

CARELINES

A Quarterly Newsletter Published for the Friends & Families of Caldwell Hospice and Palliative Care, Inc.
Fall 2011

Caldwell Hospice Awarded Grant for Suicide Support Training

Caldwell Hospice and Palliative Care has received partial funding from the Hogan Family Foundation for a "Suicide: Risk, Intervention, and Aftermath" training program. Planning began almost two years ago for a way to understand the losses and serve the needs of family members and loved ones after a death by suicide, according to Bereavement Coordinator Emily Pitts.

Economic instability has affected just about everyone in Caldwell County in one way or another. When people experience discouragement, believing they cannot go on living, tragic losses of life result. Although suicide is not caused by one single factor, the intense stress created by unemployment, inability to make ends meet, and looming foreclosure can increase the feelings of worthlessness and hopelessness.

Within the past four years, the Caldwell Hospice counselor and bereavement coordinator, together, have assisted approximately 45 patients, family members, and individuals from the community facing suicidal thoughts and/or dealing with the trauma that follows when a loved one has taken his or her life, averaging 10-to-15 suicide-related cases per year. In talking with professionals in private practices, mental health agencies, hospitals, and law enforcement, they have recognized an increase and are witnessing this devastating occurrence in our community.

Historically, the negative reactions to mental illness and suicide have affected support services and insurance reimbursements for treatments negatively. Successful suicide prevention requires that people in the community get involved with individuals and families affected by suicide—people who can recognize at-risk individuals and work with families experiencing emotional turmoil, unanswered questions, and an emptiness that is difficult to address.

Caldwell Hospice will focus its training on the following groups and individuals:

- Local ministers because they need to understand suicide in order to support people at heightened

risk for suicide and help to heal people who have struggled with suicide or survived the suicide of someone they love.

- People in the community through Caldwell Hospice's "Understanding Your Suicide Grief" support group, designed to guide progress toward hope and healing in a safe, non-judgmental, and non-threatening environment.
- Caldwell Hospice staff members.

By establishing its suicide prevention program, Caldwell Hospice can increase the professional skills of educators, law enforcement, mental health professionals, social workers, clergy, medical professionals, administrators, and volunteers, as well as the personal coping skills of people within the community through the ongoing support group.



Pictured above: A sample of current suicide support materials; Bereavement Coordinator Emily Pitts reviews suicide training information.

From the Director's Chair: A Report to the Community

I always like to share good news! That's why I am very proud to let you know that Caldwell Hospice and Palliative Care ranks among the top hospices in the country.

According to *Family Evaluation of Hospice Care* (FEHC) quarterly survey results by the National Hospice and Palliative Care Organization (NHPCO), Caldwell Hospice is among the top 10 percent of all hospices nationwide in 18 of 22 quality indicator results. In 14 of the quality indicators, we recorded a perfect score.

While we always are looking to improve quality, we should be very pleased with these results. They acknowledge our outstanding and dedicated staff and reaffirm our commitment to staff development and ongoing continuous quality improvement.

The report was developed by NHPCO with input from hospices that participate in the FEHC survey. Researchers and experts in quality measurement at the University of Pennsylvania and Brown University's Center for Gerontology and Health Care Research collected and analyzed the data.

The overall quality of care given to our patients during the second quarter of 2011—as perceived by their primary caregivers—was 96.2, compared to 81.1 for hospices in North Carolina and 75.6 for hospices across the United States. This score represents the percentage of respondents who rated the quality of care as "excellent."

The composite score measures a hospice's overall performance, with a single scoring range from 0 to 100. Our composite in the second quarter of 2011 was 90.9, compared to 87.7 in North Carolina and 86.6 nationwide.

