Three years ago, artist Eliette Markhbein wrote to Trisha Meili, known as the Central Park jogger, who was on Gaylord Hospital’s Board of Directors, to ask whether she could paint her portrait.

It wasn’t to be an ordinary painting. Eliette, herself a survivor of a traumatic brain injury, was creating a series of larger-than-life pictures of TBI survivors, in charcoal and paint. When completed, each one was cut apart into rough squares, then reassembled. Using this technique, she intended to show the different phases of TBI recovery: fractured, reassembled, then whole. “I was intrigued by what she was doing to raise awareness about brain injury,” Trisha said, “and making the important point that life does move forward.”

Then, in 2012, the two women met in New York City, where Eliette lives and works. “It made me see how powerful the paintings were in capturing the faces of recovery, as we survivors strive to reclaim our lives,” Trisha said. “I was very moved after I met her. I just said, ‘Oh man, we’ve got to get this at Gaylord’.”

This past March, which is Brain Injury Awareness Month, it happened. Gaylord Hospital exhibited a dozen of...
Brooder, Roberto Join Gaylord Board

Two accomplished and skilled individuals have been named to the Board of Directors for Gaylord. Michael Brooder is Partner-in-Charge of Marcum LLP’s Hartford office. Marcum is one of the largest public accounting and advisory services firms in the US. Marie Roberto, Dr. PH, is an accomplished and experienced member of the healthcare community. Most recently she was an Assistant Clinical Professor in Public Health at the Yale School of Public Health.

Mr. Brooder has more than 17 years of experience in collecting, reviewing and analyzing financial data for publicly traded and privately held companies in various industries. He has been active in professional and civic organizations including serving on the Board of Education for the Town of Wallingford. He has been particularly active in the construction industry and is a Certified Construction Industry Financial Professional. Mr. Brooder is the recipient of the Professional Achievement and Community Involvement Award from the New Haven Business Times. He is a graduate of Washington & Jefferson College in Washington, Pennsylvania.

Dr. Roberto is the recipient of numerous honors throughout her career, including the Agnes Ohlson Award for Outstanding Contributions to Nursing through Political Action from the Connecticut Nurses’ Association. She also was named to the Public Service Honor Roll of the Alumni Association, Department of Epidemiology and Public Health, Yale University School of Medicine. Dr. Roberto has been a frequent contributor to peer-reviewed publications and has provided research support as a consultant with the State of Connecticut Department of Public Health Tumor Registry. She earned her nursing degree from the University of Bridgeport, Bridgeport; her MS in medical/surgical nursing from Boston University, Boston, and her PhD in Public Health/Health Services Administration from Yale University, New Haven. The research for her PhD was done at Gaylord Hospital with the late Dr. Redento (Tino) Ferranti.

Meeting Her Own Need By Helping Others

In the spring of 1989, Rose Ryan was at home in North Haven, Conn. Her husband, George, worked in construction, and the last of their four children had just left the house. Rose, who was born in New Haven and had worked for Southern New England Telephone Co. before staying home to raise the children, needed something to do during the day.

“It was Empty-Nest syndrome,” she explains. “I was all alone, and I was not happy.”

To combat her loneliness, Rose’s doctor suggested doing volunteer work at, as he put it, “someplace where people get better” – and he specifically recommended Gaylord Hospital. Soon, Rose was a volunteer on Lyman 2, coincidentally starting the same day that Trisha Meili, the Central Park Jogger, was admitted as a patient.

Since then, she says, “I have seen miracles. That’s why I love to volunteer at Gaylord; it’s the best place I can think of for rehab. Working there is very, very rewarding.”

Rose transports patients, mostly those recovering from spinal cord injuries, to therapy sessions. “I go to their rooms, and the nurses, or nurses’ aides, get them ready,” she explains. “I bring them to therapy; and afterward I bring them either to another type of therapy or back to their rooms. I’m very glad to be a part of what’s going to make their lives better.”

