



ClearPath
HEALTHCARE
HOSPICE • TRANSITIONS • PRIMARY CARE

There is a ClearPath Ahead Let's find it together.

Introducing the **Complete Planning Handbook** for patients and future patients of ClearPath Healthcare, formerly known as Hospice of Redmond



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Introduction



Dear Community Partners and Friends.

ClearPath Healthcare, formerly known as Hospice of Redmond, is a nonprofit community-based hospice organization which started in 1979 when hospice care first came into our state. For over four decades, we have provided healthcare in patients' homes—wherever they call home—as they approach the end of their life.

We are deeply rooted in this community. We offer more than hospice, and we serve Central Oregon, not just the city of Redmond. Now, we are very excited to be launching a primary care service in patients' homes.

As we embark on this new endeavor, we felt it was important that our name captured all that we do. **So, Hospice of Redmond is now ClearPath Healthcare.**

We are the same nonprofit, simply helping more people in our region.

We are so excited about serving you in this capacity, and we look forward to seeing you soon!

Jane McGuire
Executive Director
ClearPath Healthcare
Formerly known as Hospice of Redmond

The Mission of ClearPath Healthcare



We provide Central Oregonians with high-quality care wherever they call home, focusing on heartfelt support and guidance throughout their healthcare journey and at the end of life.

ClearPath Healthcare is an independent and Medicare-certified organization that serves Deschutes, Jefferson, and Crook counties including Redmond, Bend, Sisters, Tumalo, Powell Butte, Prineville, Terrebonne, Crooked River Ranch, Culver, Metolius, Madras, and the surrounding areas.

732 SW 23rd Street, Redmond, OR 97756
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ClearPath Healthcare is a 501c3 nonprofit organization. Tax ID: 93-0808743

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Edward Jones IBC

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This initial section is designed to be a useful tool and a confidential space to record critical personal, financial, and legal information, ensuring your loved ones are prepared for any future healthcare decision. This is a crucial section for documents, phone numbers, and safe codes to fill out now!

My full name:

Address:

Birthplace: Birthdate:

Social Security number: Citizen of what country:

Naturalization number:

School attended: From: To:

Degree: No. of years of formal education:

Company:

Job title:

Professional achievements:

If veteran, name of war(s) if applicable:

Date of service: Branch of service and rank:

Years of residence established in Oregon:

Years of residence established in this community:

Marital status: Date of marriage:

Name of partner:

Birthplace: Birthdate:

Name of father:

Birthplace: Birthdate:

Mother's maiden name:

Birthplace: Birthdate:

We suggest you collect these documents as you begin to plan for end of life for you or someone else:

- Medical power of attorney document
- Advance directive that is signed
- Health insurance
- Life insurance
- Long-term care insurance

Jot it down!

Bank accounts

Name of bank:

Address:

Name of bank:

Address:

Name of bank:

Address:

Doctor details

Name of doctor:

Address:

Name of doctor:

Address:

Lawyer details

Name of lawyer:

Address:

Safety deposit box or safe

Location of box:

Location of keys:

Location of important papers

Birth certificate:

Marriage license:

Last will and testament:

Deeds and titles:

Mortgages in notes:

Insurance policies:

Military discharge:

Income tax records:

Stocks and bonds:

Other important papers:

.....

.....

.....

.....

.....

.....

.....

.....

.....

In calm recognition of the inevitable, I have given somber thought to these matters, and you will find the following arrangements are in accordance with my wishes:

- I have arranged
- I have not arranged, but prefer

Funeral home:

Address:

State:

Phone number:

- I own cemetery property in:
- I do not own cemetery property, but prefer:

Name of cemetery:

Address:

State:

Phone number:

Location of deed:

Church affiliations:

Clergymen desired:

Fraternal affiliations:

Type of service preferred

- Funeral home
- Church
- Graveside

Final resting place

- Earth burial
- Mausoleum
- Interment following cremation
- Other

Marker or monument

Purchased? Yes No

Monument company name:

If 'No', inscription instructions:
.....

Reception location

- Reception room
- Place of worship
- Other
- Reception to follow cemetery
- Reception to follow service

I would like the following to service pallbearers:
.....
.....

I would prefer the following hymns/musical selections:
.....
.....

Special request requests (ie: jewelry, eyeglasses, clothing, favorite Bible passage, or other literature):

At my request,
has agreed to carry out those wishes. Phone number:

Important notes:
.....
.....
.....
.....
.....

“Volunteers are the only human beings on the face of the earth who reflect this nation’s compassion, unselfish caring, patience, and just plain loving one another.”
– Erma Bombeck

People helping people

Each volunteer has their own story behind their passion to serve. At ClearPath Healthcare, we value the individual’s story and use the talents and skills of each volunteer to best serve our patients and their caregivers, Transitions clients and their loved ones, and our community as a whole.



Volunteer opportunities:

- ❖ Hospice patient & family visits (non-medical support)
- ❖ Transitions client & family visits (non-medical support)
- ❖ Volunteer-on-call (VOC)
- ❖ Community ambassador
- ❖ General office/administrative support
- ❖ Deliveries and promotions
- ❖ Special events
- ❖ Pet therapy
- ❖ Music and art therapy
- ❖ Veterans advocate support

Call **541-548-7483**
to get plugged in!

The **Festival of Trees** is ClearPath Healthcare’s Annual Fundraiser. Voted the Best Nonprofit Event in 2024, the Festival of Trees is typically held at the Deschutes County Fairgrounds on the first Saturday in December. We have both a daytime event and an evening event.

During the daytime event, the community is invited to come see Santa, hear some local live music and, best of all, view the 30+ stunningly decorated (donated!) Christmas Trees prepped and ready for the live auction, which will take place during the evening event. The daytime event is free to the public and we typically draw a huge crowd!

During the evening, attendees purchase tickets to enjoy dinner, music, raffles, games and an exciting live Christmas Tree auction! ALL proceeds raised during our Festival of Trees Fundraiser go towards our various free programs.



Your Funds Make It Possible.

Your support contributes to the following programs:

Hospice Care – Funds raised at Festival of Trees ensures that everyone who needs hospice care can receive it, regardless of whether the patient has medical insurance.

Transitions Program – Providing free resources and support for those navigating serious illness.

Bereavement Services – Providing free community grief support to adults, regardless of any connection to our hospice.

Camp Sunrise – Helping Central Oregon children process their loss at Oregon’s longest-running overnight grief camp, Camp Sunrise! Camp Sunrise is free for families.

Pet Peace of Mind – Thanks to our Pet Peace of Mind Program, our patients don’t always need to part with their animal towards the end of their life.

We are grateful for your support!



