve our services? What program does our community need that we might develop?

And then my mind wanders back 20 years to a time when Hospice of Green Country's founders felt such pride at the admission of the first patient. The

heart they had for hospice is evidenced by the time between 1985 and 1987 they spent planning, fundraising and dreaming of a place where terminally ill patients could receive the best care, regardless of ability to pay. For the past 20 years, this belief, our mission, has been consistent no matter the changes to our community.

Many of our original founders remained connected over the years and many more who believe in our mission joined forces. Our unique, innovative and top-quality programs are the result of this ongoing dedication, as well as commitment of time and financial resources. Because of this, we attract the high caliber of paid staff and volunteers to support the dream. I am proud to be a part of continuing the work our founders began.

I humbly thank these dedicated individuals for their hours of work, for overcoming the challenges they met, for Hospice of Green Country's *beginning*.

Tamra Moore, RN Executive Director

from the president



Jim Huff

About this time 20 years ago it would have been difficult to imagine that Hospice of Green Country would blossom into the principal courtesy care provider it is today—with our innovative Live Alone, Pet Peace of Mind and Hispanic Outreach programs, as well as initiatives to partner with other facilities where hospice care is warranted. While it is interesting and a bit nostalgic to reflect upon our history,

the challenges in the next 20 years will make even more interesting history.

I recently read an assessment of the hospice industry in America. The article said "Today, hospice care is widely available, but widely underutilized." Why is this so? How can a service so beneficial be so widely overlooked? I also wondered if that author had ever been to Tulsa where it sometimes seems there is one hospice per square mile.

Think about this:

About 2.5 million people die in the United States each year. Of those individuals over age 64,

- 50% die in hospitals,
- 25% die in nursing homes, and
- 25% die at home, although 70% would prefer this arrangement. Only about 38 % of these people receive some form of hospice care.

The articles regarding hospice underutilization seem to boil down to four basic issues:

- 1. Some dying patients never get referred to hospice.
- 2. Some patients are referred to hospice in the final days of their

- lives (about one third of patients spend less than seven days in hospice care).
- 3. Some aspects of hospice care are needed much earlier than the last six months of life.
- 4. Cultural differences and barriers contribute to an inequitable distribution of hospice care.

All of these issues are really just opportunities to increase our patient base. In some areas we already have programs or initiatives. In other areas solutions must be sought within governments and the medical community itself.

That said, I take heart in a prediction by Dr. Eric Hardt at the Boston Medical Center. He predicts the government will realize that giving more personal care at the end of life will keep people out of the hospital. It would require almost no major change in the bureaucracy and hospice would be the natural and logical way to implement it.

Dr. Hardt also believes palliative care will become a standard part of training in medical schools in the future. He tells his students that in order to graduate from medical schools, you should be there when someone is born and you should be there when someone dies a natural death.

In our 20 year history much has been accomplished and much remains. Happy anniversary, and our appreciation is extended to all those who preceded us at Hospice of Green Country.

Jim Huff
President, Board of Directors

2007 Board of Directors

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Jim Huff, Community Volunteer

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Executive Director Tamra Moore, RN

Our Mission

Hospice of Green Country is a nonprofit, community-based, multi-faith and multi-cultural United Way agency dedicated to providing compassionate and quality end-of-life care to patients and families — regardless of ability to pay.





www.hospiceofgreencountry.org

Hospice of Green Country, Inc.

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hospice events

Mark Your Calendar!

Sunday, November 11

Tulsa Annual Memorial Service

Thursday, November 15

United Way Victory Celebration

Saturday, December 8

Stay at Home Tea

Hospice of Green Country Staff

Dala Jarolim, MD – Medical Director William Smith, MD – Medical Director Frances Haas, DO – Assistant Medical Director

Lorena Arista
Shirley Bean
Cleshona Brewer
Linda Brock
Pete Brown
Kathy Bryson, RN, BSN
Glenda Crook, RN
Tracy Duckworth, LPN
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