Three of Rose’s nine grandchildren have also volunteered at Gaylord. “When they were in school, they would have community-service assignments,” she says. “I guess they could have done a lot of things, but I always talked so positively about what I saw at Gaylord that as soon as they were old enough, they told me they wanted to do it, too.”

Twenty-four years later, Rose still transports patients two days a week. “It’s very good therapy,” she says. “And I mean therapy for me. I look forward to going. I’ve seen people that have come there flat on their backs, not able to move, and many either walk out or go out in a wheelchair. Lots of them come back as a visitor, too. I tell them they have to do it. I always say, ‘Come back and see me. You owe me a hug’.”

About This Issue:
Contributions is produced by the Gaylord Development & Public Relations Office, which can be reached at 203-284-2881 or publicrelations@gaylord.org.

Articles in this issue were written by: Karen Hatcher Jeanne Hotchkiss Henry McNulty
Special thanks to Laura Phipps for many of the photographs.
Donations Produce Exciting New Treatment Tools for Gaylord

Gaylord recently received two foundation grants that are having a very positive impact on our patients’ mobility, function and independence.

**Gaylord’s Early Ambulation Program,** established in February, was made possible in large part by a $75,000 grant from CHEFA (Connecticut Health and Education Facilities Authority). Using the grant funds, Gaylord purchased transport ventilators manufactured by Flight Medical to help implement this program to improve the physical and emotional health of our ventilator-dependent patients.

With the transport ventilators, these patients need no longer be tethered to their room. This more compact, yet powerful device, can be affixed to a wheelchair or stand and allow the patient to leave the confines of their hospital room and move about within the hospital and throughout the grounds. Patients can get to therapy sessions, to the gift shop or visit with family and friends in the beauty of the Japanese Garden. This greater mobility and independence often leads to improved conditioning and, more importantly, renewed hope for their future.

The grant has created an unexpected potential to further improve the function of portable ventilators and to increase the freedom of ventilator-dependent patients. Inspired by Gaylord’s expertise and passion for providing the best in pulmonary therapy, Flight Medical chose Gaylord as its test and research site to begin the necessary work to develop more sophisticated software, and an ambulation stand for their transport ventilators. The upgraded software will fine-tune the available breathing modes, and the walker stand will carry the additional gear, allowing patients some highly prized independence and mobility. These technological breakthroughs will work to preserve and enhance the quality of life of ventilator-dependent patients, allow greater improvement in function and decrease the time necessary for recovery.

**Functional Electron Stimulation (FES)** has proven very successful in the treatment of patients with neurological disorders. It serves as an adjunct to more typical task-specific therapy by combining active movement and electronic stimulation, effectively multiplying the repetitions needed to retrain the neural pathways between the brain and the weakened limb. Until recently, however, there have been no such devices specifically designed to work on hands and forearms because hands require a fine level of coordination to complete even small tasks.

Many patients with disorders such as stroke, traumatic brain injury, spinal cord injury, multiple sclerosis and others, have ongoing difficulty in holding, reaching and grasping. Put another way, it has meant that these individuals face continuing challenges in opening a jar, picking up a fork or glass, buttoning a jacket, or holding a cookie. Thanks to a $40,000 grant from The Cuno Foundation, Gaylord has been able to add the Bioness H200 wireless hand rehabilitation system to its upper extremity treatment tool kit. The unique portable device delivers targeted electrical stimulation to further the retraining of hand and forearm muscles, permitting patients to achieve those critical abilities to grasp, hold and release more quickly and regularly.

The grant was sufficient to allow Gaylord to purchase the new technology for all care levels (inpatient, outpatient and Traurig) to use. Expectations are that the new devices will improve patient quality of life, encourage control over daily functions, improve physical conditioning and decrease hospital readmissions.
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Eliette’s portraits in a series she calls “WHACK’ed … and then everything was different.” The exhibit, in the Milne Lobby, was seen by hundreds. But there was more to the event than just the artwork.