Veterans Resources

<https://www.nphihealth.org/wp-content/uploads/2025/09/NPHI-Veterans-Guide.pdf>



Cancer Care Guide

<https://www.nphihealth.org/wp-content/uploads/2025/06/NPHI-Cancer-Care-Guide.pdf>



Dementia Guide

<https://www.nphihealth.org/wp-content/uploads/2025/06/NPHI-Dementia-Care-Guide.pdf>



Advanced Lung Care

<https://www.nphihealth.org/wp-content/uploads/2025/08/NPHI-Lung-Care-Patient-Guide.pdf>



Advanced Cardiac Care

<https://www.nphihealth.org/wp-content/uploads/2025/05/NPHI-Cardiac-Patient-Caregiver-Guide.pdf>



Elder Abuse

<https://www.nphihealth.org/wp-content/uploads/2025/06/NPHI-Domestic-Violence-Resource-1.pdf>



Courtesy of the National Partnership for Healthcare and Hospice Innovation (NPHI)

Activities of Daily Living (ADLs) – These are the basic, everyday tasks that a person typically does on their own. They can include things like bathing, getting dressed, eating, and using the restroom.

Acute Illness – A health condition that comes on suddenly, often with severe symptoms. It's the opposite of a chronic illness, which lasts for a long time.

Advance Directive – A legal document, such as a living will or power of attorney, that outlines a person's wishes for their medical care. This is used if they become too ill or incapacitated to communicate their decisions.

Advance Care Planning – This is the process of thinking about and making decisions for your future healthcare needs. It's about ensuring your wishes are known and documented in case you can no longer communicate them yourself.

Alzheimer's Disease – A progressive brain disorder that gradually impairs memory, thinking, and behavior. It starts with mild cognitive issues and gets worse over time, leading to severe dementia.

Assisted Living Facility (ALF) – A residential community that offers help with daily activities and personal care in a home-like environment. The goal is to support residents while promoting their independence.

Bereavement – The period of emotional pain and grief following the loss of a loved one. Everyone experiences it differently, and it can involve a wide range of emotions like sadness, anger, or despair.

Caregiver – Someone who provides care and support to a friend or family member, usually a loved one who is ill. This term often refers to the person who spends time helping a patient with their needs.

Case Management – In hospice, case management is the coordination of a patient's personalized care plan. This ensures the patient and their family receive all the necessary medical, emotional, and practical support throughout their end-of-life journey.

Chronic Illness – A long-lasting health condition that can be managed but typically does not have a complete cure.

Centers for Medicare & Medicaid Services (CMS) – The federal agency that manages the Medicare and Medicaid programs. This includes determining what benefits and services are covered.

Certified Nursing Assistant (CNA) – A healthcare professional who assists patients with basic, non-medical needs. This can include helping them bathe or get dressed, tasks that don't require a registered nurse or doctor.

Cardiopulmonary Resuscitation (CPR) – An emergency procedure that uses chest compressions and artificial breathing to keep blood flowing and preserve brain function when a person's heart or breathing has stopped.

Dementia – A general term for a decline in a person's mental abilities, such as memory and thinking, that is more severe than what is typically expected with normal aging.

Diagnosis – The identification of a disease or medical condition based on a physician’s evaluation of a patient’s symptoms and health.

Discharge Planning – The process of coordinating a patient’s care and support after they are released from a hospital or other healthcare facility. It involves working with hospitals, providers, and caregivers to ensure a smooth transition and continued recovery.

Durable Medical Equipment (DME) – Medical equipment designed for repeated use, like a wheelchair, hospital bed, or walker.

Do Not Resuscitate (DNR) Order – A legal document signed by a patient or their representative instructing healthcare providers not to perform CPR if their heart or breathing stops.

Electronic Medical Records (EMR) – A digital version of a patient’s medical history, which is maintained by their healthcare provider over time.

End-of-Life Care – Comprehensive care and support for a patient in the final stages of a terminal illness. The focus is on comfort, pain management, and dignity.

End-Stage Disease – The final phase of a disease’s progression. This term is often used interchangeably with “terminal illness.”

General Inpatient Care (GIP) – Intensive, short-term care provided in a hospice facility. It’s for hospice patients who need help managing severe symptoms that can’t be controlled at home.

Grief – The profound sorrow and emotional distress experienced after a significant loss, such as the death of a loved one.

Homebound – A patient who is unable to leave their home without significant difficulty, often requiring the help of another person or a mobility aid like a cane or wheelchair. Under Medicare, a doctor must certify this status.

Hospice – A philosophy of care focused on providing comfort, dignity, and symptom management for patients with a life-limiting illness.

Hospice Aide – A trained professional who helps hospice patients with personal, non-medical tasks like bathing, dressing, and other daily activities.

Inpatient Care – Short-term, intensive care provided in a hospital, skilled nursing facility or hospice facility. The purpose is to manage severe symptoms or give caregivers a break, ensuring the patient is comfortable and stable.

Interdisciplinary Team – The group of staff and healthcare workers who provide a patient’s hospice care. This team includes professionals from different disciplines, such as doctors, nurses, social workers, and chaplains, who work together to support the patient.

Life-Sustaining Treatment – Medical procedures or devices that support or replace essential bodily functions needed for life. Examples include CPR, ventilators, and kidney dialysis.

Living Will – A legal document that specifies an individual’s wishes for their

medical treatment at the end of their life. It takes effect if the person becomes incapacitated and can’t communicate their decisions.

Long-Term Care – Services designed to meet the medical, personal, and social needs of people who can’t perform basic daily activities on their own for an extended period.

Medicaid – A government health insurance program run by states that provides medical coverage to low-income individuals and families who meet specific requirements.

Medicare – The federal health insurance program for people age 65 and older, as well as some younger people with certain disabilities or end-stage kidney disease. It’s divided into parts (A, B, and D) that cover different medical services.

Medical Director – In a hospice setting, this is a physician who collaborates with each patient’s doctor and care team to develop the best possible treatment plan.

Physician Orders for Life-Sustaining Treatment (POLST) – A medical order that outlines a patient’s specific preferences for life-sustaining treatments and resuscitation.

Power of Attorney – A legal document that allows an individual to choose someone to make legal decisions on their behalf.

Primary Care Physician (PCP) – The doctor a person sees for regular check-ups and routine care. They work closely with home health and hospice teams to create a tailored care plan for each patient.

Respite Care – Temporary relief for a patient’s primary caregiver. This allows the caregiver to take a break and attend to personal matters while a volunteer or professional cares for the patient.

Routine Home Care – The most common level of hospice care, where the hospice team provides regular visits to the patient’s home to manage symptoms and ensure comfort.

Transfers – The movement of a patient from one place to another. This can refer to moving a person from a bed to a wheelchair or moving them from one medical facility to another.

Will – A legal document that describes how you would like your property and other assets to be distributed after your death. In the state of Oregon, a will does not need to be notarized for it to be a legal document. It must be in writing and signed by the testator (the person making the will) in the presence of two competent adult witnesses, who also sign the will. If you do notarize a will, this does help expedite the probate process following the person’s death.

This section focuses on routine, preventative care designed to keep you well and independent in your home for as long as possible.

ClearPath Healthcare's New Primary Care Service

Building on decades of trusted care, we now offer primary care physician services in patients' homes under our new name.

- ❖ **Who is eligible?** Patients need to be 55+ to receive this service, and they need to live in Central Oregon. That's it!
- ❖ **How does it work?** Our primary care physician will come to your home once a month for your visits, and as requested as needs arise.

