

# MaineLink

Spring 2025

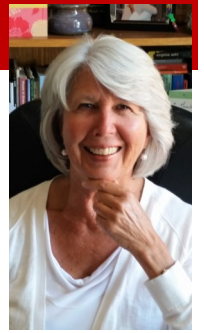


**Mission:** *To promote universal access to quality end-of-life care through innovation, creativity, education, advocacy and collaboration.*

## Dear Friends,

It's been far too long since our last newsletter, that's for sure! So excited to report that our 2025 spring edition is finally here! The newsletter is one more way to inform you about the wonderful work being done by determined, dedicated people, not only in Maine, but nationally and internationally, as well.

Many of us feel strongly that access to quality healthcare is important for all people, no matter who they are or where they live. However, what you may not realize is how important you could be as we pursue that goal. My years in health care have clearly brought into focus the need for more community collaboration. Independent advocacy, as well as ambitious program development with local, national and international partners have helped to shine a light on these issues. The solutions lie not with just a few, but with all of us! You are an important part of the solution!



In 2002, there was an article written by Drs. Ira Byock, David Cassarett and Jason Karlawish entitled, Advocacy and Activism: Missing Pieces in End-of-Life Care. It's as relevant today as it was when their article was published. However, today, we would broaden it to include serious illness care. We know the word advocacy and activism often engender many different emotions, some positive and some negative. However, in the context of this message, it simply means standing up and respectfully speaking out for changes that promote health justice for all.

A frequently repeated adage, "Be the change you wish to see in the world" has been the philosophy of the Maine Hospice Council's board members and staff for many years. Today, that reminder seems more important than ever! We welcome submissions for our next newsletter. If you'd like your upcoming events or project work highlighted in one of our publications, please let us know by contacting, [krandall@mainehospicecouncil.org](mailto:krandall@mainehospicecouncil.org), or [kpowell@mainehospicecouncil.org](mailto:kpowell@mainehospicecouncil.org) Happy reading!

With respect, thanks and warmest wishes,

*Kandyce Powell*

## New Location!



We are now located at the Governor Hill Mansion at 136 State St., suite 220, Augusta, ME 04330. Come visit us!

Monday-Friday 8am-4pm  
or  
by appointment.

Contact information:

Phone: (207) 636-0651

Executive Director: Kandyce Powell

Email: [kpowell@mainehospicecouncil.org](mailto:kpowell@mainehospicecouncil.org)

Executive Assistant: Kathryn Randall

Email: [krandall@mainehospicecouncil.org](mailto:krandall@mainehospicecouncil.org)

Open: Monday - Friday 8:00AM - 4:00PM

Closed: Saturday, Sunday, State & US Holidays

## Our Dedicated Board Members

### *President, Alicia Murray*

I have been with MHC for three years. I have been a certified hospice and palliative care nurse for the past 25 years with over 35 years of nursing experience. I served 6 years in the Army reserves with the 1125th US Army Hospital. My main practice was the home setting with Community health and Counseling Services. I have been active at the state and national level supporting hospice practices and staff. I am currently an associate professor in the nursing program at Husson University. I have had the privilege of introducing students to hospice and palliative nursing. Being part of the council helps to support and enhance palliative and end-of-life care for all of Maine.

### *Vice President, Margaret Craven*

I can't remember exactly how long I have served on the board, but I would say 6 years. I served as a hospice volunteer at what was then AHCAH, and is now called Andwell. I have served in the Maine State Legislature for 18 years, 12 of those in the House and 6 in the Senate. What led to my interest in hospice and palliative care was caring for people at their most vulnerable, and that is important to me. Being a member is important to me because I felt that while I was serving in the Legislature I could be of assistance to the Council, now I just like being here.

