



Compassion for Life

Life Lines

FourSeasonsCFL.org

**Invested in the future
Four Seasons
Foundation**

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COMPASSION

We are a Companion for the Journey

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In the Midst of a Sea Change

Chris Comeaux, President/CEO

The old Chinese proverb that says, “May you live in interesting times,” certainly applies to today. So many areas are in the midst of a sea change and one of those areas is healthcare. But every potential change can be viewed as an opportunity and today opportunities abound. One of the opportunities Four Seasons sees, is to shape the way healthcare is provided for WNC and potentially for our country as a whole.

You might ask, why does healthcare have to change? The percentage of our GDP that is taken up by healthcare has been growing and is projected to grow at a pace that could be disastrous to our country. Many of us could not sustain our paycheck going from 15% of our total pay going to healthcare costs to as much as 20% to 25%, but yet that has been the trend line with healthcare as a portion of GDP. We consume a lot of healthcare and paradoxically aren’t the better for it. You may ask what does Four Seasons have that might help this challenge? We certainly could lament like many other healthcare providers that the rates we get paid have been reduced and with it a whole host of regulatory burdens have been added, so we are being asked to do more and unfortunately having to do it with less. Instead of using those challenges as excuses, we have chosen to see these as opportunities. In that space of opportunity we have honed what our true north is, which we define as, co-creating the care experience. This means that we have an opportunity to meet patients and their families where they are and find out what is most important to them. We then focus our energies on making those most important things happen so people can live with care and with compassion their last years, months, weeks, days, and hours. What a sacred opportunity we have, to do that better? And when Four Seasons does that well, everyone wins: patients, families, the community, and paradoxically healthcare dollars spent are at more sustainable levels.

Another opportunity Four Seasons has been given, is to prove palliative care for our country. Four Seasons was the only hospice and palliative care provider in the United States chosen by the Centers for Medicare and Medicaid Innovation (CMMI) to prove that palliative care can provide great care to patients and families and doing that in a way that creates a great patient care experience with high quality care and all the while paradoxically saving Medicare money by ensuring the right care is provided at the right place and at the right time.

So our times are interesting but most importantly the opportunities abound. Thank you for partnering with Four Seasons. We are all making a difference together.

Wish List

Elizabeth House

- Extra soft facial tissues
- Colored bath towels and wash cloths (including red)
- Flat, colored twin size sheets (no fitted sheets)
- Full or Twin size washable, colorful bed quilts
- Combo CD/radios for bedrooms (no CDs please)
- Individually wrapped mints, candy and snacks
- Small size dessert paper plates and napkins for hospitality service to patient families
- Bird seed (Shelled Sunflower or Black Oil Sunflower)
- Flat screen TVs for patient rooms
- NO personal care products please

If you would like to donate any of the items on the Wish List for the Elizabeth House, please call 828-692-9633.

*Or, if you prefer, you may drop them by the Elizabeth House
581 South Allen Road
Flat Rock, NC 28731*



You are invited to stop in for a visit and a cup of coffee!

Our new Four Seasons Compassion for Life Foundation office is conveniently located in downtown Hendersonville at 221 N. Main Street.



2016 FOUR SEASONS Foundation Board of Directors

(Standing, L-R) Henry Johnson, Robert Seiler, Nancy Bouvet, David Rhew, Ruth Birge, David Reeves, Mary Coffey, Cindy Schirmer

(Seated, L-R) Caroline Gunther, Dick Burns, Sherri Haggard

(Not pictured) Lynn Penny, Sandy Williams

Four Seasons’ New Foundation is Invested in the Future of Quality Care in Western NC

by David Reeves, Chairman of the Foundation Board of Directors

I believe community based health care for persons and with serious, life limiting illnesses should be available to everyone. This is why I said “Yes” when Four Seasons CEO/President, Chris Comeaux, asked me to lead the Foundation’s board of directors. Together, we are committed to securing high quality health care for the people in our region for generations to come.

Personal independence is a core value of mountain people in our region, regardless of their social or economic status or type of employment or lifestyle. That independence must be reflected by health care providers and choices that respect each person’s needs and ensure their highest quality of life. In our area, we’ve taken measures to ensure each Four Seasons patient and family receives the services they need without a question of whether or not they can “afford” care.

Not surprisingly, Four Seasons is one of the last independent, not for profit, free-standing, community based hospice and palliative care organizations in Western North Carolina. I believe the Foundation’s work is critical to ensure independent, quality care that is unique to Henderson and Buncombe Counties and Western North Carolina, particularly in light of a rapidly changing, and confusing health care system.

