

The Brooklyn Ladies



MJHS HOME CARE
MJHS HOSPICE AND
PALLIATIVE CARE
MENORAH CENTER
FOR REHABILITATION
AND NURSING CARE

ELDERPLAN MEDICARE
ADVANTAGE HEALTH PLANS
HOMEFIRST MANAGED
LONG-TERM CARE
MJHS INSTITUTE FOR
INNOVATION IN
PALLIATIVE CARE
MJHS FOUNDATION

MJHS *in* FOCUS

Winter 2016

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Golden STAR Program

Bringing Added Support to Families in Need

MJHS has the honor of caring for approximately 950 hospice patients and their families daily. The Home Health Aide (HHA) is an integral part of the team, providing care for the patient and often much needed support for their caregivers.

As a result of having an HHA in the home, many family caregivers are able to keep their jobs and continue supporting their families. HHAs also make it possible for many caregivers to look after themselves. This respite care can be essential to caregiver well-being as well as their ability to continue providing ongoing support for their ill loved one.

Unfortunately, during the past few years, the shift to managed care has resulted in a dramatic reduction of approved HHA hours. Expected future reductions in reimbursement rates are likely to drive these hours down further. Increasingly, this leads to a significant gap between the HHA needs of caregivers and our financial ability to go above and beyond what is provided by the hospice benefit.

Thanks to a three-year grant from the Golden Family, we were able to restart an MJHS program called STAR (Supportive Treatment And Resource) fund.



HHA Provides Patients Much Needed Support

Continued on page 2



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Golden STAR Program *Continued from cover*

The Golden STAR program is used to provide additional HHA hours—over and above what patients are eligible to receive or is covered by their managed care plan—for families in crisis.

Since receiving the grant in mid-May, 25 families have already been awarded Golden STAR hours ranging from as few as 5 hours to as many as 26 hours per week.

For one family, the hours awarded meant that a caregiver could return to work, knowing that her father would not be left alone for the hour between work ending and her return home. This seemingly simple addition of one hour each day ensured that her father could remain safely at home, rather than be admitted to a nursing home.

60 hours were given to another family over the course of six weeks. During this time, the family was able to focus on completing a Medicaid application. Once the patient qualified for Medicaid, and an assessment was conducted, she was awarded an additional 11 hours of HHA care per day paid for by New York State. The extra Golden STAR hours also made it possible for the patient’s elderly husband—

her primary caregiver—to see his own doctor. This led to him being personally awarded HHA hours for a newly diagnosed medical condition.

Another recipient of Golden STAR hours was a family hit with an unexpected and heartbreaking crisis. Our patient was being cared for by her two adult daughters, one living in New York and the other traveling in from Arizona. Without warning, the

daughter living in Arizona had a heart attack and passed away. The

15 hours awarded to the family were used to ensure that the surviving daughter could plan and attend her sister’s funeral, knowing their mother would be safe and properly cared for at home.

On behalf of MJHS, the families who have already received Golden STAR Hours and those who will in the future, we extend our heartfelt thanks to the Golden Family. ■

This seemingly simple addition of one hour each day ensured that her father could remain safely at home, rather than be admitted to a nursing home.

MJHS Demystifies Hospice and Palliative Care



An intimate group of friends and supporters recently met at the Penn Club of New York to learn more about MJHS and the fundamentals of hospice and palliative care. The evening began with a cocktail reception and then transitioned to a program featuring MJHS President and CEO Alexander S. Balko; The New Yorker Staff Writer Larissa MacFarquhar (who recently profiled a MJHS Hospice nurse in the magazine); as well as Dr. Russell Portenoy, the Chief Medical Officer of MJHS Hospice and Palliative Care.



First in the Nation

The Joint Commission Awards Their **First Community-Based Palliative Care Certification to MJHS**

MJHS is the first health care organization in the nation to receive a new Community-Based Palliative Care (CBPC) Certification! This incredible award from the Joint Commission acknowledges our leadership in the field and reinforces our commitment to providing high quality, community-based palliative care to patients and families in their homes. The honor is particularly significant because the Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care.

How did we earn this distinction? Through a rigorous onsite review and evaluation of our:

- **Robust interdisciplinary care team;**
- **Customized, comprehensive care plans;**
- **After-hours care and services;**
- **Use of evidence-based clinical practice guidelines; and**
- **Hand-off communications process.**

“We applaud MJHS for promoting the recognition of this formalized scope of professional practice by pursuing this rigorous certification in an effort to improve patient safety and quality of care for palliative care patients,” said Margherita Labson, RN, MSHSA, CPHQ, Executive Director, Home Care Accreditation, The Joint Commission.

“The framework of CBPC certification will help MJHS design, deliver, and validate patient-centered care and services, as well as provide opportunities to promote improved outcomes and strengthen operational efficiency.”

RECERTIFIED!