### *Secretary, Chris Corriveau*

I have been on the Board since 2022, as Secretary. I am an RN who has been certified in Hospice and Palliative care for the last 24 years. I was the Director of Hospice at CHANS Hospice in Brunswick from 2000 till my retirement in 2017. In 1980, I met Kandyce and learned all about hospice over the next 10 years and wanted to be certified in hospice care. I was certified in 2000. I went to many of the annual national educational programs. I helped bring hospice care to Brunswick. Being a member is important to me because the need out there in Maine is so great, I want to be part of the comfort care solution for people and their families.

### *Treasurer, Helen Burlock*

I have been privileged to be on the Board of the Maine Hospice Council (MHC) for 15 years. I believe the work of the MHC, and Executive Director, Kandyce Powell, are a Maine Treasure. I have a Diploma in Nursing from New England Deaconess Hospital and Simmons College (Taught all science courses), Bachelor Degree of Science and a master's degree in management from Husson University. I have always had an interest in end-of-life care. At the Deaconess most patients came from other states and occasionally other countries for care of cancer and diabetes. Many patients did not have family near the hospital. Staff recognized that as a problem and based plans around the lack of family support. Many patients were receiving research protocols. Many did not survive to go home. Keeping them comfortable in mind and body was a goal similar to hospice and palliative care. In 1967 I moved to Bangor after working at a small hospital in an educational community.

Patients received great care and were quickly discharged home. They did not receive hospice or palliative or similar care. In Bangor patients received the same great care but there were many more diagnosed with cancer. In 1983 Congress passed the Medicare reimbursement for hospice patients in the home. In 1984 I moved to a home-health and hospice organization where I worked part time. They were developing the hospice program. It was a great improvement in care for a dying patient. Many patient costs were covered and different combinations of staff provided care. But this did not meet all of the needs that were part of the dying process. The MHC was incorporated in 1984. It provides solutions to many needs: "The council provides education and technical assistance regarding end-of-life care, as well as advocacy for terminally ill and bereaved people." It has been the leading advocate, trainer and educator for hospice care in Maine." Being a member helps me put my devotion to end of life care in motion.

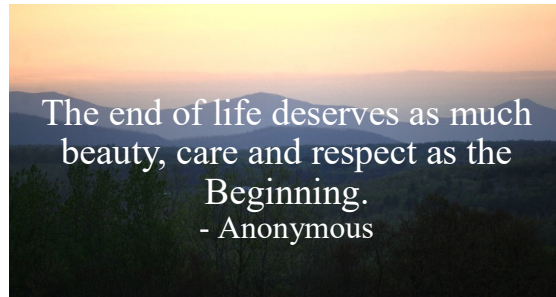


**Board Member, Kathy Vanaria**

I have been a member of the board since February of 2024. My background is that I am an Army veteran. What led to my interest in hospice and palliative care was the cumulative effect of having had several people in my life die. I have been a long time attendee of the events hosted by the MHC and as such have grown to have a world of respect for the work they do. It is an honor to be a member of the Board and in a position to help make a difference not just on a local level but on a state level.

**Our Newest Board Member, Lissa Rockwood**

I am the newest member, elected September 2024. I have been an RN for 37 years, prior to that I obtained my bachelor's degree in teaching. What led to my interest in hospice and palliative care was seeing so much suffering on all of my nursing paths, especially during the HIV epidemic. Also the struggles in the long-term care setting, recently caring for Covid patients, and in multiple personal relationships. I am invested in programs in order to reduce cost and suffering. Being a board member is important to me because we need to grow and enhance the work in hospice and palliative care for the people of Maine.



**Maine Hospice Council 2024 Fundraising Auction**

The Maine Hospice Council held its holiday auction on December 5th, 2025 at the Senator Inn in Augusta. Despite the inclement weather, the auction was a success. MHC would like to thank all of the people and businesses who donated auction items. The event would not have happened without your generosity and support. A big thank you to all of the attendees who braved the elements and participated in the auction. Your support is greatly appreciated. Last but not least, a big thank you to Maine humorist, Gary Crocker for emceeding the event.





