Compassionate CARE when it is NEEDED MOST

J.A.WEDUM RESIDENTIAL HOSPICE
“You matter to the last moment of your life, and we will do all we can, not only to help you die peacefully, but to live until you die.”

DAME CICELY SAUNDERS
Founder of the Modern Hospice Movement
Currently, less than 42 percent of hospice-eligible patients are enrolled in hospice at the time of death.

Allina is seeking community support to build a 12-bed residential hospice in the Twin Cities. This much needed facility will serve hospice patients and families from across the Twin Cities region.

At Allina, we are committed to providing excellent care throughout the entire lifespan, and hospice is the gold standard for best possible end-of-life care. We have a bold vision to change the way end-of-life care is delivered in this region. This vision ensures all patients approaching end of life know about hospice.

Currently there is limited residential hospice capacity in the Twin Cities. There are only three facilities, each able to serve eight patients. Many days all hospice beds are filled, resulting in limited choices for hospice patients no longer able to stay at home who are seeking a home-like setting. Too many hospice patients who wish to reside in a hospice residence at the end of their life are not receiving that option. Too many caregivers who need a break from caregiving go without respite due to the shortage of hospice beds.

According to the National Hospice and Palliative Care Organization (NHPCO), 90% of people would prefer to die at home, yet 50% of the general population dies in hospitals and 25% in nursing homes. A lack of residential hospice beds contributes to more people not dying in the place of their choosing – at home or a home-like setting.

Currently, less than 42 percent of hospice-eligible patients are enrolled in hospice at the time of death.
The realization of the impending loss of my wife was an extremely difficult experience for me and my family, however the staff and volunteers at Allina eased the burden and allowed us to focus on having a very special end-of-life relationship with our loved one.

I cannot thank the caregivers at Allina enough for the support, comfort and care they extended to me, my family and friends during this very emotional time.”

GEORGE HUTSON
Husband of Maggie, Hospice Patient
Allina HOSPICE
Easing Suffering at the End of Life

Allina has been providing hospice care for nearly three decades, growing to become the largest hospice program in the state of Minnesota, and serving thousands of hospice patients and families yearly in 28 Minnesota counties.

Hospice care focuses on patient and family centered care. Addressing physical, spiritual, emotional and practical needs, hospice helps people with life limiting illness to live fully for their last months of life. Hospice is appropriate for all types of life-limiting illnesses.

The interdisciplinary hospice care team generally includes physicians, nurses, hospice aides, medical social workers, pharmacists, spiritual care, bereavement therapists, massage therapists and music therapists. An additional roster of over 450 specially trained volunteers rounds out the team. Bereavement counseling and support is provided for 13 months after a patient's death.

Patients, families and caregivers participate with the hospice team to create individualized plans of care to assure that the patient's and family's goals, wishes and values are honored.

Hospice care is generally delivered wherever the patient calls home.

There are four types of care in a residential hospice: Routine, Continuous, Respite, and Inpatient. Most hospice care is routine, intermittent care, provided on a schedule tailored to an individual's needs.

- Routine Care is provided in any setting.
- Continuous Care is provided in a patient's home for short periods of time to help manage pain and symptoms.
- Respite Care is provided for 5 day periods for caregivers needing a break.
- Inpatient Care is provided for patients in a residential hospice or hospital setting for patients with acute medical needs.
“At Allina, we have a vision to change the way end-of-life care is provided in this country. We are committed to honoring patients’ end-of-life wishes. For most, this includes dying at home or in a home-like setting. The J. A. Wedum Residential Hospice will help us honor wishes while offering a setting of comfort and peace, providing compassionate care 24 hours a day, seven days a week.”

GAYLE MATTSON
President,
Allina Home & Community Services
Allina Hospice is the largest hospice care-provider in Minnesota, providing compassionate end-of-life care to more than 3,000 people and their families each year. The hospice team provides pain and symptom management, making our patients as comfortable as possible. They are trained to manage symptoms including nausea, shortness of breath, limited mobility, and changes in nutritional status. Patients and caregivers are encouraged to participate in the plan of care and are provided with education and assistance necessary to best manage symptoms. The patient’s dignity and sense of control is always a prime consideration.

Patients receive care from an interdisciplinary team, which generally includes physicians, nurses, health aides, medical social workers, pharmacists, counselors, therapists, and trained volunteers, depending on patient and family needs. Individualized care plans help to assure that the patients’ and family’s wishes are honored.

Allina’s Medical Directors are board certified hospice and palliative care physicians. They, along with our other hospice professionals, assume a level of excellence by receiving special training in providing physical comfort and symptom control, and addressing the psychological, social, spiritual, religious, ethical and legal aspects of end-of-life care, from the perspective of both the patient and their loved ones. Most nurses carry the distinguished Certified Hospice and Palliative Care Nurse certification as well.

Hospice offers emotional support for both the patient and family. Patients express a range of concerns from how to cope with the dying process and associated losses, to how to access community resources. Our social work professionals provide support to patients and families as they cope with many emotions during this difficult time, or offer help in sorting through financial, insurance, and legal concerns if they are pressing.

Quality of life is emphasized, for whatever time remains. Hospice care is patient and family centered, and addresses physical, spiritual, emotional and practical needs during a vulnerable time. We provide pain relief, family support, gentle guidance and focused activities such as music therapy that help patients and families recall and enjoy the times they have spent together. We support loved ones in effective grieving before the patient dies and for a year after their death.

With the population aging, and more people realizing the value of hospice care, the need for hospice beds will only grow.
The building of a residential hospice has been a dream of the Wedum family for many years. The J. A. Wedum Foundation is proud to partner with Allina to build this state-of-the-art care center for end-of-life patients. Being a part of this project is the “right thing to do” in so many ways. People deserve to have the absolute best care at all stages of their life. Allina will provide that with the J.A. Wedum Residential Hospice.