An investment in Four Seasons ensures that every person who lives and works in our area has access to the care they deserve, and that is the commitment we make to you.

MusicTherapy

A Day In The Life of a Music Therapist
as shared by Lara McKinnis, MS, MT-BC



I am lucky. I spend five days each week walking into rooms in homes, skilled nursing homes, assisted living facilities and Elizabeth House (the Four Seasons Compassion for Life Hospice inpatient unit). Our mission statement is simple: *Co-Create the Care Experience*. My small part in this mission is also simple. I walk into rooms to offer freedom. Indeed, I am able to offer my patients freedom from the confines of the walls around them; freedom from the lonely label of their diagnoses; freedom from the need to conform to any set group of “end of life” rules; and at times freedom from the confines of their “disease.”

I am a music therapist – I use music in a therapeutic manner to elicit non-musical goals. The field of music therapy began in the 1950s, and is still in its infancy in many ways. However, I am sure of three things: 1.) music therapy interventions are both evidenced-based and reasonably predictable; 2.) the field of neuroscience is currently doing a great job of advancing our awareness of how and why the brain responds to music therapy the way that it does; and 3.) regardless of my knowledge of the two previous points, 20 years into my career, I still consider what I do quite magical.

My story today is about Arty. During his prime, so I heard, he enjoyed preaching on Sundays and felt very blessed to have a loving wife and family.

Then, through a series of events spanning several years, his life changed dramatically. His wife passed away, he was diagnosed with Alzheimer’s disease and dementia, his daughter Sally could no longer care for him at home, he was admitted to Hospice, he moved into a skilled nursing facility, and I was lucky enough to be one of the team members who would care for him.

Before meeting him, I gleaned information from his chart, my team members, and the staff at his facility. First and foremost, I learned that the transition from his daughter’s home to his now shared room with a total stranger had not been smooth.

To make matters more difficult, he couldn’t say that he was upset or ask to be moved to a different room or even ask for a snack. He could no longer clearly articulate his thoughts at all. He could no longer dress himself, shower, shave, or even go the bathroom on his own terms. He was now completely dependent on other people for everything.

I was not surprised to learn about Arty’s intense agitation. He was unable to relax for any amount of time. His life was a series of anxious moments. He needed constant supervision when he was awake. Medication allowed him to rest, but did not ultimately quell his anxiety.

Enter, music therapy.

Arty wasn’t in his room when I arrived to do his assessment. It took about 5 minutes for a nearby nurse to help me track him down. We found him compulsively picking up and putting down trinkets arranged on a table in another resident’s room. He appeared small and hunched over, covered only by a thin hospital robe. He didn’t outwardly respond when the nurse gently took his arm and guided him back into the hallway toward his room.

As we got closer to his room, I heard him attempting to communicate in an effort to slow down the commute. A series of sounds that struggled to become sentences flowed from his mouth with no rhyme or rhythm.

Reluctantly, he entered his room still guided by the nurse and sat on his bed. As the nurse pulled his door shut, she smiled and added, “Don’t expect him to stay in here for more than a couple of minutes.”

Arty wasn’t looking at me. He was staring aimlessly at the wall. The room felt barren and empty even with both of us in it.

I strapped my guitar over my shoulder, sat down in front of him, and started playing a song that I thought might be familiar to Arty. He stared at me motionless for about 2 minutes. Then, he was up. He quickly walked over to the other side of his room and began picking at the covers on his roommate’s bed; 30 seconds later, he was attempting to open the drawer of his bedside table; 30 seconds after that, he was tapping on the tray next to his bed. His movement was impulsive and repetitive. So, I followed his lead. Making sure to leave plenty of space between us so as not to make him feel trapped, I allowed my guitar and my voice to create a soundtrack to his movements. When he moved his arm up, my voice got higher; when he stopped moving, I was silent; when he moved faster, I too upped my tempo.

A couple of minutes later, for all intents and purposes, Arty and I met. He looked at me for what might as well have been the first time. Our eyes locked. He stared at me with tired but focused eyes. His movements were suddenly not purposeless.

Music Therapy continues on page 8



Miracles on Night Shift

Wishes Granted; Dreams Fulfilled
as shared by Stephanie Davison, RN

On the night shift we don’t often get to see wishes granted, dreams fulfilled. That’s just the way it is, and we understand it; weddings and bliss are for the daylight hours. But sometimes we get a little midnight magic, and that’s what happened the night Winter Storm Jonas blew into town.

It was a cold, windy night when RC came to the Elizabeth House, with uncontrolled pain. This Vietnam Vet arrived in a private vehicle, driven by one of his daughters, and accompanied by one of our support nurses, Karen. Within just a short time, his pain was eased and he was able to sleep and find comfort, with his daughter asleep in the recliner beside him.

