



Executive Director Greg LaGoy, N.D.

## Executive Director's Corner

### Organizational Change –

As you might imagine, there is a clearly-defined regulatory framework governing how healthcare organizations function.

We in hospice, as relatively small as we are, also have such a framework, and for the first time since hospice care was officially recognized in 1983, that framework has just been overhauled by Federal regulators.

The intent of the regulators is to ensure high quality care. The “old” way was a punitive approach and didn't work so well: Make detailed rules and then periodically “survey” programs to catch anything wrong. This left the burden of “policing” on the regulators, who are understaffed and only visit hospice programs about once every five years. Under that system, even programs that were initially set up well could drift into dangerous waters and be suddenly shut down if there were caught.

The new rules are different. They require us to create ways to evaluate all aspects of our programs, they require those evaluations to be benchmarked against other hospices nationwide, and they require us to detail the mechanisms for corrective actions. In other words, the new regulations make us create a self-regulating system of continuous quality improvement. There are also new rules for the reporting of both our costs and our activities to regulators. AND, in addition to those changes, there are some opportunities for Hospice Maui to serve more people in our community, which means being busier.

Since most of these changes must take place over the next six months, we will be very busy! How will we do it? The answer is more computerization — both hardware and software. We are putting in a new book-keeping system, a new patient-tracking system, a new medical billing system, and a new electronic medical record system. Since our clinical staff have never had to do any of their work on a computer before, this is a major change for them.

It is our goal to implement these changes without altering or diluting our commitment to our mission or our values. This requires that we each keep our mission and our values in clear focus. Assisting with that is my most important role.

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News from Hospice Maui

SPRING 2008

# The Caregiver

## Caregiving Events

### November is “National Family Caregivers’ Month”

Watch for information about the 7th Annual Maui Caregivers’ Conference.

#### Saturday, November 1:

The first Saturday in November has been designated “Caregiver Recognition Day” in the State of Hawaii by the State Legislature. Take a caregiver to lunch!

At Hospice Maui we have summarized both the work we do, and our deeper purpose, in the following way:

“Our Work is providing physical comfort and emotional and spiritual support for people who are terminally ill, and supporting and assisting their families, before the death and while they are grieving. Our Deeper Purpose is to enrich our community by helping people discover the gifts that preparing for the death of a loved one can bring: Compassion, Insight, Courage, Humility, Inspiration, Confidence, and Growth.”

But notice that the word “caregiver” was not mentioned, nor was that critical role more than alluded to. So here we will acknowledge and describe the vital roles (plural!) of the caregiver in hospice care.

Caregivers are usually family members who, through some alchemical mix of love, duty, devotion, obligation, and/or chance, find themselves being in charge of responding to the needs of someone very close to them who is not only very ill, but constantly getting worse. They often must struggle with the foreign language of medicine, and have had to endure the indignities of being treated like a spectator in a situation in which they are intimately involved. Caregivers have often suspended their own lives almost entirely in order to serve their ill family member. By the time hospice enters the scene, the caregiver may already feel like their journey has been an eternity.

Often, the core tasks of a caregiver are to assist the ill person with what are called the “activities of daily living” or ADLs: Eating, dressing, bathing, toileting, and moving from place to place. And when people are quite ill, they have some of these needs at all hours, so caregivers often get very little respite. And there are almost always medicines to be given at certain times every day — the task of keeping that straight can be very trying to someone NOT under such stress. They may have to drive to doctor appointments, do dressing changes, and make difficult decisions about treatment. The caregiver is often their loved one’s voice: As one gets more ill, their caregiver often speaks for their needs and desires. Because the ill person may have some pragmatic tasks that they cannot do any more, their caregiver often endures the stress of having to learn or oversee those extra tasks. And on top of all this, they may also find themselves in the roles of housekeeper, cook, and shopper—a huge load.

But being a caregiver is more than having to do tasks. They are a witness to

painful as well as wonderful things. There is the fact of loss: Their terminally ill loved one may have experienced the loss of hope for a cure from their physicians, or from the prayers of their family and their faith community, or the loss of hope for a cure directly from God; the loss of how they always looked; the loss of a normal life; the loss of normal interaction with their friends; the loss of their ability to do their favorite things; the loss of all the things they still hoped to be able to do or accomplish. And the caregiver may also have witnessed the miracle of acceptance: Of the dying person coming to terms with the reality of their situation, day by day, and even perhaps seeing them embrace the unknown journey ahead.