## Contribution from Husson Nursing Students

Our names are Samantha Gauthier and Kristen Sockbesone and we are nursing students at Husson University. We were graciously allowed, as students, to assist in writing this edition of the Newsletter! We would like to thank all who have contributed and participated in gathering information. This has been a wonderful learning opportunity for us to be involved in our community. Dr. Alicia Murray, our professor, has been incredibly helpful and supportive throughout this process.

Two other students from Husson University, Thomas Johns and Hannah Richards, have been working on a project of their own. They are working on creating messaging and educational tools to distribute regarding the DHHS Maine Care coverage of palliative care project. Social media posts, handouts and in-person educational sessions are all forms of communication that are aiding them in dispersing information to the public. Their goal is to help spread awareness about palliative care for all living in Maine

**HUSSON**  
UNIVERSITY

SCHOOL OF  
NURSING

### **Hospice Care and Me: How Caring Can Create Space for a Good Death** **By Kristen Sockbeson**

By: Kristen Sockbeson

My name is Kristen Sockbeson. I am a senior nursing student at Husson University, honored to be working on the 2025 Maine Hospice Council winter newsletter. I wanted to contribute a personal story. I interviewed my mother who recently cared for my grandmother who was living with dementia. My mother was helping my grandmother transition from living independently to living in an assisted living facility with hospice care.

My grandmother's condition progressed quickly. The family decided that my mother would become the Power of Attorney which required her to go through the court system. My mother also had to complete a Maine Care application for her mother in order for her to be placed at the assisted living facility. My mother described this experience as "hard, lonely, uncertain, and confusing. She said, "The realization that my mother was declining and we could not care for her at home was one of guilt, and grief."

My mother went on to say, "As her (mother's) condition continued to decline, she was placed on hospice care. The hospice nurses did a great job explaining things like using morphine to manage pain. They also explained other aspects of end-of-life care. They knew just what to say. They gave me time with her. She was so peaceful at the end. The way the hospice nurses explained things, I was able to give what was needed and how to say it in a few words. If there was one piece of advice to share it would be to let the hospice staff guide you. If this is your first time doing end-of-life care, hospice provides the support needed along this journey. They are also a great resource for grief counseling. They call and check in often with phone calls and visits. Be open to being guided by their expertise. Know that you're not alone. Hospice, especially the nurses were super kind and loving."



## Volunteer Hospice Program Highlights

### Hospice Volunteers of Waldo County

Our community is everything to us. It is who we are, who we serve and who support us. It shapes everything we do, from what we provide, how we fundraise and how we launch new programs.

In these changing times our volunteer programs are more important than ever. Neighbors giving care and kindness to neighbors is what we do best. Volunteers from our pool of 60 trained volunteers support the Medicare hospice program of MaineHealth and any patient or patient families in Waldo County who face a life-limiting illness.

Most of our patients are hospice patients. But because of strong ties with our local health care providers and our web of community connections, we also serve a steady flow of community palliative referrals.

We love that we can serve these patients. We know that our neighborly support can transform this potentially vulnerable and lonely time of life into an experience of feeling supported and cared for.

Grief support is also a huge part of our program. Children are sometimes called the forgotten grievers, and we are delighted to have support groups in our local middle, high and tech schools. In February, partnering with our local YMCA, we are offering a community-based walking group inviting participants to move with us, hold their loss and connect with others.

The challenge of fundraising has helped keep us focused on our community. With an explosion in the number of nonprofits in Waldo County competing for donations, the challenge is set to continue. The upside is that it requires us to engage more with our community to find new audiences. So, we're using novel ways of reaching out.

One way is our improv theater group, the "Palliative Players." Invited to play at venues from our local Senior College to more intimate group gatherings, the players show what can go right and wrong at the end of life, and how a detailed advanced directive can help. Having been given a powerful understanding that completing an advanced directive is a gift to your loved ones, we then invite participants to start writing their wishes at the workshop. Many later donate to the program or support us in other ways.

Community connections are key for us in launching new programs. A growing need stems from being a rural county in the oldest state in the nation; we find increasing numbers of our neighbors without family to support them, or a safe home to live in at the end of life. While the Medicare hospice benefit offers nursing and medical model care, it does not cover family support and housing for the dying. As nursing home beds available in our state dwindle, many are left with no other option than to remain in the hospital "awaiting placement". No one should die alone.