One of RC’s dreams was to finish a 3-wheeler motorcycle from Harley-Davidson. Now, I don’t know much about these vehicles, but he had been working on it a while, and was almost finished before he became too weak to continue. That’s when the ingredients for our Midnight Miracle started to kick in.

#1: His cousins got the brakes fixed. They decided to bring it to the Elizabeth House Thursday night, so it would be there for him to see Friday morning. It still wouldn’t crank, but they loaded it onto a trailer and brought it anyway, arriving about 11:45 pm, in the rain and sleet. They maneuvered the trailer into place, planning to unload the 3-wheeler into a parking spot, cover it with a tarp, and show it to him in the morning. Just for kicks, the cousins tried to crank it again.

#2: The motor started. They circled the parking lot a time or two, then pulled it up onto the walkway outside the garden porch, because RC wanted to see it right then and there. His daughters and the CNAs got him dressed in a warm jacket and cap, transferred him to a wheelchair, and wrapped him in toasty blankets straight from the warmer. The daughters joked that he looked like a penguin on wheels. Together we all escorted him outside to view his dream. It was now midnight.

#3: The sleet stopped. The girls wheeled RC down to the 3-wheeler, where he gunned the motor a couple of times, and took some pictures of them all together, smiling and laughing. One of our nurses, Charlene, was also able to capture the special moment on her phone. There may or may not have been a few tears along with our smiles. The moment was magical.

After about 10 minutes, RC was wheeled back inside. Swan and Machel, the CNAs, eased him back into bed, while his cousins parked and covered the vehicle, and headed home. The freezing rain and sleet began again, and within an hour, it was snowing. By sunrise, everything was white; the snow was 4 inches deep. The magic that happened at midnight was a gift just for us, the night shift. We are blessed.



Pet Therapy

Four Seasons Volunteer Noel Thurner, and her therapy dog “Parker” have been making a difference in patients’ lives since 2012

Tell us about Parker...

Parker is a 9 year old bearded collie. He has been registered as a pet therapy dog since he was 1 ½ years old. Together, we volunteer because I really believe in the supportive and calming abilities of a dog to help those in hospice.

What does a typical shift looks like when you are volunteering at FS as a pet therapist?

My pet therapy registry, Alliance of Therapy Dogs [formerly Therapy Dogs Inc] requires me to visit patients in facility settings only. So when I enter a facility it can often take multiple minutes to say hello to all the other patients in the common areas. Everyone wants to pet Parker. Then I proceed to our patient’s room, knowing each visit will be different, depending on the status of the patient. We adapt accordingly. Parker has a very soothing presence and our patients usually are relieved at this calming influence. But the time our hour is done, our patient is usually napping!

If you could only use one word to describe Four Seasons what would that word be?

Essential

If you could tell the community one thing about Four Seasons that they might not know, what would it be?

The support Four Seasons offers is not just for the patient but for the family and friends of the patient as well. It is all encompassing compassion.

Parker is a registered pet therapy dog. He does not do tricks, he does not act goofy and snuggly when on a visit, he just delivers a moment of peace and tranquility to those he visits.

Noel Thurner
Four Seasons Volunteer

Tell us about the impact you see your dog having on patients and even families.

The families appreciate the socialization and solace Parker and I bring with our visits. As he and I live a life connected to growing food and doing fiber work, we can relate to our patients in ways that they find soothing and filled with fond life memories.

What is your favorite life quote?

Within each of us is the gift to make a difference.



Advance Care Planning

To Plan, or Not To Plan?... That is the Question!
as shared by Jo Clare Wilson, M.Div.

Whether you are the kind of person who makes a “To Do List” or you are more of a “spontaneous let’s just do it” person we all like to make plans. We plan for so many events in our lives: we plan for our beginning a new job; we plan for moving into a new home; we plan weddings, birthday parties, baptisms and vacations! But the one item many of us hesitate to plan is to think about what kind of healthcare treatment we would want in the event that we could not make a decision.

It doesn’t matter if you suffer a tragic and unexpected accident or it is at the end of your life, we can easily end up in a situation where we are faced with questions such as whether we want CPR or not, how long should we be kept on life support, is a feeding tube something that we want even if it doesn’t prolong our life, is the care we are getting considering the quality of our life and what **matters to us** and who will make decisions about me if I cannot?

These questions and others are vital for our peace of mind and especially for our loved ones in order that they are not left with making a decision for you and **not really sure of what you would and would not want done**. To **not make a decision** is making a decision.

