



VISITING NURSE ASSOCIATION & HOSPICE  
OF VERMONT AND NEW HAMPSHIRE

331 Olcott Drive  
White River Junction  
VT 05001-9263

Nonprofit  
Organization  
**PAID**  
Permit No 120  
White River Jct  
VT 05001

#### *Headquarters*

331 Olcott Drive  
White River Junction, VT 05001-9263  
802-295-2604  
Fax: 802-295-3163  
[www.vnahospicevtnh.org](http://www.vnahospicevtnh.org)  
Referrals: 800-575-5162

#### *North Region*

66 Benning Street  
West Lebanon, NH 03784  
603-298-8399

#### *Central Region*

38 Pleasant Street  
Springfield, VT 05156  
802-886-2500

#### *South Region*

One Holstein Place  
Suite 311  
Brattleboro, VT 05301  
802-257-4390

#### *Woodstock Wellness Center*

442 Woodstock Road  
Suite 6A, Gallery Place  
Woodstock, VT 05091  
802-457-3208, Ext 6007

## WE'RE 100 YEARS OLD!!!!



*In 1907 in Windsor, Vermont, the first town funding was secured in the amount of \$100 for a "District Nurse." Thus began what is now the Visiting Nurse Association & Hospice, serving 86 towns in New Hampshire and Vermont.*

*We will be celebrating this important milestone throughout the year. Please check our website [www.vnahospicevtnh.org](http://www.vnahospicevtnh.org) or future issues of this newsletter for anniversary activities.*

*If anyone has information on the history of any of the local VNA's that merged into our association, please send it to Carol Olwert, VNAH, 331 Olcott Drive, White River Junction, VT 05001 or email [colwert@vnavnh.org](mailto:colwert@vnavnh.org). If you are a former employee with an interesting story of your work with the agency, also contact Carol.*



VISITING NURSE ASSOCIATION & HOSPICE OF VERMONT AND NEW HAMPSHIRE

# At Home With Care

Volume 3, Number 2

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## MISSION

*Our hearts, skills, and  
resources are dedicated to  
delivering outstanding home  
and community-based health  
and hospice services that enrich  
the lives of people who live  
throughout our region.*

*We do this in active  
partnership with other  
organizations and  
with the individuals and  
families we serve.*

## THE SPECIAL TREATMENT OF HOME CARE

*Every year the Visiting Nurse Association & Hospice of Vermont and New Hampshire makes close to 130,000 home visits. Care can range from checking vital signs to administering complex treatments that were previously available only in a hospital. With a staff committed to providing the highest quality home care, skill in administering state-of-the-art treatments has become a key element of our service delivery.*

### WOUND CARE

George, a young man of 35, is a paraplegic with other complicating medical conditions. He is bed-ridden. It is challenging for his family to keep up with his physical care. Because of this and because he has no sensation in the lower half of his body, he developed severe pressure ulcers on his back. The VNAH visits him three times a week to treat these wounds and avoid infection. George is able to stay home and out of the hospital.



Wounds can be caused by many factors including pressure on a body part, poor circulation, trauma or surgery. The challenge in healing any wound is to keep infection from setting in while promoting healing. The key to preventing infection is to keep excess moisture out of the wound, allowing it to dry out so new cells will form on the skin.

The VNA & Hospice employs wound care specialists who complete a nine-week training that includes 120 hours in a clinical setting observing and assisting in the care of patients' wounds. When training is complete, the nurses must pass a certification exam. These specialists provide consultation visits with VNAH nurse case managers to identify optimal treatment that promotes healing.

"Many of the wounds we treat are very severe," explains Bridgette Mignogna, patient care manager for home care at the North Region office in West Lebanon, NH. "In the past, these patients would never have been discharged from the hospital, or if they were discharged they were often re-hospitalized. Now with our wound care specialists, we can safely keep them at home."

Health care professionals who refer patients with serious wounds to the VNAH recognize the importance of the wound care program. "The VNAH's wound care specialists are key to the patient's recovery because they provide a consistent plan of care after hospital discharge," observes Ray Obar, nurse practitioner in orthopedics at Dartmouth-Hitchcock Medical Center. "They report changes in the wound so that the patient can be seen or the treatment changed before the condition worsens. This can prevent readmission to the hospital. In this way wound care specialists are an integral part of the care team."