In 2025, with the Omega Home Network as a model, we are exploring how a volunteer led, donation-funded program can support people in that situation. It will be a program created by the local community, for the local community.

Now, more than ever, our care is needed in our communities to ensure everyone can die with the respect, dignity and support that we all deserve. Our volunteers know how great it feels to make a difference. And our community increasingly knows who we are, what we provide, and how to get involved in everything from volunteering to attending events to designing new projects. *Flic Shooter, Executive Director*



Hospice Volunteers  
of Waldo County

For More Information:

<https://hospicevolunteersofwaldocounty.org>  
(207) 505-4434

### **Bristol Hospice– New to Bangor**

Bristol Hospice, Bangor (est. 2024) is a resolute provider of compassionate, patient-centered care for individuals facing life-limiting illnesses. Our mission is to deliver the highest level of compassion, respect, and quality of care to all patients and families entrusted to us. With a focus on enhancing quality of life, our team is committed to delivering physical, emotional, and spiritual support to patients and their families during their most challenging times. We understand the importance of dignity, comfort, and compassion, and we pride ourselves on offering personalized care plans designed to meet each patient’s unique needs. At Bristol Hospice, we are deeply committed to community stewardship. We actively engage in local initiatives, support charitable events, and collaborate with community organizations to enhance the well-being of those we serve. Our dedication to community involvement reflects our core values of compassion, respect, and quality care. At Bristol Hospice, we recognize that every patient’s journey is different, and our multidisciplinary team works together to ensure that both the patient and their loved ones receive the highest level of care and attention.

As the Executive Director of Bristol Hospice, I, Erica Lilly, am deeply involved in every aspect of our agency’s operations. I believe in the power of early hospice admissions and am passionate about helping families understand the many benefits that early engagement with hospice care can provide. Working closely with Melissa and our talented team, I am committed to ensuring that we continue to provide the highest standards of care, build strong relationships with patients and their families, and create an environment of trust and respect. Together, we strive to make every patient’s experience as comfortable, meaningful, and fulfilling as possible. Melissa Boudreau, our Director of Patient Care Services, plays a crucial role in overseeing patient care operations and ensuring that each patient receives the best possible care. With a deep commitment to the mission of hospice, Melissa leads her team by example, providing mentorship, guidance, and oversight to ensure our patients and their families experience exceptional service at every stage. Her expertise and leadership are vital in creating a supportive environment where patients can feel secure, knowing they are in the best hands.

At Bristol Hospice, we understand that each patient and family are unique, and we are committed to providing care that reflects this. Our wonderful team members – from our nurses to our CNAs, chaplains, and social workers – work together to deliver personalized, holistic care designed to meet the emotional, physical, and spiritual needs of the individuals we serve. Choosing hospice care early ensures that patients and families can make the most of their time together, focusing on meaningful experiences and moments of peace. At Bristol Hospice, we are proud to be a part of our patients' journeys, providing them with comfort, support, and dignity as they navigate life’s most important transitions.

One of the key benefits of early hospice admission is that it allows patients to receive care while they are still able to engage fully in the decisions surrounding their care and their quality of life. Many families delay hospice care due to misconceptions about what hospice is or fear of “giving up.” However, enrolling in hospice care earlier allows patients to experience comfort measures sooner, preventing unnecessary hospitalization and focusing on making the most of their time with loved ones. When patients enter hospice care sooner, they can take advantage of a holistic, interdisciplinary approach that includes a full range of services. Our dedicated CNAs and nurses provide 24/7 medical care, addressing pain management and symptom control to ensure comfort. Our chaplains provide spiritual support, helping patients and families navigate the emotional and spiritual challenges of this difficult time. Our social workers offer counseling and practical guidance, assisting with the many logistics involved in end-of-life care and helping families find resources and support networks. This comprehensive approach creates a compassionate environment where patients can live each day to the fullest.