Advance Care Planning is about making sure you have the conversation with those folks who matter most to you about your future healthcare **and** completing an **advance directive** complete with notarization so you have the legal security and peace of mind. You may have heard people talking about The Conversation Project or even the organization in Lacrosse, Wisconsin (Respecting Choices) that accomplished the task of getting almost 100% of their population to complete Advance Directives.

It doesn’t matter how old you are or what kind of health you are in today; it is about making sure you have a plan for the future **in the event** you are in a situation where a decision is needed. Many people find it difficult to have this conversation and dismiss the idea with “I will be fine and I will never need anything like that.” It is also true that about 80% of us believe and state that we will live out our lives where we live and there won’t be any problem. But then about 80% of us wind up in an intensive care or in a situation where others make decisions about us.

Don’t be one of those people who forget to make a plan and end up without a choice. Learn about Advance Care Planning – complete your Advance Directives and be at peace!

Remember:
To not make a decision is making a decision.

It doesn’t matter how old you are or what kind of health you are in today; it is about making sure you have a plan for the future in the event you are in a situation where a decision is needed.

Jo Clare Wilson, M.Div.
Community Educator



MusicTherapy continued from page 6

The music had made them purposeful. I knew it, he knew it, and he knew that I knew it. He laughed, walked over to me, and kissed me on my forehead several times as if to say, "Now we can get to work."

For the next 10 minutes, I played a few different songs from various genres in an attempt to assess Arty's preference. He continued to move around his room, which suddenly no longer felt barren or empty. He appeared to be floating and looked at me often as if he was checking in with me to make sure we were both still there. His facial expressions changed with the music, as did the style of his movement. As I started to play "You Are My Sunshine," he walked over to me and put his arms around my guitar, which was still strapped to me. I started moving my feet with his and continued to sing as "the three of us" slowly danced for the entire song. At that point, he began vocalizing with me. He couldn't iterate the words, but he sang nonetheless. I can still see the smile on his face so clearly in my mind.

Approximately 30 minutes had passed. After our dance was complete, Arty walked to his bed and sat down. He was quiet and still, as if he was mulling over all that had just happened.

In order to support his seemingly contemplative state of mind, I played a few songs that were probably not familiar to him, but that all contained lyrics to which he might be able to relate. He appeared to listen intently as I sang about "letting anxiety go," "acceptance," and "finding peace." He eventually lay back in his bed, head on his pillow, smiled, and closed his eyes.

As I was on my way out, I passed the same nurse that had helped me find Arty upon my arrival. I told her briefly about our session and then added that he appeared to be peacefully sleeping. Her mouth dropped open in utter shock. She couldn't believe that he had been able to relax enough to fall asleep without medication.

I was only able to have a few more sessions with Arty. Each time he saw me, he seemed to know what was going to happen. He always ended up relaxed and peaceful in his bed, which never felt less than amazing to witness.

My job is a continuous flow of interactions centered around helping folks navigate and expand the confines of their diagnoses, express emotions that are otherwise hidden or stuck, and ultimately experience the freedom attached to "doing their work," whatever their work may be.

I am a music therapist. And, I am lucky.

FOUR SEASONS

Compassion for Life

OCTOBER • 2016

SUN	MON	TUE	WED	THU	FRI	SAT
			5	6	7	1
2	3	4	12	13	14	8
9	10	11	19	20	21	15
16	17	18	26	27	28	22
23	24	25				29
30	31					

NOVEMBER • 2016

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

DECEMBER • 2016

SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

Community Events & Education

OCTOBER

- 5 1-3pm @ Asheville Outlets
Caring for the Caregiver
- 8 11am-3pm @ Asheville Outlets
Community Day
- 12 1-3pm @ Pardee Signature Care Center
Estate Planning with Cindy Schirmer
- 19 1-3pm @ Pardee Signature Care Center
Rhythm & Blues

NOVEMBER

- 2 1-3pm @ Asheville Outlets
Advance Care Planning
- 3 1-3pm @ Pardee Signature Care Center
Hope Through the Holidays
- 9 1-3pm @ Pardee Signature Care Center
Hospice Care with Dr. Albers
- 10 1-3pm @ Park Ridge Health
Making Sure Your Healthcare Plans Are As You Wish
- 16 1-3pm @ Pardee Signature Care Center
Advance Care Planning

DECEMBER

- 2 5:30pm @ First Citizens Bank Plaza
Main Street/Hendersonville
26th Annual Tree of Lights Celebration
- 3 10:15am @ Main Street/Hendersonville
Hendersonville Christmas Parade

Call 828-692-6178
for additional information about these events.