## INFUSION THERAPY

Tommy was three years old when he was diagnosed with leukemia. After a hospital admission to assess the severity of this cancer and to begin treatment, he was allowed to go



home. The VNAH administered chemotherapy so Tommy could be treated in the security of his home, with his family and his favorite toys. He was the perfect patient, trusting in the special care he received from the nurse in our Maternal Child Health Program. His leukemia is now in remission.

Infusion therapy is provided to people who cannot tolerate oral feeding and/or are receiving medications that must be administered directly into the bloodstream.

VNA & Hospice clinicians deliver care with the highest degree of focus on safety and thoroughness. This is especially true of chemotherapy treatment, a type of infusion therapy, administered in the home. While the VNAH has been giving these treatments for ten years, their complexity has increased at the same time that more patients desire to be treated out of the hospital.

Advances in cancer care mean that people are receiving more than one drug and need multiple infusions and stricter monitoring. "We have patients who receive daily infusions," explains Bridgette Mignogna. "This often takes 3 to 4 hours and the nurse must be there for the entire time to monitor tolerance and reaction to the drugs."

Nurses administering cancer therapy go through a training program to become professionally qualified in infusion chemotherapies. The nurse

spends time with the patient and family, providing vital teaching about after-effects of the medication such as fatigue, fever and the possibility of infection.

## CHEST TUBES

One of the most common side effects of severe illnesses like cancer, lung disease or a traumatic injury to the chest is the build-up of fluids in the chest cavity. Keeping a patient stable often required regular hospital visits, some lasting as long as two weeks, to properly drain the fluids that surrounded the lungs. The newest treatment technique administered by VNAH nurses involves the use of a Pleurex™ machine to remove this fluid.

"The hospital will insert a soft, flexible tube in the patient's chest and dress it so it is not noticeable under clothing," explains Sheila Aubin, director of quality and clinical practice. "At the home visit, our nurses will connect the tube to a vacuum style drainage bottle so the fluid will be removed and normal breathing restored."

Patients are able to stay at home where they are most comfortable and caregivers do not have the stress of making trips to the hospital. The impact on quality of life for both is significant. Treatment may be required daily or once or twice a week depending on the severity of the condition.

## PERITONEAL DIALYSIS

For people with kidney disease, those without kidneys or patients with end-stage heart disease, cleansing of blood through a treatment called peritoneal dialysis is necessary to remove excess fluids from the abdomen. This procedure can require a hospital visit up to four times a week, with the dialysis taking four hours at a time. The VNAH is now able to provide this treatment in the home.

Dialysis must be administered with the greatest care. A soft tube, a catheter, is inserted in the abdomen to introduce a cleansing liquid. This fluid is then drained to complete the cleansing.

## QUALITY AND CARE IN THE HOME

"One of our key goals in quality care is to reduce the number of unnecessary hospitalizations and visits to emergency rooms," says Sheila Aubin. "Because we are able to perform these special treatments, patients may be sent home directly from their physician's offices and avoid a hospital stay."

Research has shown that people heal and recover better in their homes. As patients are being discharged from hospitals with more complex needs, VNA & Hospice continues to meet this demand with a skilled staff that is ever-conscious of the patients' safety and comfort. This is truly...

*At Home with the Greatest of Care*

## AT HOME WITH FOOT CARE

***Problems with your feet can be the first sign of arthritis, diabetes, nerve and circulatory disorders. Practice good foot care to prevent many foot ailments.***

### ***Keep blood circulating to your feet as much as possible.***

- *Put your feet up when you are sitting or lying down*
- *Avoid sitting with your legs crossed*
- *Stretch and walk often*
- *Have a gentle foot massage*
- *Soak your feet in a warm bath*
- *Protect your feet from cold temperatures*