Caregivers routinely do, or witness, all of these things and more. Day after day after day. Being a caregiver for someone who is terminally ill is truly a Herculean task, and we at Hospice Maui salute each and every one of you: It is through you that the people you love can spend the last part of their lives in their own homes — a very great gift indeed.

# A News Attitude



Hospice Maui welcomes Nalani Archibeque, Chelsea Tau'a and Joyce LeChuga.

Congrats to Hospice Maui social worker **Layla Lyons McCann** and hubby **Russell** who are the proud parents of new baby **Lily Nalani**, born on Monday, April 21 ...

A warm Hospice Maui welcome to new staff members **Joyce LeChuga, R.N., Nalani Archibeque, Ph.D.,** and **Chelsea Tau'a.**

**Joyce LeChuga**, most recently of Seattle and New Mexico, has joined the hospice nursing staff. She comes with an extensive background as a psychotherapist, an author and a workshop leader. Joyce has been offering continuing education work-

shops to health and business professionals since 1978. Her focus has been on mind/body medicine and integrating ancient medicine into our current western models. Joyce is now at home in a lovely new abode in Haiku, and loving it! ...

**Nalani Archibeque**, Hospice Maui's new Spiritual Care Coordinator, was born and raised in Honolulu, and has lived on Maui for 25 years. She is the mother of three, and loves gardening and dancing hula. Nalani has a 20-year relationship with Hospice Maui, including being a family care volunteer and running staff care programs.

Her extensive background as teacher, counselor, psychologist and psychotherapist has prepared her uniquely for her new role as Spiritual Care Coordinator ...

**Chelsea Tau'a** has more than competently taken over as Office Manager (although Cindy Garcia's slippahs were hard to fill...). Chelsea has a degree in Computer Science and previously worked for Tech Partners Maui. Originally from Washington State, she has lived on Maui for seven years. She is also a Certified Massage Therapist, and a student of Hawaiian language and culture. Chelsea and husband **Keli'i** reside in Haiku ...



## HOSPICE MAUI STAFF

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**MEDICAL DIRECTOR**  
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# Volunteer Corner

Left to Right, Back Row: Shanti Butcher, Ken Rose, Sher Baum, Ben Leland, Don Fisher, Judith Small and Harlan Nakanishi. Next Row: Judy and Herb Cherry, Evie Leland, and Edie Kapiko. Next Row: Yonah Marks, Eve-lynn Civerolo (Hospice Maui), Chelsea Tau'a (Hospice Maui), Tricia Gourley and Mike Crall (Hospice Maui). Front Row: Sara Patton, Carmela Casco, Pippa Mundie (Hospice Maui) and Nalani Archibeque (Hospice Maui).

## Hospice Maui is mandated by Medicare to supply at least five percent of patient care hours through the use of volunteer help.

2007 was a watershed year for volunteer hours at Hospice Maui with a record number of over 1,800 hours accounted for through patient care, bereavement support, office support, meetings, board membership and the Compassionate Care outreach program with Kaunoa & Hale Makua.

Volunteer patient care hours alone contributed to 51% of the total. This represents nearly a 30% increase from the prior year, setting a new Hospice Maui record for volunteers sup-

porting families & patients with end-of-life caregiving. As the census continues to grow at Hospice Maui the need for competent, compassionate, conscious end-of-life caregiving volunteers is meeting new demands.

At any given time nearly 30% of the patient census is supported with volunteers providing families and caregiving teams the necessary respite to keep themselves "whole" through the challenges of caring for the dying.

This year's Orientation & Volunteer Training Program was open to the public as a community service to provide education about dying, being with dying and end-of-life caregiving. In nearly 40 hours spread out over 6 sessions, participants learn through highly interactive presentations, exercises and videos, the necessity of compassionate communication, self-care methods and staying open to the present moment to know how to best support each patient and their

families. While not everyone who completes the program qualifies to be a Hospice Maui Volunteer, it certainly lends extremely useful insight on what one can anticipate experiencing in being with the dying and end-of-life caregiving. For more information on becoming a volunteer or end-of-life caregiving programs, check [www.hospicemaui.org](http://www.hospicemaui.org) for updates concerning upcoming workshops.

Mahalo Nui Loa to the Hospice Maui Volunteer Team, simply the best volunteer group on the planet. We couldn't exist without you and your compassionate hearts.



## REMEMBERING

# Duke Enomoto

July 10, 1936 – February 26, 2008

Gulstan Napoleon Toshisuke Enomoto, Jr., known as Junie to his siblings, Uncle Junie to his nieces and nephews, Toshi to his schoolmates and then in adulthood, just plain Duke. He once said his father should have kept it simple and just named him Sue.