Reaching out to Bristol Hospice - Bangor can provide valuable support and guidance during challenging times, ensuring that your loved one receives compassionate care tailored to their needs. For more information or to request services, you can visit our website - (<https://bristolhospice.com/location/bristol-hospice-bangor/>).



## The Importance of Volunteers

If you have ever been touched by Hospice, you understand the value of its services. One of the services offered to each one of Community Health and Counseling Services hospice patients is a “Hospice Volunteer”. Since our Hospice program started in 1996, we have contracted with other hospice volunteer programs to provide this important service. In the fall of 2023, we were notified by our current partner that under our existing contract with them, they no longer had the resources to provide volunteers for our Northern and Southern Penobscot regions. At that time, we determined the need to develop our own internal CHCS Hospice Volunteer Program. Not only is this service valued by the patients and families in which we serve, but it is also a Condition of Participation under the Medicare Hospice Benefit.

The Hospice Volunteer plays a key role in providing the needed hope, emotional support, and comfort to hospice patients and families. As a hospice volunteer, you may be one of the best parts of a patient’s day. By providing patients with compassion, companionship, and a caring heart you will be making a difference. Providing a person with dignity, peace, and respect in which they deserve is life-fulfilling and meaningful volunteer work. You will not only be having a significant impact on the lives of individuals who are facing a terminal illness but also on the lives of their families and caregivers.

**“The most important thing we can do for those who are dying is to let them know they are not alone. This is the essence of volunteering in hospice.”** *Helena Mailloux, Director of Quality, Home Health and Hospice*

If you or someone you know would like more information about volunteering for hospice programs in your area, please contact us at the Maine Hospice Council for programs near you. *-Alicia Murray*

## What is going on at the independent volunteer hospices:

Coastal Family Hospice Volunteers believe in the healing power of community support and that no one should carry the burden of caregiving or grief alone. Please contact 207-466-9444 or email [coastalfamilyhospicevolunteers@gmail.com](mailto:coastalfamilyhospicevolunteers@gmail.com) for more information.

- Coastal Family Hospice Volunteers is offering volunteer-led support groups to assist individuals caring for a loved one with a life limiting illness or coping with the loss of a loved one.
- A Drop-in Bereavement Support Group welcomes anyone navigating the difficult journey of grief. Meetings take place on the first Monday of every month from 4:00 PM to 5:00 PM at Quarry Hill in Camden.
- A Parent Bereavement Support Group for those seeking support after the loss of a child is hosted at Nativity Lutheran Church in Rockport. Interested individuals can call 207-466-9444 to inquire about meeting dates and to register.
- A Caregiver Support Group is available for those who have taken on the challenging role of caring for loved ones. This group meets the last Monday of every month from 4:00 PM to 5:00 PM at Breakwater Marketplace, 91 Camden Street, Suite 408, in Rockland.





## The Ins and Outs of Palliative Care



Palliative care is focused on improving quality of life for people with serious illnesses and their care partners. It is available to people of any age who need it, not just older adults. The major elements of palliative care include managing a person's symptoms effectively and ensuring that their care is coordinated.

This type of care is *interdisciplinary*, which means that it involves multiple types of doctors and other care providers (specialist nurses and doctors, social workers, religious or spiritual leaders, therapists, or nutritionists, among other professionals). These providers work together with patients, their families and care partners to ensure that the treatment plan reflects the patient's goals and values.

Palliative care can start as early as a person's diagnosis or later in their illness, and it can occur alongside other types of treatment for the disease.

This specialized care can be provided alongside your current treatment and care. It is meant to enhance your current care by focusing on quality of life for you and your family.

Studies have shown that palliative care can have many benefits for both patients and their families. These studies show that those enrolled in palliative care have fewer symptoms, greater emotional support, and increased patient and family satisfaction.