### ***Wear shoes that fit properly.***

- *Your foot size changes as you grow older so discard shoes that no longer fit*
- *Always have your feet measured before buying shoes*
- *Avoid pressure from shoes that feel too tight—don't expect them to stretch*
- *Be sure that there is space (up to 1/2") for your longest toe at the end of each shoe when you are standing up*
- *Shoes should not ride up and down on your heel when you walk*
- *Low-heeled shoes are more comfortable, safer, and less damaging than high heeled shoes*

### ***Make prevention practices a part of your routine.***

- *To prevent infections, keep your feet, especially the area between your toes, clean and dry*
- *Change your shoes and socks or stockings often*
- *Cut your toenails straight across and level with the top of your toes*

***Consult with your doctor rather than attempt to treat foot conditions yourself.***

***For more information on foot care, visit the American Podiatric Medical Association website at [www.apma.org](http://www.apma.org), or call 1-800-FOOTCARE. See Calendar for VNAH Foot Clinics.***

## TELEMONITORS MAKE A DIFFERENCE IN CARE

***"I used to run to emergency after emergency. It's like having a family member here with you morning, noon and night. I feel safe."***

VNAH currently has over 70 telemonitors in patients' homes and the impact of this extra care is reflected in this quotation.

A telemonitor is the size of a small clock radio and can be equipped with a digital thermometer, blood pressure meter, glucose meter, digital scale, pulse oximeter and more. The monitor's voice says "Good morning,"

and then leads the patient through a sequence of measurements and questions. This data is transmitted to a computer at a VNAH office. If any of the measurements is outside of normal parameters, a nurse will decide how to treat the problem before it requires a visit to a doctor or hospital.

Patients most likely to benefit from a telemonitor are those with heart disease, pulmonary and circulatory disorders or diabetes. Use of the machine results in fewer adverse reactions to medications, increased

independence and fewer trips to the hospital.

For recent VNAH patients using telemonitors, only 11% were rehospitalized compared to 30% of those without machines. This program enhances quality of care and improves outcomes for our patients.

For VNAH, telemonitoring helps direct nursing visits more appropriately to need, increases efficiency of patient care and results in timelier communications with doctors.



## PRESIDENT'S MESSAGE

At the VNAH, we continue to meet the growing demand and complexity of care at home through our team of competent and caring employees.

The Board of Trustees has identified being the *Employer of Choice* as one of seven strategic initiatives for the agency. We do not have many facilities or a lot of medical equipment to support our services, rather our service is provided by clinicians that visit patient homes and the staff that supports these clinicians. The population most likely to use home care (80 years of age and older) is expected to double in the next decade, while the shortage of caregivers becomes more severe.

Recognizing this, we continually strive to create a work environment that is responsive to the personal and professional needs of our highly valued staff. Our strategies include the following:

*Ensuring that all salaries and benefits are competitive:* We conduct comprehensive annual wage and benefit surveys to keep our employee compensation fair and competitive in the markets we serve. We make adjustments to our pay levels based on this information to be sure we are equitable and consistent with all of our employees.

*Ensuring that staffing is adequate for our caseloads:* The agency has adopted a model to project appropriate levels of staffing for our patient census. This analysis in combination with standards of productivity enables us to determine our staffing requirements and to recruit for these needs.

As we bring new people into the VNA & Hospice, we are finding that the agency has an image in our communities as a good place to work where you are paid fairly, treated fairly, while doing work that is challenging and gratifying. We are proud of this reputation and committed to its preservation.

*Ensuring employee competency:* Providing a positive work environment includes ensuring that employees have the skills needed to perform their jobs at the highest level of competence. The agency invests in its staff by offering thousands of hours of training each year for the clinical and administrative staffs. We have preceptor programs to assist new employees through the transition to home care. Seminars on diabetes, wound care and pain control are part of our ongoing focus on delivering the most effective clinical care.

*Fostering employee retention:* We have developed action plans with our employees to enhance our work environment and promote longevity and satisfaction with their work.

Our mission is to provide outstanding health and hospice services that enrich the lives of the people we serve. To fulfill this mission, every employee must have the skills and the support to be effective and successful and be rewarded for their good work. We recognize that being an employer of choice is essential to our success now and in the future and we will maintain a steadfast focus on this goal.

