Making a Difference, Now and For Years to Come

Our ability to commit to the best care available has been helped through the years by those who gave gifts that went into our endowment. Our endowment makes it possible to connect our vision to reality, and help us match our reach with our ambitions. Endowed funds – monies which are set aside to generate income each year for a chosen purpose - reflect the values of those who set them up. To all of you who have established endowed funds, and to those who will do so in the future, we thank you.
The People, The Gifts, The Impact

The stories of three endowed funds are featured in this edition of Contributions. All of these funds give voice to the values of the people who set them up, allowing them to speak to us now and for generations to come. In here you will read what inspired our donors to set up an endowed fund and what they sought to accomplish. Most importantly, you will learn what those funds have made possible.

• Bob Fechtor knows that “at some point, everybody needs some help”. His late wife got great care here, but he saw that not everyone could afford some of the things he could. In 1999 he set up the Fechtor Family Fund to provide monies for equipment for those who could otherwise not afford it.

• The Birney and Gagliardi Families have experienced the challenge of having one of their own face a chronic disease. They wanted to help others in the same position when they needed it. So they established the Elizabeth Birney Gagliardi Fund for Multiple Sclerosis and Traumatic Brain Injury to support patients suffering from those conditions.

• Henry and Nancy Bartels truly valued access to education, so they established a fund dedicated to furthering clinical training and to providing key information resources to Gaylord’s patients and families.

If you would like information about setting up an endowed fund at Gaylord, please contact our Planned Giving Officer, Karen Hatcher, at 203-284-2844 or at khatcher@gaylord.org
FECHTOR FUND - ACCESS TO EQUIPMENT

With Help from Gaylord,
My Wife and I Had Five More Years

My wife Louise was a fighter. She was diagnosed with heart valve problems in the early 50s, but she never let it slow her down. Then in 1998 she had valve-replacement surgery, and during the surgery she suffered a paralyzing stroke. She couldn’t walk or get herself dressed. It was a tough blow. But as always, Louise didn’t give up.

And this time she had the folks at Gaylord on her team. After the stroke, the care she received at Gaylord was fantastic in every way. Louise and I had five more years together.

Thankfully, I was able to afford what insurance did not cover at Gaylord, and Louise did not lack for anything. But it bothered me to realize that others might not be so fortunate. I hated to think of other people doing without something that could speed their recovery or help them overcome an obstacle.

After Louise passed away, I wanted to do something to make sure other patients could receive the very best Gaylord has to offer—whether or not it’s covered by their insurance plan. With what I can offer, I want to help families who need it.

So in loving memory of Louise, my sons and I established the Fechtor Family Fund. Helping others when they need it makes me feel good.

“Helping others when they need it makes me feel good.”

With Help from the Fechtor Fund, This Family Stayed Together

On Christmas Eve in 2010, a 17-year old girl was a passenger in a car when a terrible accident happened. As a result, she suffered a severe spinal cord injury, and was left a quadriplegic.

Her family was devoted to her, but without a lot of resources. They very much wanted their daughter home. But before that could happen, they needed to have a wheelchair ramp added to their home. Otherwise, their daughter would be unable to get in and out of the house.

The Fechtor Family Fund paid for it – for which the young woman and her family were so very grateful. It allowed them to be together.

Here are just a few of the items the Fechtor Fund has purchased: (Starting at the top going clockwise): iPads to loan to outpatient speech therapy patients; wheelchairs; robotic equipment to restore arm function; stairlifts.
Mom on a Mission

Katherine Birney, mother of seven and grandmother of 17, is on a mission.

It’s a mission that she wishes she never had to undertake, but it’s one, nonetheless, to which she is fiercely committed in support of her daughter and countless others afflicted by multiple sclerosis.

Kathy’s story begins more than fifteen years ago when her only daughter, Liz, was diagnosed with the disease at the age of 37.

“It was the last thing we expected,” she explained. “Liz was superwoman … always a healthy, busy, on-the-go lady.”

A mother to three young children, Liz not only cared full-time for her sick and frail grandmother in her home but also worked 12-hour shifts as a hospital critical care nurse. In her “free” time, she was a passionate runner who frequently competed in local races for good causes.

But everything changed when Liz inexplicably passed out at a beach party in Rhode Island and was rushed to the emergency room.

“She just chalked it up to spending too much time in the sun and water,” said her mother, “but the doctor made it clear that he wanted her seen right away by a specialist back home. He sensed that something wasn’t right.”

A visit to a neurologist confirmed the ER doctor’s suspicions; Liz had multiple sclerosis.

“After that incident she was back to normal and was doing just fine for quite a while. There were no other symptoms so I think we all crossed our fingers and told ourselves, ‘Ok, she’ll just continue living like this.’”