(<https://www.nia.nih.gov/health/hospice-and-palliative-care/what-are-palliative-care-and-hospice-care>)

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**Interested in palliative care for yourself or a loved one? Don't hesitate to bring up the topic with your provider.**

**For more information about palliative care, feel free to contact**

**Maine Hospice Council**

**(207) 626-0651**

**[kpowell@mainehospicecouncil.org](mailto:kpowell@mainehospicecouncil.org)**

**[krandall@mainehospicecouncil.org](mailto:krandall@mainehospicecouncil.org)**

**[www.mainehospicecouncil.org](http://www.mainehospicecouncil.org)**

### Frequently Asked Questions: Palliative Care

#### How do I know if I need palliative care?

People living with a serious illness such as cancer, heart disease, lung disease, or kidney failure, may experience emotional or physical pain related to their illness. If you're having trouble coping with this pain, palliative care may be right for you. You don't need to wait until your disease is in the advanced stages or you're in the final months of life to start palliative care.

#### Does using palliative care mean I am dying?

Not necessarily. Palliative care is meant to relieve symptoms such as pain, breathing difficulties, or nausea, among others, and relieve stress for patients and their families. Palliative care can be used at any time after diagnosis of a serious illness.

#### What can I expect from palliative care?

In short, you can expect that your quality of life will be improved. You will have relief from symptoms such as loss of appetite and difficulty sleeping. You can also expect close communication and more control over your care.

Palliative care will help you carry on with daily life. It will improve your ability to go through medical treatments. And it will help you to match your goals to your treatment choices.



National Institute of Health





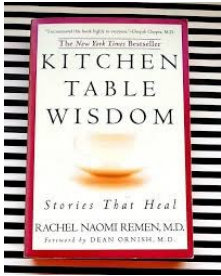
## Hospice News Network Articles: (Volume 29, Number 1 January 21, 2025 )

- ◆ **Holly Vossel writes “Oncologists: Palliative Care Plays ‘Critical Role’ in Improving Quality, Health Equity,”** The article explores the momentum of palliative care and keys to improving access. The article is online at: <http://hospicenews.com/2025/01/03/oncologists-palliative-care-plays-critical-role-in-improving-quality-health-equity>
- ◆ **“AHA Scientific Statement Addresses Palliative Care in Stroke: appears in *Cardiology Advisor*.** AHA issued a new statement on palliative care and stroke in 2024-its first since 2014. The article is available at <https://www.thecardiologyadvisor.com/news/aha-scientific-statement-addresses-palliative-care-in-stroke/>
- ◆ **A report in *Alzheimer’s & Dementia, The Journal of the Alzheimer’s Association*, shares a data analysis study by researchers. The researchers conclude that caregivers of dementia patients who are just entering hospice face a challenging transition and often find themselves “in a mentally vulnerable position.”** Researchers call for better understanding of caregivers’ needs during hospice transition and identification of “best timing for the delivery of supportive tools.” (*Alzheimer’s & Dementia, The Journal of the Alzheimer’s Association*, 1/9, <https://alz-journals.onlinelibrary.wiley.com/doi/10.1002/alz.085102>)
- ◆ **Findings of researchers, reported in *American Journal of Hospice and Palliative Medicine*, reveal sociodemographic disparities in the use of hospice care by U.S. nursing home residents.** Only one-third of eligible residents enroll in hospice care, and there are substantial variations among residents who do and do not use hospice. The reasons for this, say the researchers, are complex and further study is needed to improve access to hospice care for this population. (*American Journal of Hospice and Palliative Medicine*, 1/9, <https://journals.sagepub.com/doi/abs/10.1177/10499091251313761>)
- ◆ ***Hospice News Palliative Care News* shares some of the devastating outcomes of proposed Medicaid cuts.** The needs of older adults, and the rapidly growing number of these folks, are both causes of concern. (*Hospice News Palliative Care News*, 2/21, <https://hospicenews.com/2025/02/21/proposed-medicaid-cuts-would-deal-devastating-blow-to-palliative-care-patients-families/>)
- ◆ ***McKnight’s Long-Term Care News* reports a study that reveals that both patients and caregivers lack needed understanding of palliative care.** Researchers found significant knowledge gaps surrounding palliative care. As a result of this, says the article, sick patients have poorer health outcomes. Of those surveyed, the majority felt it is the responsibility of physicians and nurses to tell seriously ill patients about palliative care. (*McKnight’s Long-Term Care News*, 2/25, <https://www.mcknights.com/news/home-health-patients-caregivers-lack-understanding-of-palliative-care-researchers-find/>)
- ◆ **“How music is rewriting end-of-life care” appears in *The Daily Iowan*.** The article explores the use of music with those nearing life’s end, and the emergence of music therapy in the 20th century. (*Daily Ioan*, 2/18, <https://dailyiowan.com/2025/02/18/how-music-is-rewriting-end-of-life-care/>)