Our Clinicians Learn from Eliette
On March 6, the hospital hosted an in-service program for health care professionals, attended by about 75 therapists, physicians, nurses, and others interested in TBI recovery. The next day, a gala wine-and-cheese reception for Eliette filled the lobby.

At the in-service day, Eliette explained the artworks’ fractured style, which she developed while taking art classes at New York’s Hunter College. “I had to do a self-portrait on a piece of paper 3½ feet by 6 feet,” she said. “It was pouring outside, so I couldn’t roll my drawing, because it would have been mush by the time I got home. So I just folded it, so it would fit into my messenger bag. The next day, I realized that it had imparted a grid on the paper. And I said, ‘well, I like that grid – there is a sense of being fractured.’ I cut the squares and reassembled them on a black background. Since my hands were not functioning all that great, it’s a little off. It’s not a perfect cut. But it’s really what you are: fractured, reassembled, and whole.”

The portraits, each several feet wide and high, are of well-known people who have experienced a brain injury – actor George Clooney, journalist Bob Woodruff, Rolling Stone Keith Richards, former U.S. Rep. Gabrielle Giffords – as well as less famed survivors, such as service veteran Claudia Carreon.

Exceptional Group Joins With The Artist at a Roundtable On Hope and Healing
The March 21 roundtable, “TBI: A Conversation About Hope and Healing,” drew scores of TBI survivors, relatives and friends, and health professionals to Gaylord. It was chaired by Tara Knapp, the hospital’s Vice President of Development. “Our conversation is about traumatic brain injury,” she noted, “but what we really want to focus on is recovery and healing.”

The panelists expanded on that theme. “Get as much information as you can,” Eliette advised the audience. “Once you know what you’re facing, it’s a lot easier to understand how it affects you, and it’s a lot easier to be a participant in your rehabilitation.”

TBI survivor Timothy Pruce, now a staff member of the New York Traumatic Brain Injury Model System, said it’s not only the survivor who should be involved. “When a brain injury happens to the individual, it happens to the family,” he said.

A common message of the evening was the need to come to terms with the “new you” after a TBI.

“Who you are after a brain injury is an evolving issue,” said Dr. Alyse Sickick, Gaylord’s medical director of inpatient rehabilitation. “Being able to understand what’s the same, what’s different, and having people around you who understand that, is really a challenge.”

Eliette Markhbein agreed. “You’re a new person,” she said. “You used to depend on the old person … so it’s a good thing to learn how to deal with that new person.”

Attitude counts, Trisha Meili emphasized. “You’re definitely different, in some ways, than you were,” she said. “But I’ve always felt that ‘different’ doesn’t necessarily mean ‘worse.’ Wanting so badly to get back, to be exactly the same as you were, is a wonderful motivation. But part of it is the realization, not only on the part of the survivor, but the family too, that you’re not going to be exactly the same. And that’s OK.”

Eliette agreed. “It’s an opening to a new world,” she said. “It’s an opportunity to be something different. I never did art before my traumatic brain injury. To me, being an artist is like a fantastic new second life.”

Sometimes, panelists noted, it’s tough to acknowledge that recovery from a TBI can’t always be accomplished alone. “After my injury, I shunned support groups for 10 years,” Timothy said. “I didn’t want to be affiliated with having a brain injury. It was denial, plain and simple. I thought that it was just a little setback.”
Eventually, he said, he realized that going it alone wasn’t helping. “It’s like a light bulb goes on and, ‘OK, this is what’s up,’ he said. “But it’s not ‘I lost, I’m defeated,’ it’s ‘so what do I do now? How do I work with this?’ and I joined a support group.”

Carrie Kramer, Director of Brain Injury Services at the Brain Injury Alliance of Connecticut, said that support is vital. But, she said, it’s almost impossible to persuade teenagers with brain injuries to seek support in a group setting. “In our experience at BIAC,” she said, “we have failed, in numerous attempts over many years, to create a support group for teens. It doesn’t work. So we have found ways to informally connect individuals so they can support one another.”