But the family’s guarded hopes were soon dashed by a panicked phone call one afternoon.

“After phoning her husband who worked several towns away, Liz called me and said,” Kathy recalled. “Mom … come quick! Something’s wrong with me!” Kathy recalled. “And when I got to her house I thought my heart would break.”

Kathy discovered her daughter sprawled out on the couch, completely robbed of her ability to talk or move.

Assuming she had suffered a massive stroke, the ambulance took Liz to Yale New Haven Hospital where she was later diagnosed as having had a severe MS exacerbation.

Liz remained in the hospital for months as she slowly began to recover and relearn the basics of walking and talking. After her discharge, she was referred to Gaylord Hospital for outpatient rehabilitative therapy.

“And that’s where she blossomed,” explained her mother.

Beyond the cognitive and occupational rehabilitation, Kathy said that the Gaylord employees helped her daughter in ways she could never begin to imagine. She recalled how from the moment Liz entered the facility, the Gaylord staff made it abundantly clear to Liz that they were on her team and were rooting for her.

“What Gaylord really did was give her a sense of wellbeing and purpose. That, coupled with her incredible will, enabled her to accomplish amazing things. She wasn’t in therapy for very long, but during her time there she learned to be a whole person again. Liz has always been cheery and positive and Gaylord gave us that most precious treasure back.”

Immense gratitude for Liz’s recovery prompted the family to give back in the fight against MS.

“Liz was so ill for so long that we wondered if she’d ever be able to function again. We were worried sick so it was a relief when she began to rally. We wanted to do something that would make a difference.”

Liz’s grateful family and friends gathered together to participate in their local MS Walk where their team, “The Birney Bunch,” remained the top-fundraising group for years.

Throughout it all, Kathy and her family stayed in close contact with Gaylord Hospital and attended many of their seminars and events where they were regaled by numerous patient
success stories and had the opportunity to witness the first-hand impact of charitable donations on patient care.

“At one point, something just clicked; Liz was one of those success stories, too. They had an incredible impact on restoring her quality of life and her spirit. From that point forward we knew that we wanted to support Gaylord and be able to see how our contributions could impact the care provided to patients like her.”

In partnership with Gaylord, Kathy and her husband Bill set up an endowment fund, “The Elizabeth Birney Gagliardi Fund for MS.” With the entire family’s support, the fund was created with the sole purpose of paying for therapies and equipment that could benefit an MS patient’s life but are not covered by insurance.

Kathy and her family sent invitations to their “Birney Bunch” team asking for their help in supporting Gaylord - the institution that gave them back their daughter - at their first annual wine tasting held at Gouveia Vineyards in Wallingford.

“It was a smashing success. Each year the event has continued to grow from the positive press and word of mouth in our community,” she said.

“One year my son suggested that we move the wine tasting to the beautiful, open lobby of the Brooker Building at Gaylord. Since then, we’ve had the support of so many people in our community including our major sponsor, Vincenzo DiNatale of Ives Road Wine & Spirits.”

Since the first wine tasting eight years ago, the fundraiser now regularly draws a crowd of more than 300 attendees and has raised well over $100,000 for the fund. The monies in the fund have provided MS patients, who often need help with cognitive and coordination tasks, the use of iPads. They are a terrific solution to the problems these patients face: they are lightweight, compact, activated by touch screens, and incredibly versatile.

In recent years, one of Kathy’s daughters-in-law suffered a massive stroke. Knowing of Gaylord’s exceptional reputation for caring for people with traumatic brain injuries, the family collectively decided to expand the scope of the fund to also provide helpful services not covered by insurance to their TBI population.

Today Liz is still a “goer and doer” and works as a substitute nurse in the Wallingford school system and continues to indulge her passion for running by coaching track at her local high school.

“It’s amazing how Gaylord transformed her outlook on her disease; I just can’t say enough about the hospital. They gave her such a sense of ‘I can do this, too.’ Though we’ve had no long-term stays in my family, I see what it has done for Liz and for other people in our community. They perform miracles there, they really do,” she said.

“The MS never goes away,” Kathy quietly reflected.

“But the least that our family can do is make sure that some of the financial worry and stress for others fighting the same fight does go away.”

Happy participants at the annual wine tasting held at Gaylord to support the Birney’s fund.
Dear Birney Family,

My name is Pat Burns and I have had Chronic Progressive Multiple Sclerosis for 32 years. I have permanently been in a wheelchair for 21 of those years – unable to stand up.

It seems that I have had a lifetime of denials from my insurance company. Denial for medical equipment, denial for home care, denial for respite care, it goes on and on. They have said the reason being is that I cannot get better.