MARY BETH WEDUM
Board Member,
J.A. Wedum Board of Trustees
In 2003, a Minnesota businessman named John Wedum who had cancer and was facing the end of his life, received in-home hospice care from Allina Hospice. In his honor, the J.A. Wedum Foundation has issued a challenge grant to Allina Hospice Foundation to fund a new, 12-bed residential hospice. The J.A. Wedum Residential Hospice will serve families who prefer the comfort of a residential home-like setting when they or someone in their family is dying. Mr. Wedum was an inspired philanthropist who leveraged every gift that the Foundation made with funds raised from the wider community, and the J.A. Wedum Foundation honors that legacy with its offer to match the first $2 million in gifts raised from the community, dollar for dollar.

The J.A. Wedum Residential Hospice will combine a home-like setting with expert, professional round-the-clock hospice care. It can give peace to spouses, family and friends who cannot provide the round-the-clock care their loved ones need, but want to honor their loved one’s request to be in a home-like setting. Also, in this age of far-flung family and friends, it can provide a caring alternative when a terminally ill person has no nearby caregivers.

The Residential Hospice will provide a place for respite care, where hospice patients can stay for up to five day periods while caregivers take a needed break.

*With a shortage of residential hospice beds, caregiver requests for respite often go unmet.*

For those patients requiring inpatient hospice care, the Residential Hospice will also provide an inpatient or hospital level of hospice care for those with acute medical needs. Today, hospice patients needing inpatient-level care require hospitalization.

*The residential hospice will all but eliminate the need for hospitalization for hospice care, allowing care in a more appropriate setting, and at a more appropriate cost level.*
The new Residential Hospice will be in a setting designed around the needs of patients, families and visitors. It will have the appearance and welcome of a very comfortable home. The exterior will blend nicely with neighboring residential homes.

A welcoming and landscaped drop-off area in front of the facility will be a convenient and safe access point at all hours of the day and night.
• Patients and their families will enjoy an outdoor patio for sitting and talking.
• Multi-purpose spaces will be used for community education and support groups.
• The twelve spacious bedrooms can be personalized to make a stay feel home-like.
• Plentiful windows will create a connection to nature and the outdoors.
• Rooms will offer privacy, tranquility and comfortable sleeping accommodations for families.

• Common areas such as living rooms, patios and kitchen will provide ample space for families to gather and share valuable time together.
• Areas for meditation and reflection will be key in the design.
• The attractive grounds have ample land to offer future additions of walking paths, soothing water features and perhaps a gazebo so family members can be outside yet nearby.
“Seeing the warm smile on the face of a patient and the relief and gratitude on the faces of the family is what it is all about. I feel like my time cannot be spent in a better way. I’m making a difference and touching many lives on many different levels with the small gift of time I am able to provide. I wouldn’t trade this experience for anything!”

CARMEN COYLE  
Hospice Volunteer
A needs assessment by residential hospice experts Weatherbee and Associates concluded that the seven-county Twin Cities metro area is underserved by as many as 60 hospice beds. And, with the population aging, and more people realizing the value of hospice care, the need will only grow. The Allina Hospice Foundation requests community support for a capital campaign to build a 12-bed hospice residence in Brooklyn Park. More and more people see the value in having residential hospice care as a compassionate, end-of-life care option for the community. The J.A. Wedum Residential Hospice will help reduce the area-wide shortage of residential hospice beds. The residence will allow patients to receive the type of end-of-life care they need and want, in a more appropriate setting, at a more appropriate cost level than is possible in a hospital. It will allow us to offer respite care for hospice patients, providing a five-day break for family and caregivers.
“The J. A. Wedum Residential Hospice will be a tremendous asset to our community. It will provide patients with a peaceful setting, room for families and compassionate medical care. Having first-hand experience with hospice, I can attest to how this project can have a positive impact at a very critical time for families. It is a great reminder why we give our time and resources to such worthwhile projects.”

GEOFF GRASSLE
Board Member,
Allina Hospice Foundation
Once construction of the J.A. Wedum Residential Hospice is finished, Allina Hospice would like to establish an endowment for the hospice residence. This would allow Allina to offer residential hospice care regardless of financial circumstances of the patient. While Medicare and private insurance generally cover the cost of medical care provided within a residential hospice, the room and board costs of approximately $350 per day are not covered by insurance. An endowment would allow us to help patients who need assistance covering all or part of this room and board cost.

*Any time we can make a person’s final days more pleasant and peaceful, we want to be able to make that happen. With generous philanthropic support, the J.A. Wedum Residential Hospice can provide the residential hospice care our community wants and needs.*

The J.A. Wedum Residential Hospice will serve families who prefer the comfort of a residential home-like setting when they or someone in their family is dying.
“Everyday, medical professionals are faced with challenging decisions. Working to have a patient who is in an end-of-life situation move into a hospice program is a no-brainer. The care and comfort of the patient as well as the support for the family and friends at a very difficult time is one of the best kept secrets in the health care industry.”

DONALD GROSSbach, M.D.
Medical Director,
Allina Home & Community Services
90% of people prefer to die in a home-like setting, yet 75% die in hospitals and nursing homes

Financial Statement

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**TOTAL SECURED**

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*The J.A. Wedum Foundation will match the first $2 million in gifts raised from the community, dollar for dollar.

*Allina has provided the land in Brooklyn Park for the J.A. Wedum Residential Hospice.*
Thank-you for your participation.
The mission of the Allina Hospice Foundation is to serve patients and families by raising funds for end-of-life care that provides peace, dignity and comfort.