## Kitchen Table Wisdom: Stories that Heal

By Rachel Naomi Remen, M.D.



I went through a period in my life where I sought wisdom to help me find strength through my healing journey. I stumbled across Rachel's book at a thrift store. I am so glad that I did.

In the foreword to this book, Dean Ornish captures Remen's main theme, that "life is not broken and does not need to be fixed; it needs to be savored and celebrated."

"It is actually difficult to edit life." With this comment, Rachel Naomi Remen makes it clear that in *Kitchen Table Wisdom: Stories That Heal* she is not attempting to compile an edited collection that logically reflects life. Her purpose is to make readers live the stories she tells, whether they cry, laugh, or simply nod their heads at the real-life suffering and triumph they have felt in their own experience.

The book is organized into the sections of "Life Force," "Judgement," "Traps," "Freedom," "Opening the Heart," "Embracing Life," "Live and Help Live," "Knowing God," and finally "Mystery and Awe." Each of these spiritually focused themes is explored through the powerful short stories. The presentation encourages the reader to approach and reflect on the book one story at a time, making it ideal for the busy professional. Each story in its own way helps call to mind the meaning behind the events that incrementally shape our lives. Each one connects us with one another, and each connection links us back to the human community.

This book can be appreciated by a wide audience, but it should be "must reading" for healthcare providers and others whose work involves them in the most significant events people face in life. Remen's stories will reconnect them to the human beings they serve. The book also will humble and inspire them in today's world, where both humility and inspiration are in short supply. *Kathryn Randall, MHC Executive Assistant*



### Up Coming Events

## Maine Hospice Council Hospice and Palliative Care Educational Opportunities for You

### Save the Dates

#### Quarterly Education Meetings:

- May 16th
- August 8th
- November 14th

These meetings generally take place the first Friday of each quarter.

Time and venue announced on event invitations.

#### Palliative Care & Quality of Life

#### Interdisciplinary Advisory Council Meetings:

- June 13th
- September 12th
- December 12th

These meetings generally take place the second Friday of each quarter. Time and venue to be announced prior to meeting.

**2025 Fundraising Auction: Date and Venue to be Determined**

*For more in-depth information about each event, visit:  
<https://mainehospicecouncil.org/events>*



# Community-based Palliative Care for ME: Statewide Educational Conference

When? March 27th 5pm-8pm and 28th 8am-4:30pm 2025  
Where? Located at Thomas College, Waterville, Maine.

**The Palliative Care & Quality of Life Interdisciplinary  
Advisory Council  
and the Maine Hospice Council  
are proud to host this event.**

## Mark your calendars for this two-day event!

The agenda is filled with amazing, dynamic National speakers, family care-givers, and talented leaders from the great state of Maine will be sharing their stories and facilitating breakout sessions!

This statewide educational conference was put together especially for you. The two-day event will be filled with interdisciplinary experts presenting both keynote and breakout sessions tailored specifically for the sharing of current palliative care information to help you do the important work you do every day.

