



Community *Benefit Report*

Spring 2021



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Mission, Vision and Values

Our Mission

Celebrate the lives of those we have the privilege of serving by providing superior care and superior services to each patient and family.

Our Vision

Our vision is to be a world-class organization.

Guiding Values

☛ Servant Leadership ☛ Kindness ☛ Honesty ☛ Compassion



Reflections

Kent Anderson, CEO of Ohio's Hospice, and Tom Mann, Chairman of the Board of Directors of Ohio's Hospice, reflect on our mission and serving our communities.



On the Ohio's Hospice model of bringing together local hospices across Ohio:

Tom Mann:

The Ohio's Hospice model is giving our associate and affiliate members the help they need to retain confidence in their ability to meet their mission, consistent with our shared values. Our members' mission of providing superior end-of-life care in our communities is as important today as when most of us started our missions 40 years ago. But in the turbulent, ever-changing healthcare world, meeting the mission is harder than ever. **Together we can better leverage common resources** so that we can concentrate on our mission. Our goal is to continue being relevant and vital to the health of our communities. This means simultaneously being both the preferred partner of statewide managed care organizations and the vibrant, local, entrenched members of our local communities we've been serving for decades.

Kent Anderson:

As hospice providers, we each share a common mission — coming together

as one allows our teams to maintain focus on care and services, assuring the highest quality resources and care possible. Coming together helps us achieve economies of scale and skill, helping our staff members to take care of their respective communities in the face of a very challenging and evolving healthcare environment.

On the importance of mission support:

Kent:

As our healthcare system moves from volume to value, small, stand-alone, community-based programs face significant risks, particularly in rural communities. Ohio's Hospice shares resources to support every staff member of our organization. Technology, like our electronic medical record, for example, means a nurse at the bedside in a rural community **can readily get access to timely clinical consults** from Ohio's Hospice experts. We understand that bigger is often not better. But we also understand that being too small in today's and tomorrow's healthcare world comes with great risk.



Tom:

From a board perspective, it presents a challenge to create the efficiencies that ensure mission fulfillment while retaining the local identities our members cherish and that define us. **What can we do with technology, with people, to be able to leverage capacity that exists** and spread it to all the members without adding to the administrative burden? We've proven over the years that we can do this and make sure that we don't lose sight of the mission and don't lose sight of our local identities.

On the mission to ensure the long-term sustainability of the not-for-profit hospice model through the National Hospice Cooperative:

Kent:

The mission of not-for-profit hospices is endangered. As the healthcare market transitions from volume to value, **we can leverage resources, lower costs and help others retain their relevance and vitality.** The mission of community-based not-for-profit hospices is not only worth saving but also worth enhancing. Every Ohioan should have access to superior end-of-life care, which is our mission to ensure.

Tom:

We're going to fight to maintain a central place for our mission throughout the entire state of Ohio. It's a natural

drive of ours to provide the best care to the community. We're not denying reality. Consumers aren't always aware of who's providing their care. We have to do better in educating the public, payors and healthcare professionals about the difference between Ohio's Hospice and other hospice providers, and about **the value of our mission** to the communities we're privileged to serve.

On the response of Ohio's Hospice to the pandemic:

Kent:

Driven by our values, I said to the staff when the pandemic began that we wanted to maintain 100 percent of full-time employment and full benefits. With hospitals and other healthcare providers furloughing staff, I wanted to create confidence among our staff that we wanted to focus on mission and would be driven by our values. And to do that, they would take care of people — and as a leadership team we would take care of them. I didn't want Ohio's Hospice to be reactive. The only thing

“Every Ohioan should have access to superior end-of-life care, which is our mission to ensure.”

-Kent Anderson, FACHE,
CEO of Ohio's Hospice

that has changed is the virus. But by our commitment to make staff feel comfortable and confident that they will continue to have a job, we allowed everyone to focus on mission.



Community Benefit

Governance and Transparency

As a community-based, mission-driven, not-for-profit organization, Ohio's Hospice's mission **focuses on community benefit in every service we provide.** We strive to ensure that the end of life is as celebrated and honored as the beginning of life for every Ohioan.