Domain performance represents a hospice's performance in four key areas, as listed below. This performance is presented as a "problem score," with zero indicating no problems. You will note that we performed exceptionally well in this measurement. Below are our domain performance numbers, followed by North Carolina and national figures:

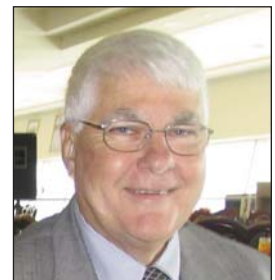
- Coordination of care: Caldwell (0.0), N.C. (6.3), U.S. (7.3)
- Attend to family needs: Caldwell (0.0), N.C. (4.2), U.S. (5.1)
- Provide information about symptoms: Caldwell (0.0), N.C. (4.0), U.S. (4.9)

- Inform and communicate with patients: Caldwell (2.0), N.C. (13.2), U.S. (16.0)

Thanks to our staff for making such a positive report possible. Also, I am grateful to volunteers, board members, healthcare providers and supporters throughout the community. By working together, we are able to provide the highest quality of care in a loving, compassionate atmosphere for the terminally ill, their caregivers and families.

Finally, all of us extend a special thank-you to Jimmy Hemphill, who is retiring from the Board of Directors after 25 years of service. He was a member of our first Caldwell Hospice Board in 1982, serving for 10 years, and then re-joined the Board in 1996 and served until this year.

Jimmy has been a faithful and active supporter of Caldwell Hospice, and his contributions are too numerous to list. However, I will say that he had a gift for selling ACC Basketball Luncheon tickets! He has been an integral member of the Caldwell Hospice family for 25 years, and we will miss his contributions.



Photos (top to bottom): Jimmy at Nine Who Care awards luncheon, 2005; with Dr. Belk and Avis Corpening at opening of Granite Falls office, 2006; with Board members at CHPC's Rededication Ceremony, 2005.

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A Moment with Dr. Robert Belk: Living Will and Health Care Power of Attorney



Once a year, I write about **advance directives**, an important topic that people don't want to discuss. Most physicians try to educate patients and family members about treatment goals and possible burdens that result, but individuals should decide what an acceptable quality of life is for them. If you have not prepared a written plan that states the kind(s) of health care treatments you would want (or NOT want), if a sudden accident or illness left you unable to express your decisions, please keep reading.

1. The advance care planning goal is for you to live well, in a meaningful way, for as long as you live.
2. Think about your current health and prepare for future changes: a healthy person could have an accident; a person with a chronic illness could see the condition worsening; a terminally ill person could begin thinking about stopping some medical procedures or medications.
3. Consider where you might receive the care you need: at home by a family member, a nursing home or assisted-living facility, a hospice patient care unit, a hospital, etc.
4. Think about what brings joy and meaning to your life; what religious or spiritual beliefs support and guide you; what makes life worth living—being conscious and aware of what is happening around you? Being able to recognize and communicate with family and friends? Reading or listening to music?
5. Start talking with those you love: "I want to tell you some ideas I have and hear your thoughts, too."
6. Talk with your doctor. It is important to discuss your current health and your wishes for the future.
7. Treatment decisions at the end of life can be hard, even with advance directives. Consider getting a second medical opinion, talking with close friends or clergy, etc.
8. In your advance care plan, describe your wishes for future care and guide others who may need to make decisions. You may review, change, or update your plan over a period of years because you change your mind over time.
9. Advance directives are used **ONLY** when you cannot make or express health care decisions. If you are too ill to make decisions when you enter a hospital, they will alert your doctor that you have prepared for this. Your wishes will be explored in relation to your current health problem, including your diagnosis and treatment options. Your physician will ask your Health Care Power of Attorney (HCPOA) to help decide what treatment you would want.
10. You may include comfort care (attention to physical, emotional, social, and spiritual needs) in your advance care plan.

(Source: *Isn't It Time We Talk?* workbook, © 2002, The Carolinas Center for Hospice and End of Life Care)

In the **Living Will**

(Advance Directive for a Natural Death), you can express your wishes about life-sustaining treatment if you become terminally or irreversibly ill. You state that you do not want your life to be prolonged by extraordinary means if you have a terminal, incurable condition or are in a persistent vegetative state. In most states, it requires the signature of two witnesses (not related to you) and a notary public. It becomes effective when you can no longer direct your health care and are not expected to recover.