## Keynote Speakers

### “Using Evidence-based



**Principles to Strengthen Public/Provider Engagement with Palliative Care”**

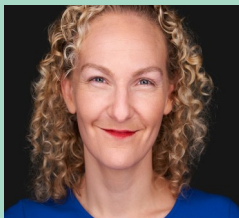
**Marian Grant, DNP, ACNP-BC, ACHPN, FPCN, FAAN, RN**

### “National Consensus Guidelines: Framing Quality Palliative Care”



**Constance Dahlin, MSN, ANP - BC, ACHPN, FPCN, FAAN**

### “Developing a Statewide Medicaid Palliative Care Benefit for



**Maine: Focusing on Value-based Analytics”,  
Torrie Fields, Founder and Chief Executive Officer at TFA Analytics**

### Alzheimer and Dementia:



**Awareness and Resources”  
Amy Angelo, Senior Program Manager for the Alzheimer’s Association, Maine Chapter**

**Important Note: Group discount rate available for 5 or more participants from one organization or institution.**

**For more information, please contact Kathryn Randall at (207) -626-0651 or [krandall@mainehospicecouncil.org](mailto:krandall@mainehospicecouncil.org)**

**To register go to [www.mainehospicecouncil.org/events](http://www.mainehospicecouncil.org/events)**

## How Can You Help?

Community support is vital to the Maine Hospice Council's sustainability. To support our work, please **make a donation on our website** ([www.mainehospicecouncil.org](http://www.mainehospicecouncil.org)). Or mail your donation to Maine Hospice Council (136 State St., Suite 220, Augusta, ME 04330).

The Council provides –

- **Advocacy** for individuals and families dealing with death, dying and bereavement.
- **Consultation** regarding hospice, end-of-life issues and palliative care, for individuals, hospice programs, agencies, academic institutions, organizations, health care systems, corporations, work places, schools, etc.
- **Educational** workshops and seminars on various aspects of end-of-life care.
- **Policy Development** and analysis of state and federal legislation.
- **Placement** for undergraduate and graduate student interns.
- **Collaboration** with other health care and related organizations.
- **Program development**
- **Press releases.**
- **Maine Link** newsletter
- **Public Speaking.**
- **Technical Assistance** (computer & program).
- **Clearinghouse** for resource information.
- **Grant Writing**



Please consider donating today to help us continue our work for the people of Maine.  
(207) 626-0651  
[www.mainehospicecouncil.org/donate](http://www.mainehospicecouncil.org/donate)

## It Takes a Community...

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**We are grateful for every dollar  
we receive !**





# The POLST Conversation

POLST is both a process and a portable medical order set for patients who are considered to be at risk for a life-threatening clinical event because they have a serious illness, which may include frailty.

It is an important component of advanced care planning that emphasizes eliciting, documenting and honoring patients' preferences about the treatments they want to elect or decline during a medical emergency or as their health status changes.

## What is the POLST form?

The lime green paper POLST form is a clear and specific set of medical orders that express a patient's wishes for care near the end of life. The form is signed by both a health care professional and the patient.

The POLST Form helps your health care team honor your wishes in three ways:

- It makes your treatment wishes known to your health care team.
- If you are unable to speak for yourself, the POLST form makes clear your medical care wishes.
- It provides "must do" medical orders for all health care settings.

Your POLST Form goes where you go. To your home, hospital, or long-term care facility.

## Who completes and signs the POLST form?

The first step in completing a POLST form is you having a conversation about your wishes with a member of your health care team: a physician, nurse practitioner, physician assistant, nurse, social worker, or chaplain.

Your POLST conversation provides the information you and your health care professional need to complete your POLST form.

Once your POLST form is signed by you (the patient) and your health care provider (physician, nurse practitioner, or physician assistant), POLST form directions will be followed by other health care professionals.

# POLST

MAINE

*Physician Orders for Life-Sustaining Treatment*

### Have more questions or concerns about POLST?

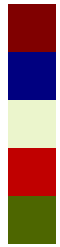
Speak with your health care professional.

For internet resources:

[www.maineospicecouncil.org](http://www.maineospicecouncil.org)

Or

[POLST.org](http://POLST.org)



Maine Hospice Council & Center for End-of-Life Care



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