Although we were founded originally as local hospice providers, today we're **so much more than simply end-of-life care providers.** And that's what makes a community benefit report like this so vital, so relevant.

On the pages that follow you'll read how mission-fulfillment has driven our comprehensive response to the COVID-19 pandemic. And you'll also read about how we have continued to work through the pandemic to define and meet community need for providing superior care and superior service, celebrate lives, invest in the communities we're privileged to serve and enhance the quality of life in the communities in which we live and work.

Governance

At Ohio's Hospice, community-based is more than a compound adjective. It is the operating principle for our Ohio's Hospice Board of Directors as well as the governing boards for each of our associate and affiliate members. Our volunteer leaders live and work in the communities we serve. The patients and families we serve are their friends, neighbors, teammates and members of places of worship they attend.

Decisions that affect how we serve our community **are made locally**, not in some far-off corporate headquarters. Decisions are based on mission fulfillment and community investment, not on return on investment for stockholders or private investors/owners.

Going Above *and Beyond*



Nursing Staff Certification

Every hospice employs registered nurses (RNs), licensed practical nurses (LPNs) and state tested nursing assistants (STNAs) to provide the hands-on nursing and personal care for which hospice is so well loved and so highly regarded.

But **Ohio's Hospice goes well beyond the basic minimums set by the state of Ohio and Medicare** by requiring all of its nursing staff to also be certified by the leading national organization for end-of-life care nursing, the Hospice and Palliative Nurses Association (HPNA). It's a standard that few, if any, other hospice providers can match.

It's a **commitment driven by a mission to provide superior care and superior services**, a fierce determination to set an unparalleled standard for quality care, and a desire to provide employees with both a fulfilling job and opportunities for career development and advancement.

"We do this because we believe certification simply reflects our mission to provide superior care," says Brandi Barlow, Ohio's Hospice vice president of Administration, Human Resources, Education and Volunteer Services. "Our staff are able to show **they have this level of knowledge and expertise in caring for hospice patients**. It brings us to a higher level compared to other providers."

How It Works

Within two years of joining Ohio's Hospice, every nurse and nursing assistant must achieve **HPNA certification**, which requires passing a comprehensive exam. Certification is a requirement for continued employment.

Ohio's Hospice makes a considerable investment each year in supporting its nurses in their pursuit of certification. It provides test preparation courses, a practice test, and coaching and counseling after the practice test. Participants are paid for their time in class, and Ohio's Hospice pays for the cost of the certification test. Anyone who fails to pass the test on a first try receives additional support before taking a re-test.

Upon obtaining certification, nurses and nursing assistants receive an hourly rate increase that amounts to more than \$1,000 a year and are **launched on their way** to building a career path at Ohio's Hospice.

Julie Wickline, senior director of Education and Staff Development at Ohio's Hospice, observes that, "**Success breeds success**. Yes, everyone appreciates the pay bump. But it really is rewarding to see how our team members want their certification because their colleagues have it. They recognize the value."

Despite the difficulties and uncertainties related to the COVID-19 pandemic, **77% of eligible staff voluntarily** sought out the **hospice and palliative care certification**.



Going Above *and Beyond*

Additional Development Opportunities for Hospice Professionals

Ohio's Hospice long has offered tuition reimbursement to support all staff in developing a fulfilling career ladder. New in 2020 is a scholarship program to recruit and train STNAs. Nursing assistants have the most frequent contact with hospice patients; they provide the personal care that allows hospice patients to live in comfort and dignity. It is not just one of the hardest jobs in hospice — from a human resources perspective. It's also **one of the most difficult recruitment and retention challenges** for any hospice provider.

Looking for innovative solutions, Ohio's Hospice resolved to invest in expanding the pool of available nursing assistants.

“We began partnering with area colleges to offer a tuition-free, four-week educational program for prospective nursing assistants. Participants are hired prior to starting the program and are paid their regular salary during the 75 hours of coursework. In addition to their classroom work, **students work alongside a preceptor** caring for patients for two months before they begin seeing patients on their own,” Barlow says. “In addition to the candidate's salary and benefits and tuition of approximately \$650, Ohio's Hospice also pays the \$100 cost of the state's STNA exam.”