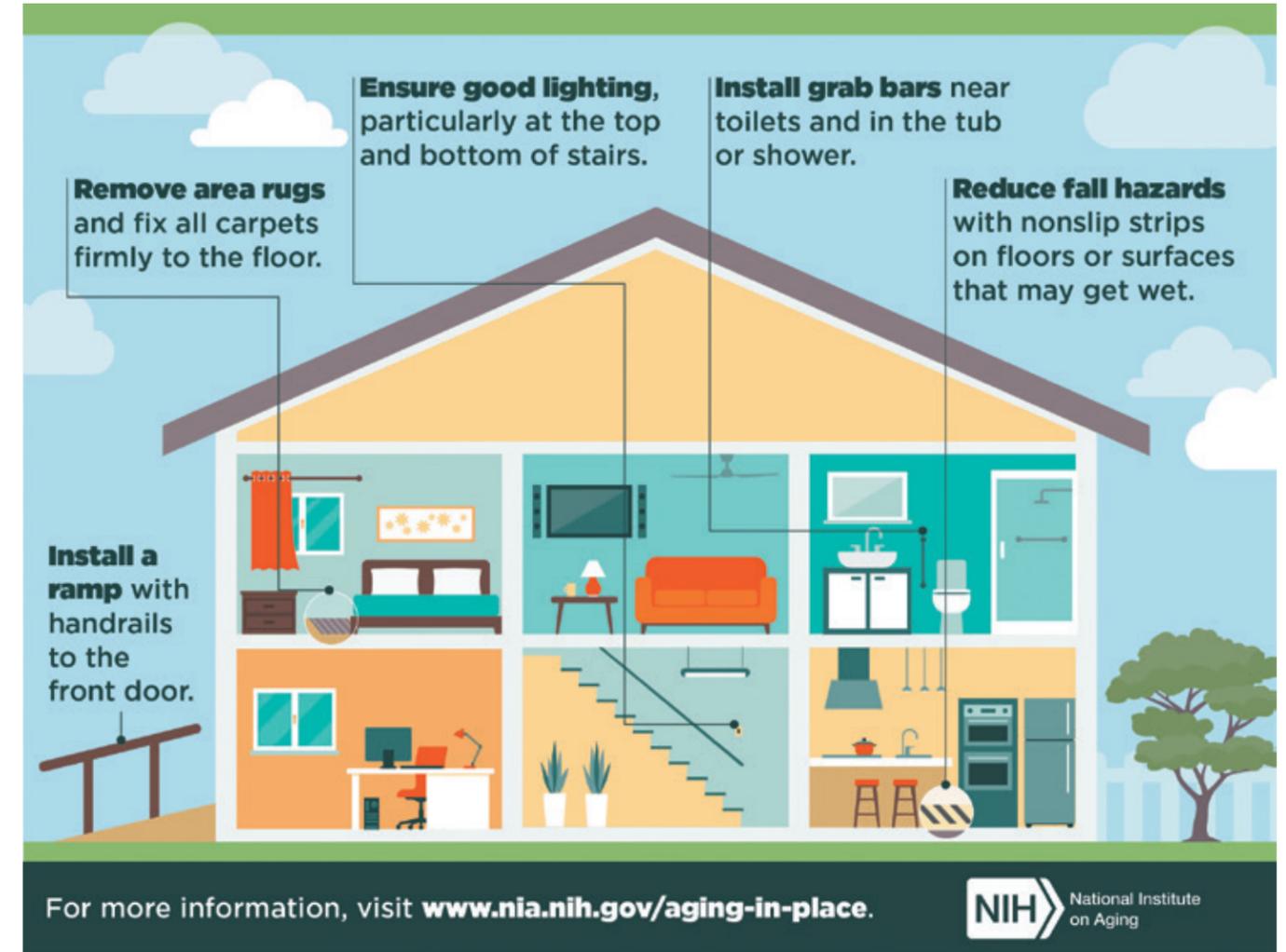
	Clinic-Based Primary Care	ClearPath Primary Care
Routine care and chronic care management	✓	✓
Access to same-day visits for urgent needs	✓	✓
Ability to refer you to specialists as needed	✓	✓
Ability to support you with labs, prescriptions, wound care and more	✓	✓
Primary Care physician in your home, offering uninterrupted and dedicated time to you		✓

\$200 per month covers a primary care providers travel time and insurance covers the rest.

If you think our primary care service may be right for you or your loved one, or if you have questions about referrals, call us at 541-548-7483!

Maintaining Safety and Independence

Home Safety Tips for Older Adults: A few simple changes could make your home easier and safer to live in and help you continue to live independently.



(Graphic courtesy of the National Institute on Aging)



This section is for individuals with a serious illness who need coordination, resources, and support to manage their condition before hospice care is appropriate.



About Transitions

If you have a serious illness, you may qualify for Transitions, a FREE program for Central Oregonians.

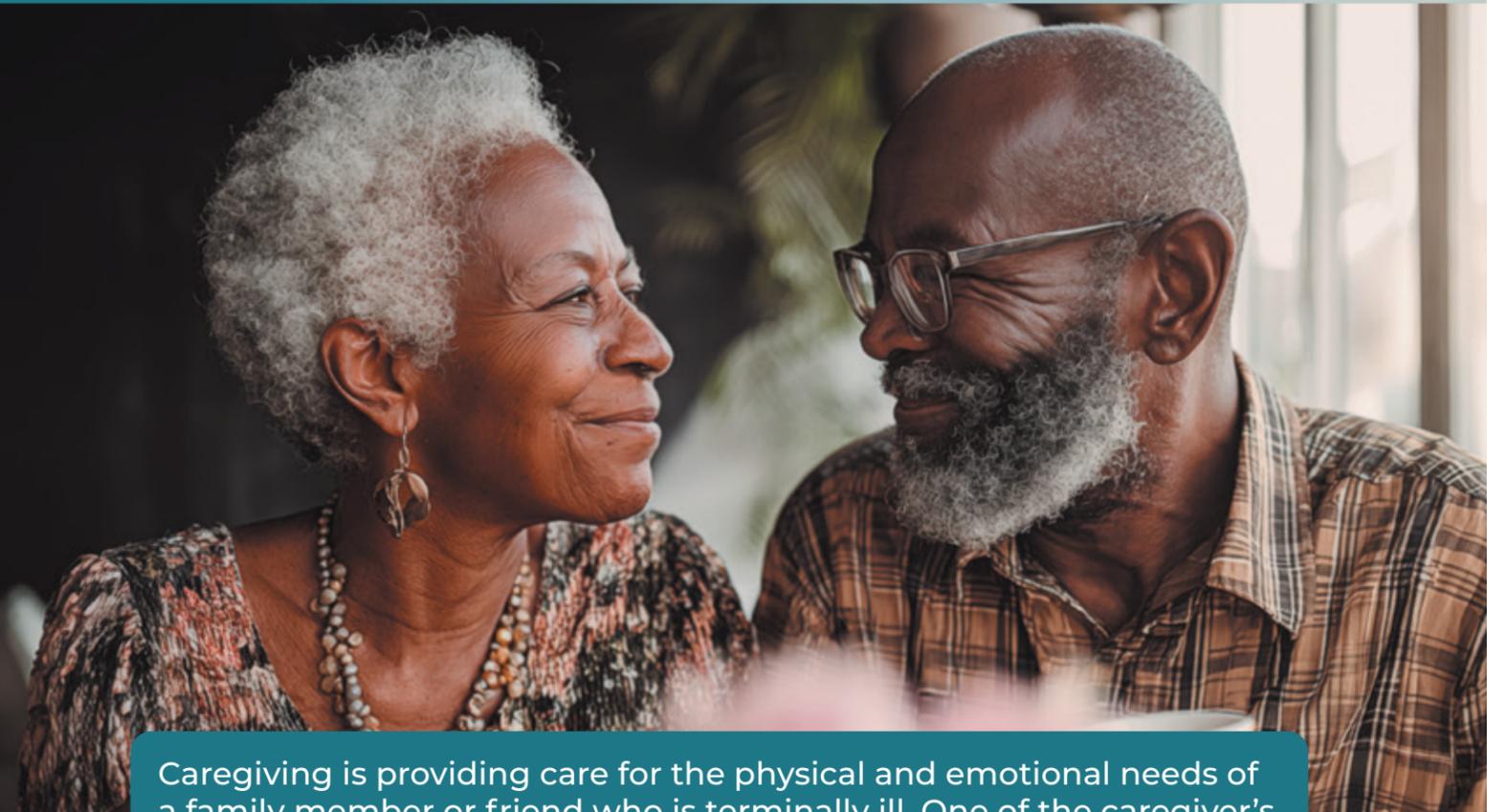
Let us walk alongside you. Transitions at ClearPath Healthcare is for individuals who live in Central Oregon and who:

- ❖ Have been diagnosed with a serious, life-limiting illness.
- ❖ Have become less independent and are having difficulty caring for themselves.
- ❖ Do not qualify for or do not choose hospice care.

Our qualified Transitions Coordinators will visit you regularly and pair you with resources specific to your needs. This may be:

- ❖ Assisting you with understanding your diagnosis and options
- ❖ Attending your doctor's appointments with you
- ❖ Navigating health insurance or VA benefits
- ❖ Getting you access to free medical equipment or community resources you didn't know were available to you.

Transitions is a non-medical case-management program offered through ClearPath Healthcare. **It is completely free.** ClearPath Healthcare has been offering a Transitions program to terminally ill Central Oregonians since 2004.



Caregiving is providing care for the physical and emotional needs of a family member or friend who is terminally ill. One of the caregiver's greatest gifts is the loving support they give to the patient.

Caregivers are an important member of the “team.” It is easy to feel overwhelmed, isolated and sometimes even frustrated with all the demands of the role.

To be able to take care of another, you must first take care of yourself.

Tips on taking care of yourself...

- ❖ Love yourself at least as well as you love the one you are caring for.
- ❖ Get enough rest, perhaps naps during the day. Conserve your energy.
- ❖ Exercise. Even a short walk helps you sleep and gives energy.
- ❖ Eat well: a variety of foods from the 5 basic food groups. Drink plenty of water.

- ❖ Find ways to relax and reduce stress. Utilize things that have helped in the past.
- ❖ Nurture your spiritual side. Pursue those things that are uplifting to you.
- ❖ Pamper yourself, especially on difficult days. Be patient and considerate of yourself.
- ❖ Avoid unrealistic expectations of yourself.
- ❖ Allow others to help you; recognize your needs and limitations.
- ❖ Set limits; it is okay to say “no” sometimes.

Tips on helping loved ones...

- ❖ Allow them to talk; just listening is a major gift.
- ❖ Acknowledge their feelings and let them express their feelings in many ways.
- ❖ Try not to take any negative feelings expressed personally.
- ❖ Let them have control over their situation as much as possible; include them in decisions and discussions.
- ❖ Let them do as much as they want to and have the energy for, no matter how slow, painful or difficult it seems to you.
- ❖ Don't underestimate their pains, symptoms or fears. They are real and valid.
- ❖ Avoid judging.
- ❖ Talk about subjects you used to discuss together and the times you shared.
- ❖ Laugh.

When You Need a Break

Having responsibility for someone else's care 24 hours a day can be exhausting. There may be a time when you need a “break” or someone to take over the major daily responsibilities. There are a variety of reasons why you may need a “respite” from caregiving.

We can help.

Volunteers

- ❖ Trained volunteers are available to provide respite care, sitting with a hospice patient or transitions client up to four hours at a time.
- ❖ These volunteers will meet with you in advance so you can get to know each other. Volunteers do not provide hands on care.
- ❖ A volunteer providing respite will allow you to take some time for yourself.

Paid Caregivers

- ❖ There are a variety of paid caregivers in the area who can come into your home and relieve you for a given period of time. This may be daily, weekly or whatever schedule you may choose.
- ❖ We can give you a list of professional services and individuals.
- ❖ Nighttime is often difficult. Remember that you need your rest in order to maintain your health and well-being. You may want to have someone come in at night so you can get a night's sleep.

5-Day Respite (for Hospice patients only)

- ❖ Should you need to leave or rest for an extended period, we can provide 5 days of stay in the local nursing home.
- ❖ Please discuss with the social worker and nurse which option is the best for your situation.



Questions to Consider When Touring Senior Living Communities

1. Are residents guaranteed placement into higher levels of care once they become a resident?
2. Can most people “live out their days” in this community, or would one most likely need to move again someday?
3. What are the staff-to-resident ratios? Are those numbers the same at night?
4. Are staff available 24/7 for assistance with Activities of Daily Living (ADLs)?
5. Is there an RN on staff? How often is he or she there?
6. How often does this community instill pricing increases? What percentage are those increases?
7. Do the overall price increases include increases for the care charges, or are those separate?
8. How often are residents’ care plans reassessed?
9. What is the percentage of staff turnover?
10. Does the community do background checks on the employees?
11. Does the community offer a reliable backup generator?
12. How often are residents able to receive transportation to medical appointments?
13. Are there set mealtimes?
14. Are residents allowed to have a pet? If so, are there size limits? What happens if a resident is no longer able to care for their pet—can caregivers assist with that?
15. What kinds of activities are on the monthly calendar?
16. How often do the menus change?
17. For fire safety, are residents who are wheelchair-bound required to reside on the first floor? What is their fire policy?
18. Can I use my Long-Term Care Insurance policy (if applicable) in this facility?
19. How many days’ notice would one receive before a rent increase?
20. In what instances would a community evict a resident?
21. Is there a resident council in this community?
22. Is there a laundry room on each floor, and do care staff assist with doing laundry?
23. What kitchen appliances are included?
24. Does the community have safety features such as smoke detectors, alarms, sprinklers, handrails, grab bars, wide hallways and doors, a shower that doesn’t have anything to step over to get out of, an elevator with room in it for scooters, etc.?