The Health Care Power of Attorney (HCPOA, Medical Power of Attorney, Health Care Proxy or Agent, Health Care Surrogate, Durable Power of Attorney for Health Care): This legal form identifies who YOU want to make the decisions about your medical care, **ONLY** if you are unable to make your own medical decisions. Your agent can be any adult you choose, **EXCEPT** your health care provider. This person has the same authority you would have to hire and fire health care providers; admit or discharge you from a health care institution; consent to or refuse tests or treatments, and more.

Be sure to talk with your family members—especially the person who will be your HCPOA—clearly and honestly before you decide. Be sure that your HCPOA will do what you want if you are unable to choose for yourself. People should make their own decisions concerning end-of-life issues, express these wishes to their family members, and—most importantly—put these decisions in writing.

Once these documents are completed, give copies to your doctor, your hospital (if you have a record on file), your health care agent(s), your family member(s), and yourself (keep your copies in an easy-to-find place).

Other important forms: Do Not Attempt Resuscitation Order (DNR) is a physician's order that states the patient does not wish to receive CPR. The North Carolina General Assembly has expanded these orders in the MOST (Medical Orders for Scope of Treatments); this document gives patients a choice of whether or not to receive CPR; names the medical intervention they do wish to receive, such as the wish to receive antibiotics, medically administered fluids, and nutrition, and must be reviewed annually.

Note: The Caldwell Partnership for End-of-Life Care (754.0101) holds a Living Will Clinic the second Thursday of each month at the Senior Center (758.2883). You can fill out the forms and have them notarized. For more information, visit the Caring Connections website (www.caringinfo.org).

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May I take this opportunity to express my sincere appreciation for the wonderful care you gave to our loved one, our whole family, and many friends who came to offer us their support. Your special ways and generous heart made a beautiful difference. We are so blessed to have your facility available for us.—a Caldwell Hospice family member

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Thank you for being there in the day, in the night, and any time we needed you. Your comforting words, loving touch, and unbelievable staff made the last part of our loved one's journey more bearable. From the bottom of our hearts, we appreciate you.—a Caldwell Hospice family member

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Dear Caldwell Hospice staff and the guy who brought out the bed...thank you from the bottom of my heart for all your acts of love and kindness....You certainly made the passing of my loved one a "beautiful experience," as she transitioned into the loving arms of our Lord.—a Caldwell Hospice family member

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Eugene Wilson
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Evelyn Wilson
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Methodist Church
Bemis Contract
Southeast Employees
Berea Advent
Christian Church
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Christian Church,
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Church, Round Table
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First Wesleyan Church

Thank you so much for the care that you gave to my loved one while she was there. Thank you for making her as comfortable as possible, for the love and compassion that you showed to her, for comforting her the best that you could, for all the comfort and kindness shown to the family. You are always going to be in our hearts as a blessing.—A Caldwell Hospice Family Member

Contributions

God answered our prayers when our loved one was put in your care....She was treated with great respect and dignity, which meant so very much to us. "Hospice" was a word we did not want to hear prior to our loved one's illness, but you all were wonderful....We appreciate everything you did for our loved one....—a Caldwell Hospice family member

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 Friendship Baptist Church, Auditorium Class
 Girl Scout Troop 10141
 Happy Valley Ruritans
 Harrisburg Baptist Church
 Hibriten High School Holy Trinity Lutheran Church
 Hudson United Methodist Church
 Hudson United Methodist, Church Circle #2
 Indian Hills Baptist Church
 Krispy Kreme Doughnuts
 Lakeview Baptist Church
 Lenoir Rotary Club
 Little Rock Baptist Church
 Miller Hill Baptist Church, Baptist Women #1
 Mt. Zion Baptist Church
 North Catawba Baptist Church
 Pendry's Lenoir Funeral Home & Crematory
 Philadelphia Lutheran Church
 Prayer Mountain USA
 Sam's Club 6355
 Sawmills Community Optimist Club
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 Shaire Center
 St. James Episcopal Church
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 Treasures
 WPCC Human Services Club