The program is attracting both recent high school graduates as well as **people returning to the workforce** or looking for a career change, Barlow explains.

“This came about because we asked our recruitment team to think outside the box to ensure we have the staff we need to provide superior care,” she says. “They asked, what makes Ohio's Hospice attractive to entry-level candidates? What can we do to get people to join our team? We have **excellent educational opportunities** and an extensive orientation program. So why not pay candidates to go to class and support them as they begin their journey with Ohio's Hospice?”

Investing in the Community by Investing in Staff

While some of these education and career development activities necessarily were put on hold as a result of the COVID-19 pandemic, including the two-year requirement to obtain HPNA certification, Ohio's Hospice **continues to look for ways to invest in its own staff** as a way of investing in the communities it is privileged to serve.

CARES Act *Funding*

“It allowed us to ask in the middle of a crisis: ‘What more can we do to meet the community need, to support staff, to support patients and families?’”

-Amy Wagner, president of Ohio’s Hospice

Ohio’s Hospice, COVID-19 and the CARES Act

“We had not planned on the CARES Act (Coronavirus Aid, Relief, and Economic Security Act) funding. It just showed up in our bank account,” states Ohio’s Hospice CEO Kent Anderson.

The amount in question? \$7.2 million.

The challenge — and opportunity — for Ohio’s Hospice as a not-for-profit organization governed by a community-based Board of Directors drawn from each of the communities it serves was how to be a responsible steward of the funds entrusted to it and how to be fully transparent about **how it administered those funds in the midst of a national healthcare emergency.**

Adding to the challenge was the fact that the funds arrived without specifics on how recipients were to spend the money.

Like all healthcare providers, Ohio’s Hospice saw an immediate drop in revenues — more than \$2 million — as the first wave of the pandemic rolled through Ohio in the spring of 2020. At the same time, **expenses for items like personal protective equipment (PPE) were skyrocketing** amidst unprecedented demand and severe supply chain disruptions.

Ohio’s Hospice **immediately engaged** its law firm and auditing firm to guide how the CARES Act funding was spent and tracked for reporting purposes. **“We pledged this would remain an agenda item** for the Finance Committee and the Board of Directors as a whole until such time as the government told us the disposition of these funds is complete,” Anderson explains.

Where did the money go? **Much of it went to front-line staff.**

Every front-line worker, from nurses and nurses’ aides at the bedside to housekeeping and culinary workers in the inpatient units, received up to \$1,325 in “extra pay.” “It was the right thing to do,” Anderson says. “We didn’t want to create a pay category called hazardous pay. We just called it ‘extra pay.’”

That was just **one of many ways Ohio’s Hospice put staff members first** in responding to COVID-19.

“We did that to **protect our patients, their families, our staff,**” states Ohio’s Hospice President Amy Wagner. “If we were going to start losing staff to the pandemic, it would be difficult to keep serving patients, keep fulfilling our mission. So we chose to be very aggressive in handling this.”

“The money did what it was supposed to do,” observes Wagner. “It provided **stability** and **security** to an essential provider. That security allowed us some perspective in real-time decision-making. **It allowed us to ask** in the middle of a crisis: **‘What more can we do** to meet community need, to support staff, to support patients and families?’”





“One thing our response to the pandemic has done was to demonstrate in real time and on a daily basis the value of our affiliation, in having Ohio’s Hospice. We not only shared resources, but we learned from each other and supported one another. This is exactly the way the model is supposed to work.”

**-Amy Wagner, president
of Ohio’s Hospice**

Pandemic Response

Overview

COVID-19: The Ohio's Hospice Task Force Response

The Leadership teams of Ohio's Hospice affiliate and associate members established a COVID-19 Task Force that began meeting daily on March 9 through video meetings, setting the tone for a response to the emergency that was based on effective **two-way communications, trusting the science, evolving guidelines as more/better information became available, trust in staff and commitment to mission.**

"It wasn't just about creating policies and redesigning nearly everything on the fly. It was about **calming any fears among our nursing staff**, about explaining the 'why' behind our policies," Wagner says.