A real son of the islands who loved all things Hawaiian, Duke was the second of 11 children born to Toshi and Anne Enomoto. Following graduation from St. Anthony he spent some years away from Hawaii in the Air Force, graduating from college and working for the Federal Government. He returned to Hawaii as a government employee to audit the University of Hawaii at Manoa, and a few years later he became Director of Administrative Services at Maui Community College. Duke ran a tax consulting business for 35 years and was still an MCC employee up to just a month prior to his death.

Duke was diagnosed with lung cancer in March 2006 and given 4 months or longer to live (Duke's own writings follow this article). Following a frank talk with his doctor, wife Rowena, and family members, Duke decided against treatment. Rowena told Duke at the time

that she would support him 100% in whatever he decided.

Duke personally called Hospice Maui some months before utilizing our services in order to determine exactly what it was we would provide. One of our teams visited Duke and Rowena and was surprised at Duke's vigor and health. He was still working at that time, doing yard work and other chores around the house. Later that year when our nursing and social worker team got to know him they realized that, as in all things pertaining to this transition, Duke wanted to know what he and Rowena should expect, and to be as prepared as possible.

Rowena and Duke shared a great love. Although they met when they were older and neither had been looking for a new relationship, they packed a lifetime of love, happiness, spirituality, song and joy into 15 wonderful years. Rowena said "they were best friends that loved each other deeply and found such joy in just being together." One of Rowena's favorite memories took place about a year after Duke's diagnosis when they were doing heavy yard work and loading a truck in the backyard. A sudden downpour left them both totally drenched, soaked to the skin. Instead of fretting about the rain and the mess, they laughed joyously and hugged each other.

In September of 2007, Hospice Maui was invited into the Enomoto's home. Social Worker Merlyn Hanada, and Nurses Gitti Crespo, Luciana Baccarat, Donna Kroetsch, Monika Bechert and Sandy Vilorio, had the privilege of assisting Duke and Rowena as he faced the most mysterious and awesome transition of his well-lived life. Duke was a very spiritual person and said to Rowena just a few months before he died, "Just think, I'm going to get to see what we've all been wondering about all our lives." He was totally accepting,



27 November 2007

*Aloha –*

The purpose of this letter is to express my mana'o relative to my pending death. My name is Gulstan "Duke" Enomoto, 71 years old, Maui born and raised.

On March 12, 2006 I was officially notified by my oncologist that I had a cancerous lesion in the center of my left lung consisting of squamous non-small cell cancer cells, and because of the size of the lesion, removal by surgery was not recommended. Chemo and radiation therapy were recommended.

I asked my oncologist how much time I would have if I did not take any treatment and he informed me I could die within four months or longer.

After serious discussions with

my wife, children and siblings, I decided not to take any treatments. My decision was based on my trust and love in Akua — The High Source. By completely placing my life in Akua, I have been blessed with continued quality of life since my decision. The fact that I am still alive is a clear revelation to me of Akua's love and mercy. I am not afraid of dying, fully knowing I am dying, because I know that when my time comes, it will be because Akua is calling me Home.

I pray that by sharing my mana'o, the reader will seriously think about the specific situation. It is not easy for anyone to face the reality of being told they have a terminal illness. Like me, the person is faced with a range of emotions from fear, hope, anger,

despair, and depression.

This range of emotions is natural, since the person has never faced this situation before. I believe, however, there is a way to meet this crisis in a logical manner. One, from the time a person is born they realize their life will end in death. By facing this reality, realistically, the person must conclude their time is coming to an end earlier. If the person has experienced in his/her lifetime a religious or spiritual relationship than this is the best time to reconnect with your religious beliefs and seriously take the necessary action to resolve all of the emotional issues. Like me, you will feel the peace of Akua and be fully comforted in Akua's love.

*Me ke aloha Pumehana,  
Uncle Dukie*

totally welcoming and knew he was going home to God.

Rowena said Hospice Maui services were so inspiring "not only because the personnel were perfect in everything they said and did, but that they also came in with so much love and compassion for the family." She stated that "hospice work was a calling, not a service, and the

nurses became like their family." Rowena also said that the two years she and Duke shared during his death and dying were a tremendous gift to both of them and she will never be the same again. Rowena's cousin Carmela who was with Duke during his final moments, was so moved by the experience and the quality of compassionate care by

the hospice team, that she just completed Hospice Maui's Spring 2008 Volunteer Training Class.