Susan Larman  
*President and CEO*

## THANK YOU, CAROLE LECHTHALER

After 37 years of service to the VNA & Hospice of Vermont and New Hampshire, Carole Lechthaler, area director of the Central Region office in Springfield, Vermont, has "retired." We qualify that word because we will still have her services as a per diem nurse. She will return to the front lines of home care on a part-time basis after a well deserved vacation. Much can be said about her professionalism, her reputation for outstanding and caring services, her mentoring of clinical and managerial staff. Her contributions are so significant to the development of our agency that "Thank You" does not seem to suffice.

Here, in her own words, is Carole's too-modest summary of her tenure with our agency and her observations of what matters in every "job:"

*I began working with the VNA in June of 1969 in the Springfield agency which had Bellows Falls as part of its territory. Marie Schoff was the director at that time and I would say there were five nurses working then and no home health aides so nurses gave baths as well. Medicare had just started paying for homecare services a few years before.*

*My very first job was at Columbia Presbyterian Hospital in NYC where I worked at the Neurological Institute. I was there for approximately 2 years. When I left to get married and move to Vermont I was the assistant head nurse on a neurology-neurosurgical floor. At the Springfield VNA, my first*

*job was as staff nurse. At the VNA, I have been a staff nurse, a clinical supervisor, a branch director, a regional director and director of clinical services.*

*I have many wonderful memories of working at the VNAH. The best memories are always related to specific patients and the relationships I had with them, particularly those who were on service for awhile. I remember when I was in school, all the instructors warned us to never get involved with the patients, to always remain professional and objective. That didn't always work for me. My best memories are with those patients who needed someone to "get involved" in their lives a little more than what is described in the textbooks in order to advocate for them to have improved outcomes.*

*The toughest challenges for me were with patients who had communication disorders or mental illnesses which made it so difficult to help them achieve their best selves. Sometimes it is so hard to remember that every situation has many sides to it.*

*My advice actually comes from the current CEO of Xerox who was interviewed recently by USA Today. In that interview, and I am paraphrasing, she says that everything you do, everything you can accomplish,*



*happens because of the relationships you develop with your customers, your co-workers, your peers in the business. That's true in life too, isn't it?*

*For information on VNA & Hospice services and on how you can help, visit our website at:  
[www.vnahospicevtnh.org](http://www.vnahospicevtnh.org)*

*For service admissions and referrals call 800-575-5162*

*For information on contributions, call 802-296-2838, Ext 1028*

*Contributions can be mailed to:*

*VNA & Hospice, PO Box 976, White River Junction, VT 05001*

## WANT TO LEARN MORE ABOUT OUR HOSPICE PROGRAM?

THE AGENCY HAS DEVELOPED A COMPREHENSIVE EDUCATION PROGRAM ON OUR HOSPICE SERVICES. IF YOU ARE A MEMBER OF A COMMUNITY ORGANIZATION OR A CHURCH WHOSE MEMBERS WOULD BENEFIT FROM LEARNING MORE ABOUT THIS VITAL SERVICE FOR END-OF-LIFE CARE, CALL US AT 802-296-2838, EXT 1028 TO SCHEDULE A PRESENTATION. THE PROGRAM CAN BE ADJUSTED TO FIT YOUR TIME LIMITATIONS AND PRESENTED AT NO CHARGE TO YOUR ORGANIZATION.

## REGIONAL NEWS

**The Visiting Nurse Association & Hospice of VT and NH coordinates its patient and community services from three regional offices: North, located in West Lebanon, NH, which serves towns in New Hampshire and Vermont; Central, in Springfield, VT, and South in Brattleboro, VT.**

**For patients and staff, regions preserve the long-standing tradition of community-based health and hospice services. For volunteers, regions enable involvement in their communities.**

### HOSPICE VOLUNTEERS NEEDED

Would you like to help patients and families in the Hospice program? Are your skills and interests in administrative support? We have many opportunities for volunteers. The gift of your time can make such a difference for people who are in the final stages of their lives.

There are many ways that Hospice volunteers can give emotional support and practical help by providing companionship, reading to a patient, preparing a meal, running errands or assisting with Hospice administrative duties.

For more information about volunteering in the North Region towns, contact Beth Wood at 603- 298-6417, ext 2063.