In recovery, concentrating on the here and now is useful, the panelists agreed. “I’ve learned the value of that: to focus on the present, the task right in front of you,” Trisha said. “Not getting caught up in what had happened – it’s the past, were before; whatever health care issues, personal issues, or psychological issues are brought into who they are, and what they are, after the brain injury. It’s not like you start from scratch.”

Thus, she said, “you really need to approach somebody with a brain injury in toto, and take all of those things into account. That is so well reflected in Eliette’s artwork. The fractured portraits reflect the fractured life – trying to figure out who you are, who the ‘new you’ is, what you can do – new and better, different. Who you are after a brain injury is an evolving issue.”

As for the event itself, “I was blown away by the impact, not only the art but also the words of our panelists,” she said. “Hearing them speak of the process, the evolution, the strategies that they used to move forward, with whatever life had dealt them, was really inspirational. I’ve been here for almost 21 years, and so I’ve participated in a lot of educational events, and I think this was just above and beyond anything I’d seen.”

Many of those viewing the art left comments for Eliette in a notebook. Among them: “Amazed by your talents, accomplishment and perseverance – very moved by the portraits.” “Your choice of subject brings much-needed attention to understanding a TBI. Thank you for what you have done.” “Very nice work! The work itself is very impressive alone. Then add the circumstances and WOW! You can’t help but to love it more.”

And at least one TBI survivor sent a note of appreciation to Dr. Sicklick: “The stories that were shared [at the roundtable on March 21] were an inspiration to me ... Through this meeting, I finally realized that I am now a new personality. I am now finally able to go on with life with a far different outlook, thanks to having been invited to this seminar. I was inspired in many ways.”

Such a response would not surprise Trisha Meili. “I think everyone in that room,” she said, “whatever their role, including the panelists, learned something that night.”
SAVE Gives Disabled Veterans A Chance to Get Back Into the Game of Life

Last year’s exceptionally popular adaptive fishing events for veterans are back this year. A lake event was held on May 7, to be followed by a Connecticut River event on September 25.

Thirty-three veterans took advantage of the 2012 fishing event organized by Gaylord’s Sports Association Veteran Event Program (SAVE) and led by the Connecticut Bass Federation. The program makes fishing accessible to both avid and new fishermen through transfers, adaptive fishing equipment and, if needed, expert help to overcome disabilities. It enables the veterans to participate in physical activity, enjoy peer relationships and the special achievement of catching that fish (or fish story).

“Adaptive sports saved my life,” said Michael Guilbault, a 15-year disabled vet who says he was always very active. “Now I do a lot of mentoring with newly disabled guys. I ask them what they liked to do before and tell them, ‘if you want to do it, there’s a way’.”

“In a boat, you’re just as capable as the standup guy. You can catch the bigger fish,” he said. “That can build confidence to do other things.”

SAVE activities are all geared specifically for disabled veterans as a way to grow their participation in adaptive sports. Contributions from our donors make it possible to put on SAVE and other Sports Association programs.

You Might Want to Consider These Tax Benefits When You Make Your Next Gift

Would you like to make a gift to Gaylord and receive greater tax benefits? Here I have written about three ways to make a gift that may be ideal for you financially. I hope it helps you to know that you can make a gift which both gives you tax advantages and helps us improve patient care at Gaylord.

A Gift of Stock May be Better For You Than Cash

Your shares of stock or mutual funds may well have increased in value since the recession of 2008. We refer to these as “appreciated securities” or perhaps, more aptly these days, “re-appreciated securities”. Making gifts with securities that have gone up in value may be a great option for you.

If you own appreciated securities, then a gift of those shares may result in important advantages when compared with a gift of cash. When you make a gift of stock, you receive an immediate income tax deduction for the fair market value of the securities on the date of transfer, no matter what you originally paid for them. Also, you pay no capital gains tax on the transfer when the stock is sold.

You can go to our website, www.gaylordplannedgiving.org, and use our cash v. securities calculator to find out what the difference is for you.