Understanding Hospice, Palliative Care, Transitions and Curative Treatment



If you have been diagnosed with a serious illness which may limit your life expectancy, you have options. Health care is full of choices, but sometimes it is difficult to get a *clear picture* of what your choices really *are*, and how those choices may affect other areas of your health care.

We are here to help you make sense of those choices.

Situation	Is Hospice an option?	Is Palliative Care an option?	Is Transitions an option?	Is Curative Treatment an option?
"My physician says I have a life-limiting illness, but they say I do not qualify for hospice care"	No	Yes	Yes	Yes
"My physician says I have a life-limiting illness and they project that I have 6 months or less to live."	Yes	Yes	Yes	Yes

Hospice Care: Hospice is for people with a prognosis of 6 months or less to live, and they are no longer seeking curative treatment. Their priority is comfort.

Palliative Care: Palliative Care is for people struggling with the symptoms of a chronic illness, who would like the oversight of a physician. They may seek curative treatment for their illness. Their priority is symptom management *and* treatment.

Transitions: A Transitions program is a free program for anyone with a life-limiting illness. This is a *non-medical* program similar to case management, wherein a Transitions Coordinator can assist you in navigating the resources available to you within our community, and options for your illness. This could include obtaining caregiving, medical equipment or meal delivery. This could also include navigating placement in a facility or understanding insurance benefits.

Curative Treatment: The goal of Curative Treatment is to cure an illness or condition, or to delay disease progression even when a cure is not possible. An example of Curative Treatment is chemotherapy, radiation, or primary care service.

The main programs of ClearPath Healthcare are:

Hospice, Transitions, and Primary Care in the Home (which would be considered traditional "curative" healthcare). If you are not sure what your needs are, give us a call. We will find a Clear Path together.

This section is specifically for patients who are approaching the end of their journey and for the families supporting them.

1) What is Hospice?

At ClearPath Healthcare, we believe that hospice is a choice for patients who have a serious illness and who have decided it is time to focus on the quality of their lives. Hospice care is specifically designed for someone who has a referral from a doctor and a terminal diagnosis of 6 months or less to live.

2) How is Hospice paid for?

Hospice services are covered by Medicare, Medicaid, and most private insurances. We ensure no one is turned away because of ability to pay and that everyone has access to a dignified end-of-life journey free from financial burdens and stress.

3) Should I wait for my physician to initiate a hospice conversation?

One of the most common things we hear after admitting someone to our care is that they wished they would have sought out our help sooner. We encourage caregivers to discuss hospice at the first signs of a loved one's decline. Feel free to contact us for a free consultation. In our experience, people who have had time to understand all their treatment options (including hospice care) feel more confident and prepared for the future.

4) Where are the patients cared for?

ClearPath Healthcare cares for people where they live, wherever you call home.

5) Is all hospice care the same?

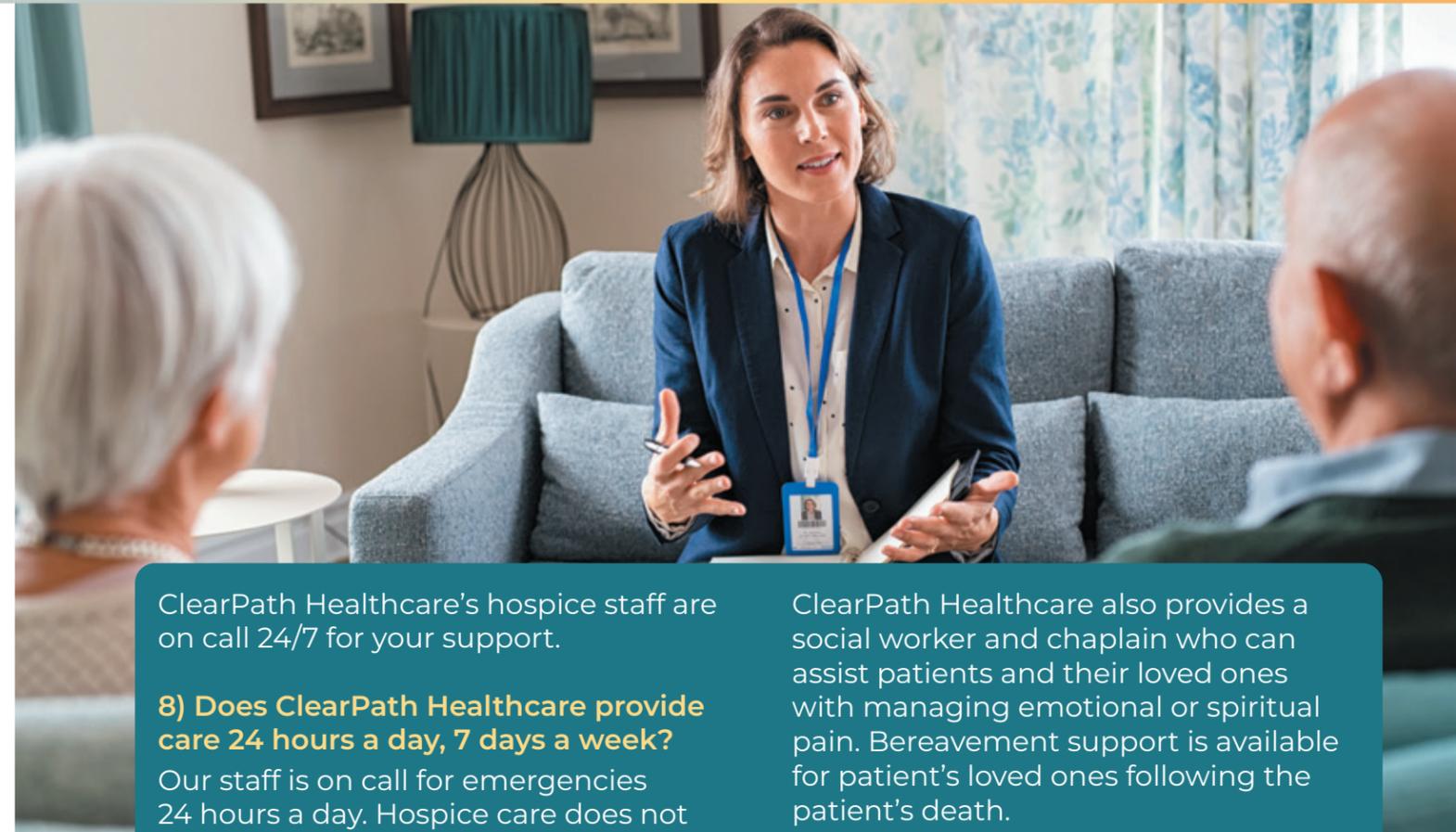
Medicare requires that certified hospices provide a basic level of care, but the quantity and quality of all services can vary significantly from one hospice to another. ClearPath Healthcare has been providing individualized, compassionate care to families in this community since 1979 and we pride ourselves on our high level of quality care. We have also been a nonprofit since then, in a world where more and more hospices are becoming for-profit businesses.

6) Can I go off hospice services?