People interested in volunteering in the Central or South Region should contact Carla Kangas at 802-886-2500, ext 3113.

### FREE HOME SAFETY VISITS - SAFE STEPS FALL PREVENTION PROGRAM

Fall-related injuries can lead to hospitalization, long recoveries and loss of independence. During a home safety visit, trained VNAH staff will identify hazards, help make on-the-spot improvements, explain how falls occur and how they can

## SUE LARMAN'S MESSAGE OF FAREWELL

*It is with a heavy heart that I share with you that I will be leaving the VNA & Hospice on February 9. I have accepted the position of vice president of home and community services at the Elliot Health System in Manchester, New Hampshire.*

*The past five years have been a wonderful experience for me. I have had the unique privilege of leading an organization committed to serving our communities in the best way possible, amid adversities and challenges, and with compassion and commitment. The strong will to excel and overcome any obstacles in our way has been at the core of this organization and the reason for continued success. I admire the skill and heart of the people here as well as the dedication and capacity of the board of trustees. The loyalty of our communities is a result of the good work our staff does every day and a testament to the difference we make in individuals' lives.*

*I take with me extraordinary learning experiences and memorable moments which I will carry with me indefinitely, along with admiration for the caring support of the VNAH's friends and communities and the pride in the work of the VNAH.*

*As I leave, I will leave behind a small piece of my heart.*

be avoided. The assessment is free. Donations are requested to cover the cost of materials and modifications. Free materials can be provided to those in need.

Eligibility includes people age 65 and over and those at risk of falling in the North Region towns of Barnard, Bridgewater, Hartland, Killington, Plymouth, Pomfret, Quechee, Reading, and Woodstock and the Central Region towns of Athens, Bellows Falls, Chester, Grafton, Londonderry, Rockingham, Springfield, Saxtons River, Westminster, and Windham.

To schedule a home safety visit or a presentation on fall prevention for a community group, please call Eileen Katchen, Safe Steps Coordinator, at 800-858-1696.

### NORTH REGION WEST LEBANON, NEW HAMPSHIRE

Providing homecare, hospice and family support services to towns in Grafton County, New Hampshire, and

to Randolph, Bradford, Hartford, Woodstock and surrounding towns in Vermont.

### Cathy Bernard, RN – New Area Director

Cathy has a long and successful career with the VNAH. She began as a weekend staff nurse case manager in the Springfield office and, over a period of 10 years, has undertaken increasingly complex roles at the agency. Prior to her promotion, Cathy held the position of director of education and clinical documentation. She has a bachelor of science in nursing and recently graduated from the University of Vermont with a master's degree in community health nursing.

### CENTRAL REGION SPRINGFIELD, VERMONT

Providing home care, hospice and family support services to Springfield, Vermont, and surrounding towns including Weathersfield, Bellows Falls, Townshend, Londonderry, and the Stratton Mountain area.

## **Paula Eldridge, RN – New Area Director**

With the retirement of Carole Lechthaler (see article), Paula Eldridge who has been serving as a patient care manager (PCM) in the Springfield office has been promoted to area director.

Paula has over 15 years experience with the VNA & Hospice, having worked as a staff nurse, clinical team leader as well as PCM. She holds ANCC certification in Gerontology and BAMC certification in Homecare Coding Specialist-Diagnosis. She is responsible for initiating an innovative training program, Challenges of Homecare, for RNs who are new to homecare. The program focuses on the healthcare practices and issues that are unique to home health practice.

## **SOUTH REGION BRATTLEBORO, VERMONT**

Providing home care and hospice service to Brattleboro and surrounding towns in the southeastern corner of Vermont including Stamford, Searsburg, Readsboro, Dover, Wilmington, Whitingham, Marlboro, Halifax, Putney, Dummerston, Brattleboro, Guilford, and Vernon; as well as Chesterfield and Hinsdale in New Hampshire.