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 Yadkin Baptist Church WMU
 Zion United Church of Christ
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 Calvary Baptist Church, Married Adult Class
 Cedar Rock Baptist Church
 Center Grove Baptist Church
 Central Baptist Church
 Clark's Chapel Baptist Church, Adult Ladies Class
 Clover Baptist Church, Andrew Class
 Clover Baptist Church, Berea Class
 Concord Baptist Church
 Concord Baptist Church, Mom Curtis & Helen Barlow Circle
 Dry Ponds Baptist Church
 Dudley Shoals Baptist Church
 East Flat Baptist Church
 Emmanuel Baptist Church
 Faith Baptist Church
 First Advent Christian Church
 First Advent Christian Church, Hattie Steele Circle
 First Baptist Church, Archdale
 First Baptist Church, Granite Falls
 First Baptist Church, Hudson, Pairs & Spares Class
 First Baptist Church, Rhodhiss
 First Baptist Church, Whitnel

First United Methodist Church, Granite Falls, Ruth Bible Class
 Flemings Chapel Baptist Church, Adult Men II Class
 Friendship Baptist Church, Adult Ladies II Class
 Grace Chapel United Methodist Church
 Grace Chapel United Methodist Church, UMW
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 Livingston Memorial Baptist Church
 Mountain Grove Baptist Church, Living Word Class
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 St. Stephen's Lutheran Church
 Temple Hill Baptist Church
 Temple Hill Baptist Church, Vera Link Class
 West Lenoir Baptist Church
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 Yadkin Baptist Church, Currently Young Circle
 Yadkin Valley Baptist Church, Golden Nuggets

*Caldwell Hospice and Palliative Care, Inc., gratefully acknowledges memorials and contributions received between 01 April and 30 June 2011. Please notify us if we have omitted a donation from this listing. Contributions received after 30 June 2011 will be listed in our **Winter 2011** issue.*

Newsletter mailing list policy. Carelines is published four times a year. Each person who makes a contribution to our hospice during the six months prior to a mailing will receive the next two issues. Individuals may ask to be placed on our "do not remove" mailing list; in that case, they will continue to receive the newsletter every quarter.

United Way Contributors

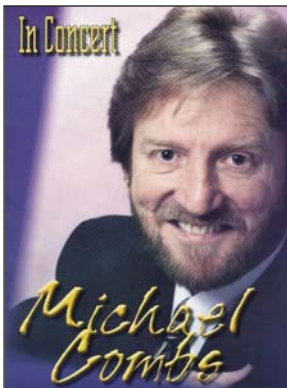
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Caldwell Hospice and Palliative Care, Inc., gratefully acknowledges the individuals who designated our hospice to be the recipient of their 2010-2011 United Way contributions. We appreciate their kindness.



**Third Annual
American Gospel Jamboree
October 8, 2011— 7 p.m.
JE Broyhill Civic Center
to Benefit
Caldwell Hospice and Palliative Care**



Steve Warren



Karen Peck & New River

1913 Hickory
Blvd., SE,
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Box Office:
828.726.2407



David Johnson
& Delta Dawn

Volunteers: Caldwell Hospice Needs a Few Good Men

The above headline may seem surprising, if not sexist, at first glance. However, it makes clear one of Caldwell Hospice's very real volunteer needs: men.

Approximately half of Caldwell Hospice's patients are men, and some of them would prefer to spend time with male volunteers. "Some patients need male contact, with fishing, etc. as conversation topics," said David Eggers, a retired school principal and six-year Caldwell Hospice volunteer. "We can relate to them."

It doesn't mean, as he was quick to point out, that women can't fish or drive trucks—it's simply that men may find it easier to talk with another man about the illness, the medicine they're taking, or their concerns about the changes they're experiencing.

John Dockery, another retired school principal, is in his seventh year as a Caldwell Hospice volunteer. He has visited with more than a dozen patients, all men. "Male patients want male volunteers," he said. "They really appreciate talking to a man."

Recalling the time spent and the relationship that developed with a patient he served for almost two years, Dockery told about driving the patient and his wife to the grocery store. While she went inside to shop, Dockery and the patient would sit in the car and talk. Dockery drove the patient to doctors' appointments, chemotherapy treatments, and to the emergency room once.



Pictured (L to R): Volunteer John Dockery at Volunteer Banquet, 2009; David Eggers at Open House for Robbins Center, 2010.