It was also about **staying focused and positive.** "In every call, we talked about 'silver linings,' whether that was good news, lessons learned with long-term implications, or a positive story about meeting the needs of patients or community care partners," she says.

The daily agendas were wide-ranging: infection control, PPE guidelines and supply management, clinical decision trees and algorithms, interpretation of evolving Medicare regulations, patient visit redesign, planning for COVID-19 inpatient care, guidelines and processes for visitors to inpatient units, telehealth systems and guidelines, rapid admissions response, work-from-home protocols, changes to human resources pay and policies specific to the health emergency, utilizing Ohio's Hospice chaplains, social workers and grief and bereavement counselors to care for staff, volunteers, community care partners and community members affected by the crisis ... and much more.

Much of the focus was on communications. "In our daily meetings, we opened up the floor so that anyone, anywhere could ask a question," Wagner explains. Like many healthcare providers, Ohio's Hospice created a dedicated intranet site to host essential information about the response to COVID-19. What was different for Ohio's Hospice is that the site was open to the public: <https://intranet.ohioshospice.org/coronavirus.aspx>.

"You can't get more transparent than that," Wagner observes.

Ohio's Hospice also decided to share as much of the information it was developing in **as many creative ways as possible with community care partners**, patients and families, and the community. "Our goal was to be as flexible and transparent and easy-to-understand as possible," says Craig Schrolucke, senior director of Mission Engagement and Communication for Ohio's Hospice. "We always **kept in mind the end user** — whoever was picking up that piece of collateral or seeing a forwarded email that we had created."

Some of the most popular items were technology **"How-To's" to help inexperienced users** master the arts of video chats and virtual meetings on any device and any platform. How to don and doff PPE was equally popular but even more essential from a health and safety standpoint.

"One thing our response to the pandemic has done, was to **demonstrate in real time** and on a daily basis the value of our affiliation, in having Ohio's Hospice," Wagner notes. "We not only **shared resources**, but we learned from each other, supported one another. That is exactly the way the model is supposed to work."



Meeting Community

Inpatient

COVID-19: Opening Doors and Hearts to COVID-Positive Patients

Setting policies and procedures for inpatient units during the COVID-19 pandemic represented **one of the most challenging issues for hospice providers** across the country. With both freestanding hospice inpatient care centers and units housed within area hospitals, Ohio's Hospice needed to create policies not just to **ensure the safety of patients**, staff and visitors, but also to respect the policies of host hospitals, as appropriate, follow the known science, and reflect the special circumstances of caring for patients with a limited time to live.

Whether to admit COVID-positive patients was one of the first and most critical questions hospices faced. For Ohio's Hospice, the answer was: "Of course." This proved to be as important to area hospitals, **skilled nursing and assisted living facilities** as it was to hospice patients and their loved ones.

Christy Michaels, MSW, LISWS, APHSW-C, director of Clinical Operations at Ohio's Hospice LifeCare, reports that their leadership team reached out to the local hospital and assured them that they would be willing to take COVID-positive patients. "If there's an overflow (of COVID-positive patients), **we want to help out any way we can,**" Michaels says. "We kept our census low in our inpatient unit just so we'd be able to help out."

Ohio's Hospice created isolation units for COVID-positive patients within its inpatient care centers. At a large freestanding care center like Ohio's Hospice of Dayton, that was a matter of isolating an entire hallway. At a smaller inpatient care center, like at Ohio's Hospice LifeCare in Wooster, Ohio, **welcoming COVID-positive patients was a matter of designating** a handful of isolation rooms at the end of a hallway.

To provide the care to COVID-positive patients, Ohio's Hospice asked for nurses and nursing assistants to volunteer to care for those patients, according to Yvonne

Need: Care

“It was crucial that whatever visitation policies we put into place, they not only provided safety for patients and staff but also allowed us to honor patients at the end of life and allowed them to have as much closure at end of life as possible.”