Duke and Rowena were both singers with beautiful voices and met when they were singing. Shortly before Duke's death, Rowena asked him how he would come back to her. "Easy," he said, "In a song." And he has, many, many times.



## HOSPICE MAUI BOARD OF DIRECTORS

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## A Heartfelt Mahalo: Lahaina Yacht Club

Since 2003, the Lahaina Yacht Club has generously donated proceeds from their Annual Memorial Golf Tournament and Live Auction to Hospice Maui. The event is in September of each year, and the Auction includes a plethora of fabulous items from many of Maui's best artists, restaurants, activities and retail outlets. The Golf Tournament is held in the morning, followed by a lunch and the Live Auction at

their Clubhouse on Front Street. Both events are well-attended by Lahaina Yacht Club members and guests, whose lively and spirited participation creates an atmosphere of great congeniality.

Hospice Maui was selected as the recipient of this annual charitable event because of its services for patients with terminal illnesses, and for their families, many of whom live on the West side. Over the past four years, the Lahaina

Yacht Club has donated more than \$50,000.00 to Hospice Maui. Special thanks to Commodore Steve Tenney and his wife Lynn, and all the gracious and generous members of Lahaina Yacht Club.



# Leave a Legacy

“Gift Planning” is the most powerful way to ensure we can provide services well into the future. This Leave a Legacy column is the second of four devoted to specific means by which a person can leave a charitable gift to Hospice Maui.

## Giving Through Life Insurance

### How it Works

Life Insurance is a very economical way to give a larger and more lasting gift to a charity such as Hospice Maui than otherwise might be possible. By giving through life insurance, you can make a significant gift for the future, with only a small monthly or annual payment and without drawing upon your assets or your estate. Life Insurance is not included in probate and there are no probate fees attached, so your gift goes to work at the charity very quickly.

There are basically three ways to give: 1) Give an insurance policy you already own; 2) Take out a new policy in the charity's name; or 3) Name your estate as the policy beneficiary and provide in your will for the policy proceeds to be paid to the charity. If it is a new policy, an immediate tax credit will be available via a receipt from the charity for the payment of insurance premiums. In the case of a paid-up policy signed over to the charity, your benefit comes when a tax receipt for the cash value of the policy is issued to the donor.

When a charity is named in your will as the policy beneficiary, or as a secondary beneficiary if the primary beneficiary has

not survived, there are no current tax benefits. As death proceeds are paid, the amount will be treated as a charitable contribution and used within normal limits. In order to receive a tax benefit, you must ensure that the charity is both the owner and the beneficiary of the policy. Arrangements can easily be made with your insurance company and with the charity.

### Benefits to You

- Your tax receipt from the charity will significantly reduce the cost of the policy, provided that the charity is the owner and beneficiary of the policy.
- You pay for the gift in small installments over several years.
- Your gift will not affect the amount of money available to your beneficiaries in your estate.



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Mark your calendar...



1st Annual

Liz Janes-Brown  
Celebration of Life

Gala Event

FRIDAY, JULY 11, 2008  
AT THE STUDIO MAUI

Proceeds Benefit Ola Maui and Hospice Maui  
Go to [www.thestudiomaui.com/olamaui\\_events](http://www.thestudiomaui.com/olamaui_events)  
for more information

## How to Talk with Your Loved Ones

Remember, it's up to you to take the initiative and express your wishes. Your family or loved ones are not likely to raise the issue for you. Talking about end-of-life issues can be difficult for anyone. One way to approach the subject is to talk about why you have decided to talk about these issues. For example:

- Did a particular event cause you to make the decision?
- Did an article in the newspaper or something that happened to a family member make you think about it?
- What is motivating you to take these actions now?

Sometimes sharing your personal concerns and values, spiritual beliefs, or views about what makes life worth living can be as helpful as talking about specific treatments and circumstances. For example:

- What aspects of your life give it the most meaning?

- How do your religious or spiritual beliefs affect your attitudes toward dying and death?

- What is your attitude towards death?

Sharing your end-of-life care decisions with your loved ones will also help them ensure your wishes are followed. Decisions may include answers to the following questions:

- How important is it to you to be physically independent and stay in your own home?
- Would you want your healthcare agent to take into account the effect your illness has on any other people?
- Would you prefer to die at home if possible?

Reassess your decisions over time. These are not simple questions and your views may change. It is important that you review these issues and discuss your choices as your personal health or circumstances change your life.



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