Of course! At any time during a patient's care, they may opt to seek curative treatments and go off of hospice services. Also, if a patient's condition improves, and the disease seems to be in remission, they may be discharged from hospice. If, later, a patient wants to return to hospice care, we are here for them. ClearPath Healthcare has a Transitions program that is a free non-medical program if a patient does discharge from hospice services.

7) How many friends or family members will it take to care for me at home?

There's no set number. One of the first things we will do is prepare a patient's individualized care plan that will, among other things, address the amount of caregiving needed. The care plan will be routinely reviewed by our clinical team and amended as needs change.



ClearPath Healthcare's hospice staff are on call 24/7 for your support.

8) Does ClearPath Healthcare provide care 24 hours a day, 7 days a week?

Our staff is on call for emergencies 24 hours a day. Hospice care does not include a nurse in the home 24/7. Some of our patients who require more than can be provided in the home are safer and more comfortable in a nursing facility, where we can provide the same hospice services. Hospice does not provide caregiving.

9) Does hospice do anything to make death come sooner?

Hospice neither hastens nor postpones dying. Hospice is clinical care during the last months of life and through the dying process, enhancing the patient's quality of life and mitigating pain.

10) How does hospice "manage pain?"

Our hospice nurses and doctors are up to date on the latest medications and devices for pain and symptom relief.

ClearPath Healthcare also provides a social worker and chaplain who can assist patients and their loved ones with managing emotional or spiritual pain. Bereavement support is available for patient's loved ones following the patient's death.

11) Will medications prevent me from being able to talk or know what's happening?

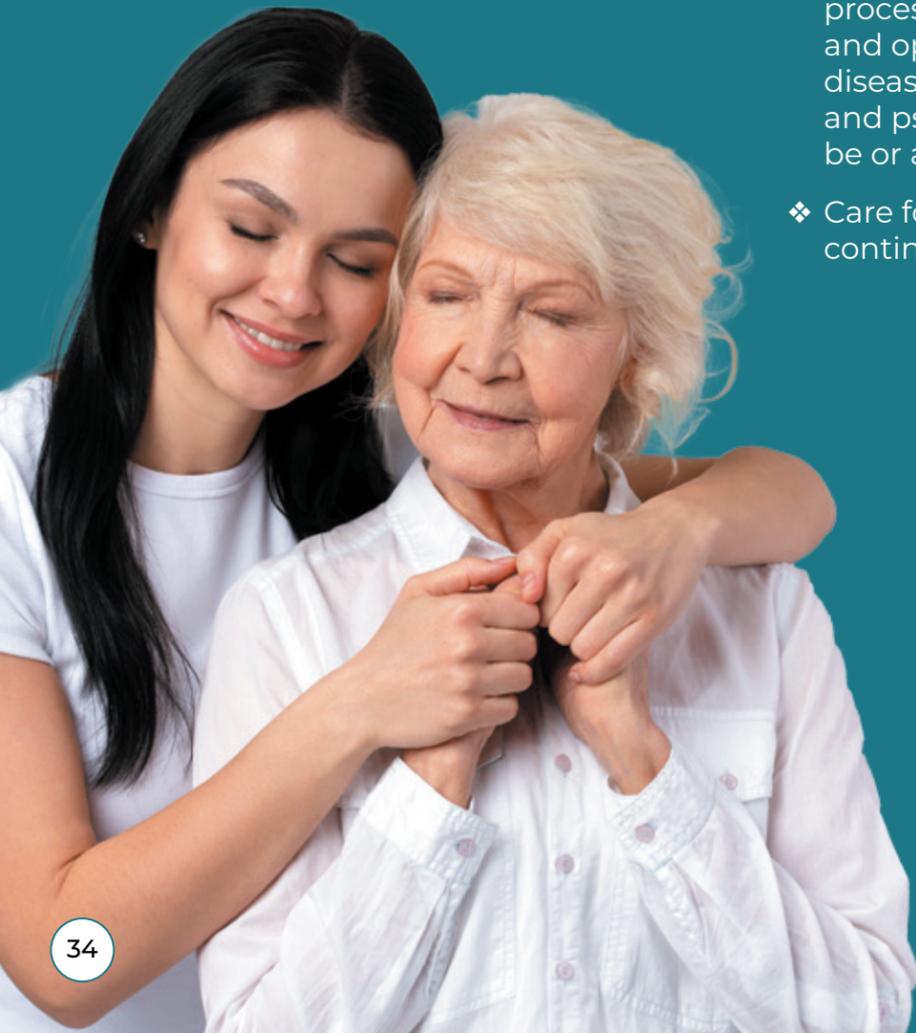
Usually not. We work with our patients to assess their goals in pain management; most people want to be as pain-free and alert as possible. By constantly consulting with our patients, we have been very successful at reaching this goal.

12) Is ClearPath Healthcare affiliated with any religious organization?

No. ClearPath Healthcare is a non-religious nonprofit healthcare organization. We celebrate your spirituality and provide spiritual counseling according to your wishes and your faith.

The ClearPath Philosophy

- ❖ ClearPath Healthcare is committed to the quality of life for its patients and their loved ones.
- ❖ We provide medical care that optimizes comfort and dignity and is consistent with patient and caregiver needs and goals.
- ❖ Patients have the right to a healthcare program which supports their choices.
- ❖ Dying is part of life. Hospice seeks to affirm and enhance quality of life.
- ❖ We offer our hospice patients specialized expertise in pain and symptom management which will help relieve their suffering. In hospice, the emphasis is placed on comfort.
- ❖ We use a team of qualified professionals and trained volunteers to address our patients' needs and to ensure their loved ones are supported.
- ❖ Death is a unique experience for each person which is rooted in cultural, religious and personal beliefs. These beliefs are respected throughout the course of care. We offer spiritual support to our patients, supporting the patient's belief system.
- ❖ We believe hospice should be a clinical resource to everyone, regardless of whether they are insured. We do not turn people away due to their lack of ability to pay.
- ❖ Each person touched by the dying process has a right to information and open communication about the disease process, and the physiological and psychological changes that might be or are occurring.
- ❖ Care for the patient's loved ones continues beyond death.



Specialized Comfort Programs



❖ Pet Peace of Mind Program

Keeping Companions Close. We believe that the bond between a person and their beloved pet is essential to comfort and healing. Our Pet Peace of Mind program provides support for hospice patients and their pets, including assistance with pet food, walking, and light veterinary care, ensuring no one has to choose between their care and their companion. If you are on hospice service, and you need assistance with your pet, please just let us know. We can help.

❖ Veterans Support Program

Dedicated Resources for Those Who Served. ClearPath Healthcare is proud to participate in programs that recognize and support our nation's heroes. We have a Level 4 We Honor Veterans certification through the National Alliance for Care at Home, which ensures that throughout the year, we honor our local veterans by offering events, resource groups, and specialized "pinning ceremonies" for veteran patients. Our services can help you navigate VA benefits and connect you with resources specific to veteran healthcare, ensuring dignity and honor in your care journey.

Bereavement refers to the period of mourning and grief following the death of a beloved person.

When a patient dies on ClearPath Healthcare's hospice service, *our commitment to the patient's loved ones continues* for at least 13 months following the patient's death. Our Bereavement Coordinator will contact bereaved caregivers, family and friends by mailings and by phone to assess their needs and offer support.