-Yvonne Turner, vice president of Clinical Care and chief nursing and care officer for Ohio's Hospice of Dayton

Turner, vice president of Clinical Care and chief nursing and care officer for Ohio's Hospice of Dayton. Social workers and chaplains were allowed on the isolation units only on an as-needed basis, Turner explains, with telehealth visits offered to patients and families as an alternative. For everyone's safety and well-being, volunteers were not permitted inside the inpatient care centers, she adds.

Although **visitation never was shut down entirely**, visitation policies were tightly restricted in the early months of the pandemic and then gradually loosened as more was learned about how the virus is transmitted and as PPE became more readily available. “It was crucial that whatever visitation policies we put into place, they **not only provided safety** for patients and staff but also allowed us to honor patients at the end of life and allowed them to have as much closure at end of life as possible,” Turner says.

That generally meant only one designated visitor, following strict guidelines for donning and doffing PPE

under staff supervision, was allowed for the duration of a patient's stay. Since visitors were not allowed to leave and return the same day, Ohio's Hospice provided meals for visitors to enjoy in the patient's room.

To **facilitate video calls with other family members and friends**, every patient had access to Ohio's Hospice-supplied iPads. To make it easy for visitors to have **“window visits”** with patients, Ohio's Hospice placed a location ID on the windows of each room so loved ones could easily find a patient's room.

As much as has been done, there's more that can be done, Wagner notes. “I was at Ohio's Hospice of Dayton one day. It was raining. **I saw someone with an umbrella** standing outside a window in the rain. This was possibly the **last time** this person would see their loved one. It was so emblematic of what the community was going through. And **it reaffirmed for me** we have to find ways to do more.”







Meeting Community Need:

Grief & Bereavement

COVID-19: Working on the New Normal for Grief and Bereavement

“Ohio’s Hospice and its affiliates are still working on the new normal when it comes to grief and bereavement services for the community,” says Lisa Balster, MA, MBA, LSW, FT, director of Patient and Family Support Services for Ohio’s Hospice.

The pandemic initially wreaked havoc on the broad grief and bereavement program at each Ohio’s Hospice affiliate and associate member. In-person, one-on-one, and group counseling sessions were canceled. Children’s summer grief camps were canceled. Community-wide memorial and remembrance **ceremonies were canceled.**

But Ohio’s Hospice grief counselors quickly pivoted and **began to shape the new normal.**

“Fortunately, we have a really strong individual counseling program,” Balster explains. “It’s our forte. **We do it for children, teens and adults.**”

And with chaplains and social workers on patient care teams being limited in the private homes, nursing homes and assisted living facilities they could visit, they moved right over to reaching out with calls to the bereaved, according to Renee Sparks, general manager and executive vice president for Ohio’s Hospice of Central Ohio. Prior to the pandemic, she adds, it could prove difficult for grief counselors to reach the bereaved by phone. “But during COVID, we’ve seen a definite increase in the number of people accepting a phone call and the amount of time they were willing to spend on the phone with our grief counselors. It’s been a big change, a huge impact,” she says.

Balster prefers the individual grief counseling model for children and adults beginning their grief journey. “The newly bereaved are not in a place to share. But as time goes on, they would have something to give and to receive in a group session,” she says. “While for-profit hospices have proliferated throughout Ohio, few, if any, offer the individual counseling that Ohio’s Hospice provides — in or out of a pandemic.”

The various children’s grief camps at Ohio’s Hospice affiliate and associate members have been most sorely missed in this year of the pandemic. In some cases, grief counselors **put together a combination of individual activities and video calls** to hold virtual grief camps for participants and their parents or guardians.

But while the pandemic initially upset grief programs, it wasn’t long before it was busier than normal for the **more than a dozen grief and bereavement counselors** at Ohio’s Hospice. Balster shares, “We’ve been able to make our time count in a much more efficient way. No windshield time, more time for counseling. I think we’re going to learn some things while we’re busy doing this.”

“Fortunately, we have a really strong individual counseling program. It’s our forte. We do it for children, teens and adults.”

-Lisa Balster, MA, MBA, LSW, FT, director of Patient and Family Support Services for Ohio’s Hospice

Meeting Comm

“Our volunteers have proven their ingenuity and resiliency time and time again throughout the pandemic.”