## **NEW DIRECTOR OF DEVELOPMENT**



Gaye LaCasce has joined the agency in the position of director of development and community relations. Gaye

is responsible for managing our fundraising, communications and community outreach activities. Before joining the agency, she was director of alumni relations at Colby-Sawyer College. Her prior experience also includes serving as the associate director of development at St. Paul's School in Concord, NH, and director of

alumni and development at Fryeburg Academy in Fryeburg, ME, and the Winchendon School in Winchendon, MA.

Gaye is president of the Lebanon Opera House Board of Directors. She holds an AB in English from Bowdoin College and graduate certification in mediation from the University of Southern Maine. Gaye lives in Grantham, NH, with her family, and spends much of her spare time directing and performing with a *cappella* ensembles.

One of Gaye's key responsibilities here is to oversee the Circle of Caring leadership giving program which was initiated in 2005. This program focuses on increasing the number of donor contributions of \$500 or more to cover the gap between program costs and insurance reimbursements. With an annual agency budget around \$20 million, contributions are critical to our ability to provide high-quality, cost-effective services.

# **C A L E N D A R**

## **NORTH REGION**

### **MONTHLY HEALTH CLINICS**

Hanover, Black Senior Center  
4th Monday, 1 – 2 pm  
Lebanon, Upper Valley Senior Center  
3rd Thursday, 10 – Noon  
Norwich, Senior Center  
3rd Wednesday, 11 – Noon  
White River Junction,  
Bugbee Senior Center  
2nd & 4th Wednesday, Noon  
Woodstock, VT,  
Woodstock Wellness Center  
Monday & Friday, 12:30-3:30  
and Wednesday, 9 to Noon

### **MONTHLY FOOT CLINICS**

Canaan, NH, Mascoma Senior Center  
1st Tuesday, 9am – Noon  
Hanover, NH, Black Senior Center  
3rd Monday, 1 – 3 pm  
Lebanon, NH  
Upper Valley Senior Center  
3rd Tuesday, 9am – Noon  
White River Junction, VT  
Bugbee Senior Center  
1st Tuesday, 9am - Noon

## **CENTRAL REGION**

### **MONTHLY BLOOD PRESSURE CLINICS**

Springfield, Whitcomb Bldg, Mineral St  
3rd Wednesday, 1 -1:30pm  
Springfield, Huber Bldg, 80 Main Street  
2nd Wednesday, 1- 1:30pm  
Springfield, Maples  
4th Wednesday, 1-1:30pm  
Chester, Baptist Church  
3rd Monday, 11:30-12 noon  
Bellows Falls, Senior Center  
2nd Wednesday, 10:30 – 11am  
Saxtons River, Main Street Arts  
3rd Friday, 12:30 – 1pm  
Westminster Congregational Church  
2nd Thursday, 11:45 -12:15pm  
Ludlow, Senior Center  
2nd Thursday, 11:30-12:30pm  
Londonderry, Congregational Church  
2nd Thursday, 11:30-12noon

### **MONTHLY FOOT CARE CLINICS**

Bellows Falls, Senior Center  
4th Tuesday, 10:30 – 12:30 pm  
Ludlow, Senior Center  
4th Thursday, 11 am

## **SOUTH REGION**

### **MONTHLY BLOOD PRESSURE CLINICS**

Brattleboro, Elliot Street Hi Rise  
2nd Wednesday, 1 – 1:30pm  
Brattleboro, Melrose Terrace  
4th Wednesday, 11:15 – 12 noon  
Dummerston, Grange  
2nd Wednesday, 11:30-12 noon  
Guilford, Community Church  
1st Friday, 11:30 – 12 noon  
Jacksonville, Municipal Center  
4th Thursday, 11:30 – 12 noon  
Newfane, Congregational Church  
2nd Thursday, 11:30 -12 noon  
Putney, Putney Meadows  
2nd Monday, 11: 30 – 12 noon  
Readsboro, Baptist Church  
2nd Tuesday, 11:30 – 12 noon  
Townshend, Congregational Church  
3rd Thursday, 11:30 – 12 noon  
Vernon, Town Offices  
4th Monday, 12: 30 – 1 pm

### **FATHERHOOD DISCUSSION GROUP**

For information call 603-298-6417, ext 2053.

### **GRIEF SUPPORT GROUPS**

Call Amanda, 603-298-8399, ext 2035.