When Sue Blum in Gaylord’s Outpatient Services told me that a donor had offered to cover my standing chair expense, I was sincerely moved. The standing frame offers the possibility for me to physically strengthen in many ways. This will not only be an encouragement to me, but hopefully a life changing improvement.

I want to convey my overwhelming and lasting gratitude.

Patricia Burns

Sue Blum, LPN is in Outpatient Medical Services. She is a constant advocate for her patients, and when she learned of Pat Burns’ need, she didn’t hesitate to apply for her to get a grant from the Birneys’ Fund. It made Sue so happy: “I felt like Santa Claus, being able to help Pat. It was such a good feeling”.

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

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The rapid changes in healthcare make it expensive for hospitals to provide the ongoing education needed to keep staff and patients aware of the latest medical developments. To help answer this critical need at Gaylord, Hank and Nancy Bartels established The Henry E. and Nancy Horton Bartels Fund for Education, in 2005. Their intention was to provide the resources to support educational opportunities for Gaylord staff, patients and their families. The Fund helps underwrite a wide array of learning resources from clinical education, staff training and conferences, to reference materials and distance learning. The Bartels have been generous Gaylord donors for many years and Hank served on Gaylord’s board of directors for 12 years.

The Bartels’ passion for supporting educational opportunities was a key focus of their lifelong philanthropy. Hank and Nancy met as students at Cornell University and were married shortly after graduating. Hank was the first member of his family to attend college, and as a result he and Nancy had a deep appreciation for the power of education to change lives. Sadly, Hank passed away this January at the age of 92. Nancy and their two sons, Philip and Kenneth and their spouses, and four grandchildren survive him. We are very grateful to the Bartels for their support. Because of their vision for and endowment of the Education Fund, the Bartels’ legacy will impact the Gaylord community for many, many years to come.

Following are a few of the ways the Education Fund has made an “investment in knowledge” by providing patient resources and helping to further equip our staff.
“We knew we had a great resource but we couldn’t provide it to our patients and their families without the financial support provided by the Bartels’ Fund. The generosity of the Bartels in creating that fund for education was unreal!”

Manager of Therapy Services, Pete Grevelding

Gaylord’s 70-page Stroke Education Manual was the result of several years of intensive writing and editing by a diverse staff team and a volunteer who reviewed content from the patient perspective. The manual was finally completed about a year ago and is available in hard copy to patients who have had a stroke and their families. It is also available on our website as an easy to read, downloadable PDF.

Patients who have suffered a stroke comprise one of the largest populations treated at Gaylord and that population continues to grow. According to Peter Grevelding, Manager of Therapy Services, the motivation to create the manual arose from a need to provide further education to patients with a stroke. “We provide patients with a lot of individualized education,” he explained. “But people are ready for information at different times and not everything comes up in conversation. We wanted a resource to give them that encompassed all of the things a stroke patient might need to know. And handing patients the manual allows them to read it at their own pace or when they are ready to deal with more information.”

The manual was designed with a spiral binding so it can lay flat, which makes it easy to use by patients who have the use of only one hand – a common problem with a stroke. And it is compact and light enough so it can be easily slipped into a bag or backpack. Because of these features, producing hard copies was going to be very expensive. When Grevelding spoke with Tara Knapp, Vice President of Development and Public Relations and the manager of the Bartels’ Fund, she suggested that the Education
Fund pay for the publishing costs. This resulted in the manual’s first printing last spring.

When the Commission on Accreditation of Rehabilitation Facilities (CARF) reviewed Gaylord’s Stroke Program this year the Stroke Manual proved to be invaluable. CARF accreditation focuses on a hospital providing the best practices with an emphasis on the individual being served. “As the CARF team asked us about details of our program, we kept referring back to the manual,” Grevelding explained. “They thought providing the manual was a best practice and they liked that it was in multiple formats.”

The manual is now in its second printing, which was also funded by the Education Fund, and the PDF has been downloaded over 200 times.
“You have to be a certified clinician in order to do this technique [LSVT-Loud] and must attend one of their workshops. Deirdre and I have always wanted to do this and then we found out they were coming to Connecticut!”

Speech Therapist, Cheryl Tansley

For two Gaylord Inpatient Speech Pathologists, Deirdre Bray and Cheryl Tansley, there is nothing more important than helping patients advance in their ability to communicate. For years, they’ve wanted training in LSVT LOUD® (Lee Silverman Voice Training). LSVT uses loudness training to bring the patient’s voice to an improved loudness without strain and is an effective speech treatment for individuals with Parkinson’s disease and other neurological conditions. But the training is expensive and intensive, costing nearly $1,000 per clinician. Bray and Tansley thought that becoming certified in LSVT could give them new tools to more effectively help patients with Parkinson’s or similar disorders.