The patient had a fig tree in his yard and would pick figs from his wheelchair. Smiling, as he remembered the scene, Dockery said he still has figs in his freezer, given to him by the patient. Friendships are a benefit of the patient-volunteer relationship. Since the patient's death, Dockery and the family have kept in contact.

Eggers prefers to work with one patient at a time and give his full attention to that individual's needs and interests. For one patient, it was going fishin'; they drove through the field and pulled up close to the bank, set up two chairs, and spent the day fishing. It was a good day, he said, even though they only caught a couple of fish.

With another patient, "We'd get in my truck and ride through the back roads to see deer," Eggers said. One day, he drove the patient to the Bass Pro Shop in Concord and spent a half day, wheeling him around in his wheelchair.

Volunteers can serve patients in many ways, whether taking them to appointments or just providing companionship. Recalling one patient, Eggers said, "I think he enjoyed the things I did for him—we took his mind off things."

The time commitment may discourage some potential volunteers, but Dockery pointed out that giving one hour a week is not too much to ask.

The 12-hour volunteer training program at Caldwell Hospice "is as good as any I've seen, even from my years in teaching," Dockery said. No one is obligated to join, "and it's valuable whether people decide to be volunteers or not."

Would-be volunteers may be reluctant to befriend someone who is at the end of life. "Sadness will be part of volunteering—it's natural," Eggers said. "Don't let that discourage you from volunteering because way more joy awaits you."

Caldwell Hospice cares about its volunteers, as both Dockery and Eggers pointed out. "The volunteer coordinator never gives you more than you can handle," Eggers said. Following the death of his most-recent patient, Eggers may take a break from patient-family assignments, doing some maintenance work at Caldwell Hospice's two facilities, instead.

Asked about suggestions for appealing to men, Dockery said that working with patients can "help you deal with your own situation some day. You will gain more from patients than you give."

Eggers said, with a smile, "Be man enough to do it—this is not a man doing a 'woman's job'—there is a real need here."

Caldwell Hospice has scheduled a volunteer training workshop: October 11 and 13, 5:30 to 8:30 p.m., and October 15, 8:30 a.m. to 4:30 p.m., in the Wilson Meeting Room, at 902 Kirkwood St., NW, Lenoir. Lunch will be provided for the Saturday session. Participants will gain an

(continued on page 12)

Healing with Pen and Paper

Each person's grief experience is different, and writing journal entries is one method we use in counseling to bring about healing. Writing allows clients to attribute meaning to life experiences. It can be a powerful outlet for emotional expression and can give people insight into their lives. If they can identify, and eventually change, their behavior patterns, it can be a transforming experience.

One of my bereavement clients allowed me to read her journal entries—and she has agreed to share her experience with each of you in the eloquently expressed paragraphs which follow. Through her words, you'll feel the pain of her loss and the power of what our Caldwell Hospice team members can do to bring about healing. —Caldwell Hospice Counselor Jessica Hatton



As I sit underneath a mighty Elm tree, shrouded by my daddy's love, I open a remembrance book in my mind and visit the past again. Through the book of my life, I turn the pages, falling faster and faster back in time. The clock chimes. Abruptly, the page stops and I land beside my mother's bed. She is in the intensive care unit in the hospital.

The date is December 7, 2010. The time is 7:00 p.m., and the doctor is telling me, "Your mother is dying. We need to remove the breathing machine. Do you want me to call Hospice?"

I reply, "Yes!"

Little did I know that six hours later my mother would be gone. My mother died December 8, 2010, at 1:00 a.m. In my whole life, I never embraced the moment until that day: the moment of feeling alone. Before, when I was facing a loved one's death, I was wrapped with my mother's comfort. Now, she is gone!

My sister was not with me because she has heart problems. She lives in West Palm Beach, Florida. Her doctor tells her, "Peggy, you may not travel or

someone may be planning your funeral." For that reason, she was not by my side, physically. However, I could feel her with me, spiritually. She and I are the last two people in our immediate family circle. Thoughts are swirling through my mind. One thought shouts, "What will I do if my sister dies, also?" At that moment, I embraced the feeling: I am alone!