However, people do not need to be grieving someone who died on ClearPath Healthcare's hospice service to receive free grief support. ClearPath Healthcare does not turn anyone away who may need grief support. We offer grief support groups for adults twice per month at our location on 23rd and Highland, and our Bereavement Coordinator is also available for one-on-one or phone support as needed.

Taking Care of Yourself

Losing someone you love is very painful. After a significant loss, you may experience all kinds of difficult and surprising emotions, such as shock, anger, and guilt. Sometimes it may feel like the sadness will never let up. While these feelings can be frightening and overwhelming, they are normal reactions to loss. Accepting them as part of the grieving process and allowing yourself to feel what you feel is necessary for healing.

There is not a right or wrong way to grieve—but there are healthy ways to cope with the pain. Some ways to

decrease the physical and emotional wear and tear that grief can cause are:

- ❖ Good nutrition
- ❖ Regular sleep routine
- ❖ Physical exercise
- ❖ Paying attention to your needs
- ❖ Relaxation

Helping Others Help You

Often, friends and family would love to offer comfort and support but simply don't know how. The following are examples of ways they could help:

- ❖ Please call me. I probably will not have the energy to call you.
- ❖ Invite me to activities or meals. I doubt I will be able to come very often; please continue to ask.
- ❖ It is helpful to spend time with people who understand my need to repeat my stories over and over again.
- ❖ It is helpful to have friends that understand the journey of grief is an uneven road.
- ❖ The pain of grief is normal. Your tears and mine aid in my healing.
- ❖ Offer a home-cooked meal or just to go for a walk.

Myth: The pain will go away faster if you ignore it.

Fact: Trying to ignore your pain or keep it from surfacing will only make it worse in the long run. For real healing, it is necessary to honor your feelings and actively deal with them.

Myth: It's important to be strong in the face of loss.

Fact: Feeling sad, frightened or lonely is a normal reaction to loss. Crying doesn't mean you are weak. You don't need to "protect" your family or friends by putting on a brave front. Showing your true feelings can help them and you.

Myth: If you don't cry, it means you aren't sorry about the loss.

Fact: Crying is a normal response to sadness, but it is not the only one. Those who don't cry may feel pain just as deeply as others. They simply have other ways of showing it.

Myth: Grief should last about a year.

Fact: There is no right or wrong time frame for grieving. How long it takes can differ from person to person.

Common Responses to Grief

Some reactions you may experience:

- ❖ Shock and anger at your loss.
- ❖ Unwarranted hostile reactions to life around you.
- ❖ Survivor's guilt.
- ❖ Depression.
- ❖ Tightness in the throat or heaviness in the chest.
- ❖ An empty feeling in the stomach and loss of appetite.
- ❖ Restlessness (a need for activity) accompanied by an inability to concentrate.
- ❖ A feeling that the death isn't real, that it didn't happen.
- ❖ A sense of the loved one's presence. Perhaps expecting him or her to walk in the door at the usual time or thinking you hear a voice.
- ❖ Aimless wandering, forgetfulness and inability to finish things you've started.
- ❖ Difficulty sleeping or frequent dreams about your loved one.
- ❖ A tendency to assume the mannerisms or traits of your loved one.
- ❖ Anger at your loved one for leaving you.
- ❖ Not talking about your feelings of loss for fear that others will feel uncomfortable around you.
- ❖ A need to tell and retell and remember things about your loved one and the experience of his or her death.
- ❖ Crying at unexpected times.

These are all natural and normal grief responses. Again, your experience will be unique to you. If you become concerned with your grief experience, please let our Bereavement Department know.

Children's grief is unique. They may or may not be able to verbalize their grief. They may or may not repress their feelings or express them through their behavior. They may not appear to be grieving, but they are.



- ❖ Be direct, simple and honest. Explain truthfully what happened in words a child can understand.
- ❖ Support and respect the child's emotions and reactions. Crying or not is normal.
- ❖ Accept the emotions and reactions the child shares.
- ❖ Find time to listen.
- ❖ Allow children to have their own feelings.
- ❖ Be patient. Children need to hear "the story" and will repeat their questions until they fit the experience into their lives.
- ❖ Maintain as much stability in the child's life as you can.
- ❖ Allow the child to decide about participating in the family rituals, e.g. visitation, the funeral and socializing

after the funeral. Be sure to explain in advance what will happen and what they will see.

Some Behaviors of Grieving Children

Children express grief in a different way than adults. They tend to move in and out of intense feelings, rather than sustaining high levels of one emotion for long periods of time. Some natural responses a child may have to the death are:

- ❖ "Who will take care of me now?"
- ❖ "My mommy didn't really die."
- ❖ "Why did God let my friend die?"
- ❖ "I feel sick just like my sister/brother did before (s)he died."

Children often believe that something they said or did may have caused the death. If you are worried about your child, contact our Bereavement Department for resources in our area.

Ideas for the Holidays/Special Occasions

Holidays and anniversaries are times when people remember important and usually happy occasions and look forward to the future. If there has been a death in the family, this can also be a time that stirs up emotional wounds. Feelings of isolation and loneliness can magnify.

- ❖ Decide what activities you want to participate in, who you want to be with during that time, and what you want to do. You have choices.
- ❖ Discuss your choices with others who will be affected by what you decide.
- ❖ Acknowledge the absence of your loved one. Suggestions: Light a candle in their honor, place their picture in a place of honor or dedicate a prayer in their name.
- ❖ Be gentle with yourself. All wounds take time to heal. The holiday season can be part of your journey.

How We Can Help

ClearPath Healthcare offers a variety of programs to help you through the grieving process.

- ❖ **Individual Grief Counseling:** One-on-one support is offered on a limited basis to help you work through intense emotions and overcome obstacles to your healing.
- ❖ **Grief Support Group:** Sharing your sorrow with others who have experienced similar losses can help.
- ❖ **Bereavement Companions:** This is a volunteer support program available to ClearPath Healthcare family members who are alone and who would like companionship.

- ❖ **Camp Sunrise:** Our annual grief camp for children. This weekend overnight camp offers a child a safe and supportive environment in which to better understand their grief. Camp Sunrise started in 1998, and it is every 3rd weekend in June. There is no charge for a child to attend Camp Sunrise; it is a free program of ClearPath Healthcare. Just give us a call at 541-548-7483 to learn more about this year's Camp Sunrise.
- ❖ **Resource Library:** Books and videos on a variety of subjects related to your healing are available for checkout in our Redmond office.
- ❖ **Community Referrals/Resources:** Contact the Bereavement Coordinator for referrals to community resources to fit your needs.

Remember grief is a roller coaster. It involves a wide variety of emotions and a mix of good and bad days. Even when you're in the middle of the grieving process, you will have moments of pleasure or happiness. It is more important than ever to take care of yourself. The stress of a major loss can quickly deplete your energy and emotional reserves. Looking after your physical and emotional needs will help you get through this difficult time.