-Renee Sparks, general manager and executive vice president
of Ohio's Hospice of Central Ohio



Community Need: *Volunteers*

COVID-19: Volunteers Continue To Make a Difference

When the COVID-19 pandemic was at the crest of its initial wave, when PPE was nearly impossible to find, when knowledge about how the virus was transmitted was still hard to pin down, when hospice volunteers were sent home for their own safety as well as that of hospice patients and their in-home caregivers, talented Ohio's Hospice volunteers all across the state stepped up and delivered the most precious of timely gifts: homemade face masks, gowns and visors to keep patients, their loved ones, and Ohio's Hospice staff safe and well protected.

"Our volunteers have proven their ingenuity and resiliency time and again throughout the pandemic," notes Ohio's Hospice of Central Ohio's Sparks.

Volunteers who normally were devoted to visiting patients in person at the bedside began to check in with patients regularly by phone or even by video calls. Many wrote cards and letters not just for hospice patients but all those residents of nursing homes and assisted living facilities feeling the loss of routine, visits from loved ones, and socializing with friends and neighbors.

The pandemic canceled the traditional volunteer appreciation luncheons and gatherings associated with National Volunteer Week in April. But that didn't stop Ohio's Hospice from finding new ways to thank its hundreds of volunteers across the state. Staff, for example, staged appreciation events during which

volunteers drove into their local Ohio's Hospice office parking lot to be greeted by a socially distanced, sign-holding cheering section of hospice staff members and then picked a goodie bag stuffed with small gifts, treats, thank-you cards and other fun items.

Volunteers are an integral part of American Pride® Veteran Care by Ohio's Hospice, a program that honors the service of Veteran patients and assures them of receiving the highest quality of care. In addition to celebrating and thanking Veterans for their service, American Pride assists patients in obtaining access to all the benefits to which Veterans are eligible, provides spiritual support and addresses individual post-traumatic stress issues.

In pre-pandemic times, Veteran or active-duty volunteers would visit hospice patients who are Veterans and honor them with a brief ceremony that would include a hand salute, certificate of appreciation and a **pinning as well as other meaningful tributes**, according to American Pride Program Coordinator Bob Allen, a retired U.S. Army captain. Allen adapted the presentation to allow for a Veteran volunteer to conduct the ceremony by telephone or video call while an Ohio's Hospice staff member in full PPE was at the patient's side to present the pin, certificate and other mementos.

It is an **experience that is equally moving for patients and their loved ones**, Allen notes. And something Ohio's Hospice American Pride volunteers are eager to resume in person when the all-clear signal is given.



Meeting Community Need:



Supporting Community-Based *Healthcare and Senior Living Providers*

COVID-19: Working With and Supporting Community Care Partners

While Ohio's Hospice and its staff have been on the front lines of the response to the COVID-19 pandemic, we also recognize that the hospitals, physician offices, nursing home and assisted living communities with which we partner have been working and sacrificing on the front lines as well. So much of the Ohio's Hospice response to the pandemic has also involved supporting community care partners.

Commenting on the amount and transparency of communications with community care partners, particularly at the outset of the emergency, Ohio's Hospice Chief Strategy Officer Kerry Hamilton says, "I think that **we were well connected with our partners** in ways that others probably were not. In many ways, we were looked to as a resource for vital information. Many of our senior living partners were apprehensive and fearful. We were able to **provide the information they needed** to formulate their own response to the pandemic. They appreciated the transparency. We also shared the reality of what was happening with Ohio's Hospice."

The first item on the agenda was to compile a master list, market-by-market, of the COVID-19 policies and procedures at each nursing home and assisted living community as they related to hospice patients. **"Our referral sources were thrilled with that because they felt we were there to support them.** We weren't causing them any additional stress," says Gail Stokes, senior director of Business Development. "We kept an updated database for all Ohio's Hospice clinical staff, so before they would go to a building they knew what they needed to do to comply with that facility's particular **safety protocols.**"

The Ohio's Hospice support for community care partners also meant recognizing the hardship they faced on a daily basis and making sure the staff knew they were appreciated. "At the start of the pandemic, we brought in lunch to various nursing homes and assisted living facilities," explains Jonathon Smith, Business Development team leader. "We wanted to **support local restaurants and local businesses, to help them out** during this difficult time." In addition to lunch, Ohio's Hospice community liaisons assembled and dropped off goodie bags, or **"kindness baskets,"** filled with snacks and thank-you cards for every employee at a nursing home or assisted living community.