Telling the doctor to call Caldwell Hospice & Palliative Care turns out to be the best decision that I have made during my mother's death. The staff stays with me through the valley of the shadow of death in my mother's eleventh hour.

I learn during that time that I have companions for my journey. Their lamps are full of oil and they carry the light into my darkest hour.

After my mother's death, I took advantage of the grief counseling offered by Ashewood Grief and Counseling Services. I recommend counseling to anyone who has lost a loved one. During my sessions, I learned that, throughout my life, I had made choices even when I thought I did not have a choice.

Also, I was challenged to dig through the debris of broken dreams, the rubble of failed relationships, and the valley of the shadow of death in order to give a voice to my pain. The process was very painful and slow. The end result was healing, both physical and spiritual.

After the sessions were completed, I can say, "Thank God for Caldwell Hospice and the angels of mercy that I have encountered within my journey." Today, I see God directing my footsteps and Caldwell Hospice inspiring my life. I see myself giving back to the community by doing some volunteer work at Caldwell Hospice and Palliative Care.

Ashewood Grief and Counseling Services, 1002 Ashe Avenue, Lenoir, will host a four-week journal-writing workshop on Monday afternoons in November—7, 14, 21, and 28—from 1 to 2:30 p.m. Counselor Jessica Hatton and Communication Specialist Pam Hildebran will lead the group.

Anyone in the community who has experienced the loss of a loved one is encouraged to participate by sharing their experiences, encouraging each other in the group, and putting their feelings onto paper.

For more information or to sign up for the four-week workshop, call 754.0101.

(continued from page 10)

Volunteer News

understanding of the hospice philosophy, family dynamics when someone is dying, safety procedures, best responses to dying patients' wishes and the wishes of their families, and other practical subjects.

For more information, call Volunteer Coordinator Brittany Bonn at 754.0101.

Welcome to our new volunTEENS. Ten teenagers completed Caldwell Hospice's volunTEEN training in July. They learned about the many ways that teenagers can enrich the end-of-life experience of hospice patients.

Approximately 70 teenagers, 14 to 17 years of age, volunteer for Caldwell Hospice through local high schools. Some of them visit resident-patients in long-term-care facilities each month, create crafts for holidays and other special occasions, help with landscaping, office work, and patient care unit

tasks at both the Lenoir and Hudson facilities. To learn more about volunteering, contact Caldwell Hospice's volunteer office at 828.754.0101.



The new volunTEENS are (standing, L to R) Avery Stewart, Kaelin Bowman, Shelby Tapper, Stephanie Nelson, Desmond Johnson, Cayla Carroll, Arizona Johnson; and (seated, L to R) Grace Severt, Adina Jan, and Carrie McNeil.

Caldwell Hospice Names Above & Beyond Recipient

Rhonda Radford, a Lenoir HealthCare licensed practical nurse with 20 years of nursing experience, was named as Caldwell Hospice and Palliative Care's Summer 2011 Quarter *Above & Beyond* recipient.

Ms. Radford was praised for "facilitating communication about end-of-life care and sharing her hospice experiences with patients and families to help them understand how Caldwell Hospice's team can help them at the end of life."

"She is a very caring individual, and we are happy to salute her work," Caldwell Hospice Public Relations and Marketing Coordinator Doug Hinson said, as he presented the award.

Caldwell Hospice employees and volunteers nominate area long-term-care facilities' employees

who provide support to resident-patients, their families, and Caldwell Hospice staff members. The award is presented quarterly.



Pictured (L to R): Mirana Lambert, Lenoir HealthCare's director of nursing; Rhonda Radford, LPN, Above & Beyond recipient; Doug Hinson, Caldwell Hospice's public relations and marketing coordinator; and Nancy Wallace, Caldwell Hospice's facilities team leader.