On Grieving for Adults

- The Bereaved Parent - *Harriet Sarnoff Schiff*
- The Courage to Grieve: Creative Living, Recovery, and Growth Through Grief - *Judy Tatelbaum*
- Good Grief: A Constructive Approach to the Problem of Loss - *Granger E. Westberg*
- A Grief Observed - *C.S. Lewis*
- The Grief Recovery Handbook: The Action Program for Moving Beyond Death, Divorce, and Other Losses - *John W. James, Russell Friedman*
- Healing After Loss: Daily Meditations for Working Through Grief - *Martha W. Hickman*
- How Can I Help?/What Will Help Me? 12 Things to Do When Someone You Know Suffers a Loss/12 Things to Remember When You Have Suffered a Loss - *James E. Miller*
- How to Go On Living When Someone You Love Dies - *Therese A. Rando*
- How to Survive the Loss of a Love - *Peter McWilliams et al.*
- Living When a Loved One Has Died - *Earl A. Grollman*
- A Time to Grieve: Meditations for Healing After the Death of a Loved One - *Carol Staudacher*
- The Worst Loss: How Families Heal From the Death of a Child - *Barbara D. Rosof*
- The Year of Magical Thinking - *Joan Didion*

On Grieving for Children & Teens

- The Fall of Freddie the Leaf: A Story for All Ages - *Leo Buscaglia*
- Fire in My Heart, Ice in My Veins: A Journal for Teenagers Experiencing a Loss - *E. Samuel*
- Gentle Willow: A Story for Children About Dying - *Joyce C. Mills*
- Help Me Say Goodbye: Activities for Helping Kids Cope When a Special Person Dies - *Janis Silverman*
- Love You Forever - *Robert Munsch, Sheila McGraw*
- Michael Rosen's Sad Book - *Michael Rosen*
- The Next Place - *Warren Hanson*
- Sad Isn't Bad: A Good-Grief Guidebook for Kids Dealing With Loss - *Michaelene Mundy*
- Straight Talk About Death for Teenagers: How to Cope with Losing Someone You Love - *Earl A. Grollman*
- Tear Soup - *Pat Schweibert, et al.*
- The Tenth Good Thing About Barney - *Judith Viorst*
- The Way I Feel - *Janan Cain*
- When Dinosaurs Die: A Guide to Understanding Death - *Laurie Krasny Brown, Marc Brown*
- When Someone Very Special Dies: Children Can Learn to Cope With Grief - *Marge Heegarrd*

Immediate Hospice Patient Reference

Please call 541-548-7483 if you need anything regarding your care, day or night.

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My social worker is:

My Chaplain is:

My Hospice Aid is:

My volunteer is:



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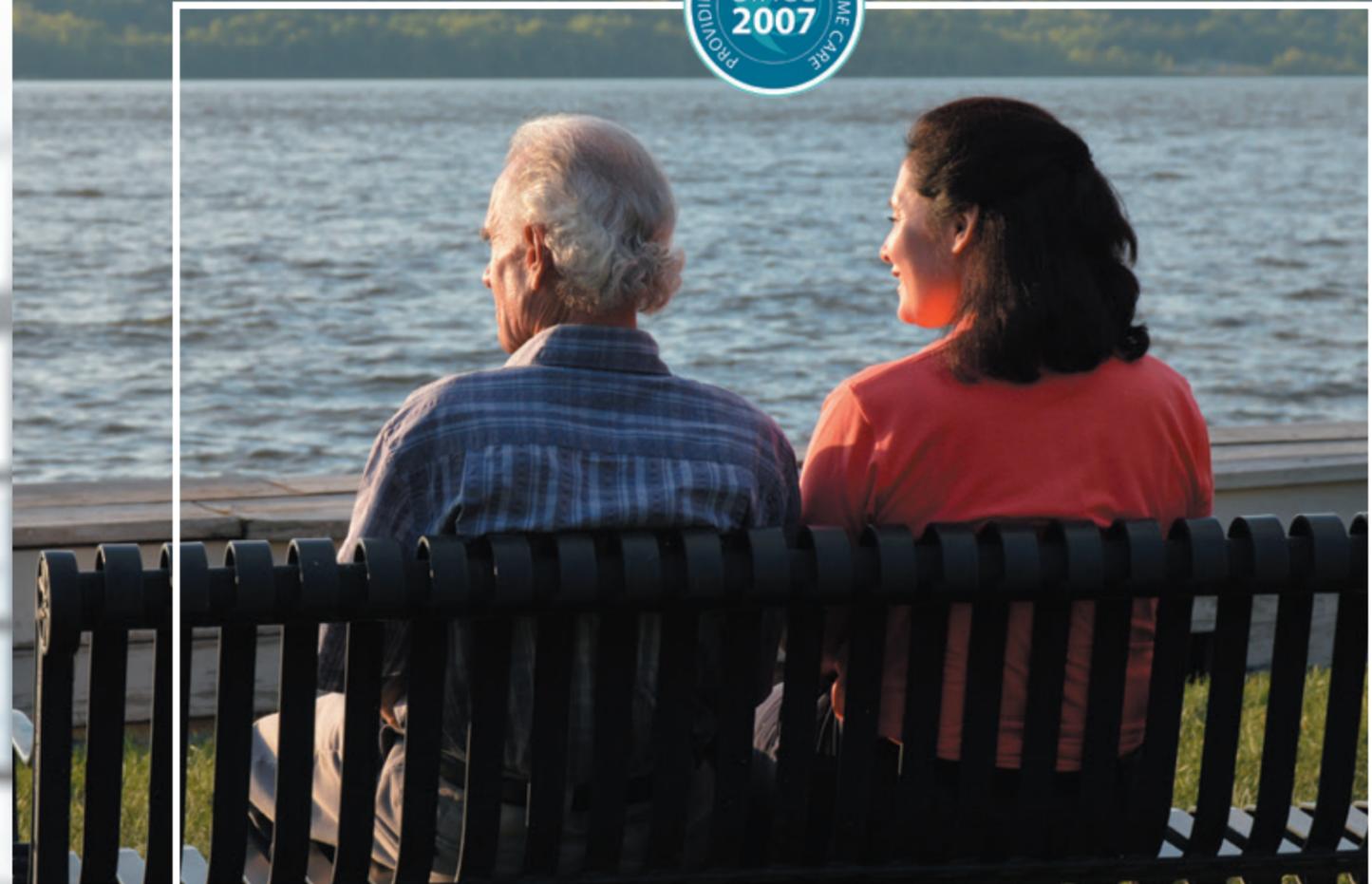
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Collin was born and raised in Central Oregon. He graduated from Crook County High School in 2002 as a valedictorian. He graduated summa cum laude from SUNY Oswego in New York state with a BA in Public Relations and cum laude from Willamette University College of Law in 2017.

He and his wife are raising their two daughters in Redmond. They enjoy hunting in the Ochocos, backpacking, hiking, and snowboarding, and Collin has a passion for fly fishing. Collin loves working with organizations that give back and help Central Oregon.

Collin proudly serves all of Central Oregon, offering **FREE consultations*** and **NO retainer fees*** in the areas he specializes in. * some exclusions apply

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