Could a Gift From Your Retirement Fund Be a Great Option?

The tax laws have also been recently changed. These new provisions could...
He Finds Pleasure in Volunteering

As a young mechanical engineer in the 1950s, Phillip King found lots to occupy his free time. “I did all kinds of things,” he says. “Tennis, golf – I was even a pilot. Basically, I spent my time taking care of myself and my family.”

In 1963, he moved to Cheshire, and began to reconsider his priorities. “As I got older and more mature,” he says, “I discovered that there were other things in the world besides golf and tennis.”

Inspired by Winston Churchill’s statement that “We make a living by what we get, but we make a life by what we give,” he began to volunteer in his spare time, starting with helping out at the Connecticut Food Bank in East Haven. “That made it clear to me that volunteering is important,” he says. He later worked at a community soup kitchen in New Haven and was a docent at Middletown’s Wadsworth Mansion.

About two and a half years ago, Phillip saw a notice that Gaylord Hospital was looking for volunteers, and thought he’d give it a try. Since then, he has worked two days a week at the hospital, helping patients get to therapy and other appointments. “It gives me such pleasure to help somebody,” he says. “You’d think the patients are the ones getting the benefit, but being a volunteer does a lot for me, too. There’s a whole world out there that needs help, and I can do some of it.”

Some patients, he says, need more than a way to get from one place to another: “I know they’ve had a tough time – that’s why they need therapy. I try to be sympathetic. At times, I almost feel pastoral.”

Inpatient Therapy Supervisor Bill Neidel says Phillip “always goes above and beyond to help the patients. Plus, he’s very down-to-earth, and can talk to patients about anything that’s on their minds. He’s a real asset.”

When he’s not at Gaylord, now retired, enjoys keeping in touch with his two children and five grandchildren.

This past winter, he was on duty when the February blizzard arrived. The staff urged that he head home while the driving wasn’t too bad, but he would have none of it. “I just said no,” he says. “My work here needed to be done.”

He finally left, in the middle of the storm, and by driving carefully made it home. His secret to the successful drive? “By taking the flattest route possible,” he laughs.

Giving and Getting

A big change this year is that the charitable IRA provision has been extended through the end of 2013. For those of you who own an IRA and are over 70½ years old, you might want to take advantage of the chance to make a gift this year from your IRA.

Ask your plan administrator to make a direct gift of up to $100,000 to a qualified charity such as Gaylord. Your gift is tax free. Specifically, any money given this way counts toward your minimum distribution, but is not included as income.

Should You Consider The Benefits of a Charitable Trust?

This may also be a good time to consider setting up a charitable trust. With a rise in the value of securities, and higher tax rates, putting assets into a Charitable Remainder Unitrust can result in significant financial benefits – to you and Gaylord. If you would like to learn more about a Charitable Remainder Unitrust, visit our website, www.gaylord.plannedgiving.org, or contact me directly.

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Do You Want to Leave Your Values as Well as Your Valuables?
Are there values, experiences, memories and stories you’d like to share with those who come after you? Join an award-winning journalist and writer as he introduces you to what is known as an Ethical Will. He’ll tell you what it is, why you would want to prepare one and guide you through the first steps of how to create one. Tuesday, September 10 at 10:30 am.

Have You Considered This Proven Method to Help Your Disabled Loved One in the Future?
Four experienced and diverse panelists will talk about Special Needs Trusts, one way to help provide for the future of a disabled loved one. If you have considered or would like to learn more about this financial tool, then you should come to this event. Thursday, September 26 at 7 pm.

Will Your Loved Ones be Able to Find Those Critical Documents When They Need To?
Do you have a power of attorney for healthcare, will, and other key documents prepared, signed and accessible? Like many of us, you probably don’t. Join three people with knowledge and insight about what documents you need and why you need them. You’ll be encouraged to “Get Your Act Together” and not put off this important task any longer. Thursday, October 10 at 2 pm.

Invitations to follow.