Because of the resources available in the Bartels’ Education Fund, Bray and Tansley were able to attend the LSVT training in April of 2014. “LSVT has given us new skills and principles for working with patients and these can be used with other populations that we see more frequently,” said Tansley. “Having it paid for was a huge benefit,” she said. “The training helps us to be on the cutting edge of research and techniques. And being able to attend together allows us to bounce ideas off each other and share equipment.”

Patients with Parkinson’s often have trouble with speaking and swallowing. As the disease progresses they can’t gauge their voice intensity and words tend to rush together at the end of the sentence. One of the central principles of LSVT is to recalibrate the person’s ability to judge the loudness of his or her speech so that other people can hear them. LSVT essentially retraining the brain. Treatment is intensive and is provided in 16 sessions over a single month (four individual 60 minute sessions per week). Then there are exercises the patient must practice on a daily basis for a lifetime.

“During the training I learned how hard people have to work and how hard the clinician works,” said Bray. “The other thing that was helpful was being able to do something effective in the area of speech rehab with patients with Parkinson’s. Before I could only help them compensate for the problem. But now we can help them maintain their function even though their disease is progressing. With LSVT they can speak audibly and can make their needs known. For me that is a very big change and a very significant kind of therapy.”

Robert Hancock has Parkinson’s. He has seen others who, after learning their diagnosis, “just lie down and go to sleep.” But not him. He wanted to do as much as he could, so he came to Gaylord for LSVT therapy. Alice Kosowsky, a Speech Therapist in Gaylord’s Wallingford Outpatient Center, was trained years ago in LSVT and he says that she brought an awful lot to his therapy. He feels grateful to have been exposed to her expertise. The therapy started in February and completed in mid-May. By the end of his therapy he says “Alice made me more visible” – simply by teaching him how to recognize his own volume and, in turn, speak louder so that others could hear him. No longer were his friends asking him to “please speak up.” Now, not only can he have meaningful one-on-one conversations, he is not afraid to get up and speak in front of a crowd. That’s big.

Alice encouraged her colleagues Deirdre and Cheryl to also get the LSVT certification made possible by the Bartels’ Fund. “Education gives our staff an edge,” Kosowsky said. “Really, it is a gift of love.”

Deirdre Bray (L) and Cheryl Tansley in front of Deirdre’s LSVT certificate – both so happy they got that training.
As a physical therapy assistant, Greg Sczurek’s ability to intensely focus in the moment helps him to engage well with patients, whether he is instructing them about their therapy or listening to their questions and concerns. Because of this skill, Sczurek was chosen along with Kari Buck, OT, Jennifer Mordino, RN, and Margaret Conant, RN, to attend the Patient Experience Empathy & Innovation Summit at the Cleveland Clinic last May.

Focusing on the patient experience is one of the significant shifts in healthcare and many hospitals have a patient experience office with patient liaisons. Gaylord’s Senior Director of Therapy Services, Sonja LaBarbera, said there has been a strong interest in establishing a patient experience office at Gaylord and having staff attend the summit would be a first step toward that goal. However, sending the staff team was going to be costly. Fortunately, the resources of the Bartels’ Fund covered the team’s expenses.

The ideas and information that the group was exposed to confirmed the critical importance of patient engagement and it was a pivotal time for Sczurek. He said seeing so many people from different countries and organizations committed to improving the patient experience was inspiring and motivating. The team returned energized with ideas that helped provide the foundation for the new Patient Experience Office, which opened its doors this past October. Patient Relations and Volunteer Manager, Dorothy Orlowski, manages the office, and Sczurek was hired as the part-time Patient Liaison. Together they share the responsibility of engaging in-depth with, also known as “rounding on,” a total of 35 patients each week.

Rounding includes asking patients various questions about their stay. According to Sczurek he asks about the room and quality of the meals but added, “The biggest question I ask is do patients feel that the staff is committed to communicating with them about their diagnosis, treatments and medications?” The next question he asks is if the patient feels that he or she is allowed to participate in the dialogues about these issues. “This is where having patients become engaged is so important,” he explained. “Patients need to have a strong voice in their care and it is important that they feel like our staff support and encourage that involvement.”

The Patient Experience Office’s mission is “To engage patients and staff to partner together for a positive Gaylord experience.” In May, Sczurek and Orlowski, Kayla Thrall, RN, and Diane Birtha, RN, attended the Patient Experience Summit via funding from the Bartels’ Fund. This year the team was able to share insights gleaned at Gaylord as well as discover new ideas to promote a positive patient experience at Gaylord.
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THE GAYLORD FUND

SATURDAY
OCTOBER 10, 2015
Grounds of Gaylord Hospital
1 p.m. - 3 p.m.

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