2011 Wish List

Snacks (ind.-size) for patients' families
Ind.-size cereals & soups;
instant oatmeal or grits
Applesauce
Artificial sweetener
(*Equal*, *Sweet 'n' Low*)
Dish cloths, dish towels
(light colors)
Paper towels
Napkins

Aluminum foil
Plastic wrap
Storage bags (qt. & gal.)
Coffee (cans, regular & decaf)
Bottled water
Styrofoam coffee cups
(8-oz. size)
Solo cups (16-oz. size)
Paper plates and bowls
Plastic spoons and forks

Large boxes of tissues
Baby wipes, unscented
(refill packs)
Liquid soap (8-oz. bottles, etc.)
Lotion (ind. size)
Deodorant (ind. size)
Toothpaste (travel size)
Mouthwash
Nail clippers
Hair brushes

Pledge dusting wipes
Mr. Clean Magic Erasers
Amazon.com gift cards for teen/children grief books, music, etc.
Music CDs (instrumental, gospel, inspirational, etc.)
Disposable cameras for patients and families at Stevens and Forlines patient care units.

Board of Directors Spotlight: Deborah Murray



Photos (L to R): Deborah Murray in official News-Topic portrait; singing carols with CHPC "as needed" employee Barbara Weiller at CHPC Christmas lunch; sharing in recognition of CHPC nurse Dottie Metzger's Caldwell County's favorite nurse award.

Deborah Murray is right where she needs to be. The Atlanta transplant left a 25-year career in the newspaper business, including five years as News-Topic publisher, to serve as Caldwell 20/20's president and CEO.

Murray moved to Granite Falls in 2004 when she became the *News-Topic* publisher; even before leaving Georgia, she received a letter from the late John A. Forlines, Jr., welcoming her and paving the way for her eventual membership on Caldwell Hospice's Board of Directors. "I didn't expect to find such a mentor, such a champion," Murray said. She hopes to model his concern and support as much as possible.

"I had respected hospice as an organization for many years," Murray said, "but in Caldwell County, the bar is raised and hospice care is accessible to everyone. There's an expectation that it's here if you need it." She marveled at staff members' genuine commitment to providing quality care and compassion for every patient and family in what has to be the hardest time in their lives.

As a Caldwell Hospice board member, Murray serves on the personnel/nominating committee. In addition, she serves on the Economic Development Commission and Chamber of Commerce boards, is vice-chair of the CCC&TI Foundation and a Caldwell Memorial Hospital trustee.

"I always had a heart for community service," Murray said. Caldwell 20/20's purpose, she said, is to help this community succeed in a global economy. Caldwell County has endured hard times, as the manufacturing jobs left and its unemployment rate jumped from two percent in 1980 to 17 percent in January 2010. Now, the young people (18-34 years old and their small children) are

leaving the county at an increasing rate to find work and security.

20/20 focuses on holistic economic development by building local and regional partnerships and strategies; educating, informing, and engaging all levels of the community; and investing time, talent, and resources to increase the county's capacity to grow and compete in a global economy. The county can, Murray said, "reinvent itself in a way that will still be uniquely Caldwell County."

Murray is also a musician. For many of her Atlanta years, she led children's choirs and sang with her church's worship team at home and many regional and national conferences. She still is amazed that she was included to sing background vocals with contemporary Christian artists Babbie Mason, Alecia Garcia, and Truth. And once, she sang background vocals with Paul Anka!

The former newspaper publisher hopes to finish writing and then publish books of her own. She is an amateur photographer, as well.



Murray's family includes her mother, who is still independent and living in Atlanta; her daughter who is married and living in Charlotte with the "apple of my eye," her eight-year-old granddaughter Madison. Murray named her current major hobby as attending Madison's club soccer matches and "spoiling her to the degree that her parents will let me."



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Companions for the Journey
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Upcoming Events

Call 754.0101 for information.

***Grief Journal-Writing Workshop
 November 7, 14, 21, 28 – 1 to 2:30 p.m.***
 Ashewood Grief & Counseling Services
 1002 Ashe Ave., Lenoir
 Led by Counselor Jessica Hatton, LPCA,
 & Communication Specialist Pam Hildebran

***Learn at Lunch
 December 7, 2011 – Noon to 1:30 p.m.***
 Meeting Room A, Robbins Center
 526 Pine Mountain Rd., Hudson