According to Business Development Team Leader Karen Parziale-McFall, in some areas, Ohio's Hospice held box-lunch, socially-distanced parking lot picnics where facility staff could offer suggestions as to how Ohio's Hospice could continue to support patients and their families as well as staff. In other areas, Ohio's Hospice **joined with other local providers** and businesses to stage drive-by parades, often recognizing three or four nursing homes and assisted living facilities in a day with decorated cars, hand-made signs, horns-a-honking and leave-behind thank-you **goodie-bags.**

Ohio's Hospice also facilitated virtual networking events for local healthcare professionals, bringing in Ohio's Hospice counselors and other **experts to offer tips and counseling** on topics like self-care, grief and loss, and care planning.

"It's about more than meeting immediate community need," Hamilton says. "It's about being an **indispensable member of the community,** understanding community need, and having the resources and the in-house expertise to respond to those needs."

Economic *Impact*

Overview of Budget, Number of Employees, Payroll, Payroll Taxes Paid, Charity Care, and Uncompensated Care

A Mission-Driven Healthcare Provider Leading in a Time of Constant Change

No matter how you crunch the numbers, Ohio's Hospice is one of Ohio's and **one of the nation's largest** and most significant not-for-profit providers of hospice, palliative and serious illness care. With an annual budget of \$170 million, Ohio's Hospice employs more than 1,400 staff across 44 Ohio counties, all committed to providing superior care and superior services to patients and their loved ones facing a life-limiting illness.

Like most not-for-profit hospices, approximately 70 percent of the Ohio's Hospice budget goes to staff salaries and benefits, **underscoring the value of the hands-on care** and compassion that has been the hallmark of mission-driven hospice since the first volunteer hospice appeared in the United States in 1974.

That size, strength, breadth of capabilities and fiscal soundness, as we've seen in the previous pages, enabled Ohio's Hospice to respond quickly, **effectively, compassionately and responsibly** to the COVID-19 pandemic. And it will continue to be the foundation of Ohio's Hospice as it works to define and **meet community need across the communities** it is privileged to serve.





Thanks to an active, engaged Board of Directors focused on its fiduciary responsibilities, Ohio's Hospice possesses a sound balance sheet, one that gives it the funds to:

- **Invest and innovate** — driven by its values — to continue to fulfill its mission.
- Continue its leadership role among the nation's most **influential and innovative providers** of serious illness, end-of-life and hospice care.
- Continue to **attract, develop and reward** a dedicated staff of end-of-life care experts.
- Share best practices with other like-minded, community-based organizations.

Ohio's Hospice

Service Area

**Supporting communities
throughout Ohio.**

Ohio's Hospice Affiliates



Ohio's Hospice Associates





Ohio's Hospice Affiliates

Community Care Hospice
Ohio's Community Mercy Hospice
Ohio's Hospice at United Church Homes
Ohio's Hospice LifeCare
Ohio's Hospice Loving Care
Ohio's Hospice of Butler & Warren Counties
Ohio's Hospice of Central Ohio
Ohio's Hospice of Dayton
Ohio's Hospice of Fayette County
Ohio's Hospice of Miami County

Ohio's Hospice Associates

Community Hospice
Valley Hospice

www.OhiosHospice.org

Key Facts for Ohio's Hospice

1,800+
Average
Daily
Census



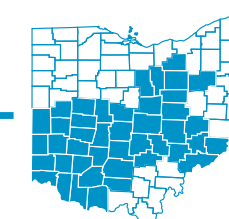
1,400+
Staff



1,300+
Volunteers



44
Counties
Served



10
Affiliate
Members





Our Mission is to celebrate the lives of those we have the privilege of serving by providing superior care and superior services to each patient and family.