In 2016, MJHS Home Care successfully underwent its triennial accreditation survey from The Joint Commission.

The MJHS Home Care Heart Failure Disease Specific Care Management program was recertified by The Joint Commission earlier this year.

“Being first in the nation to receive Joint Commission Certification in community-based palliative care is a significant validation of our longstanding commitment to evidence-based practice, quality, safety, and positive patient outcomes,” said Lenard L. Parisi, RN, MA, CPHQ, FNAHQ, Vice President, Quality Management. “It also signals the health care sector’s growing recognition of the important role palliative care should play in patient care and underscores the importance of delivering it with compassion, as well as with cultural sensitivity.”

“The Joint Commission commends MJHS Home Care for continuing to demonstrate remarkable leadership in heart failure care and remaining dedicated to providing quality care to a very vulnerable patient population with unique needs,” said Wendi J. Roberts, RN, Executive Director, Certification Programs, The Joint Commission. ■

MJHS Institute for Innovation in Palliative Care Expands Fellowship Program



The Institute Team and The 2016 MJHS Fellows

MJHS understands the compelling need for more clinicians to be trained as palliative care specialists. That's why in 2015 the MJHS Institute for Innovation in Palliative Care, working in concert with MJHS Hospice and Palliative Care, launched the new Hospice and Palliative Medicine Fellowship Program for physicians and nurse practitioners.

After being accredited by the **Accreditation Council for Graduate Medical Education in record time**, our fellowship program achieved significant accomplishments within its first year. New training programs were established within the widespread clinical operations of the MJHS Hospice and Palliative Care organization. To keep pace with developments in fellowship training nationwide, the process for recruiting fellows was streamlined through the Electronic Residency Application Service, and we adopted the National Resident Match Program to facilitate fellow selection.

For the fellowship's first year, which began in July 2015, we received twelve applications and selected three outstanding physicians. We also recruited our first Nurse Practitioner Fellow. Each fellow managed approximately 500 patients during the year under the supervision of our board-certified faculty. They also received mentorship and training in all aspects of specialist palliative care and hospice—from symptom control, to management of psychosocial and spiritual distress, advance care planning, medical decision making, family meetings, and

culturally competent care. Since ending their training, our first group of fellows has begun new careers as palliative medicine specialists. One was hired by Jacobi Medical Center in the Bronx, another joined New York Methodist Hospital in Brooklyn, and the third joined the faculty of the University of Vermont Robert Larner M.D. College of Medicine.

For the second training year, we received sixty applications for our Physician Fellowship and selected four excellent candidates; we also selected a second Nurse Practitioner Fellow. These fellows are now steeped in the educational process, with training from

MJHS's senior physicians and nurses to provide excellence in care and a commitment to best practices for all of our patients. We have enhanced our training program with a stronger didactic program, more intensive work in the inpatient setting, more experience with pediatric palliative care, and more involvement in research.

Key support for these programs has come from The Y.C. Ho/Helen & Michael Chiang Foundation, the Harold and Isabel Feld Philanthropic Fund of the Jewish Communal Fund, and The Leir Charitable Foundations. In September 2016, we were selected by the American Academy of Hospice and Palliative Medicine as a recipient of its new Kindred Gentiva Hospice Foundation Fellowship grant to support physician training.

Our physician and nurse practitioner training programs in hospice and palliative care are among the strongest in the country. Thanks to ongoing support from our generous donors, we will continue to train young professionals in specialist palliative care. ■

New training programs were established within the widespread clinical operations of the MJHS Hospice and Palliative Care organization.

When Two Missions Align

The Manne Family Foundation Funds Pediatric Care Coordinator

“The Manne Family Foundation was founded in 1997 to give back something and provide assistance and improve the lives of people in our great country”

— Stan Manne

The topic of palliative care has always been one that is near and dear to my heart. My work in pediatric oncology at Memorial Sloan Kettering Cancer Center (MSKCC) focused on working with families facing life-threatening illnesses. In my role as a child psychologist, I followed patients and families through the entire process...whether that be cure or sadly, death.

It has always been my view, that palliative care is treated like a “second-class” citizen by the medical



care was provided to patients and family earlier in the process...not just during last days of life.

I have known Dr. Russell Portenoy (Chief Medical Officer of MJHS Hospice and Palliative Care and Executive Director of the MJHS Institute for Innovation in Palliative Care) since 1989 when I was at MSKCC. I watched him do pain rounds. It was one of my favorite learning experiences.

So, when I learned about the MJHS Pediatric Care Program, and the compelling need for a Pediatric Care Coordinator to support programmatic growth, I was immediately engaged. The program was ready to assume the care of many more children and families, but it would require a

staff member who could focus on outreach to the many children’s hospitals and health organizations in New York and provide the oversight necessary to sustain quality and consistency of services.

As a not-for-profit organization, MJHS could not hire this much needed position without financial support. The Manne Family Foundation, run by father and myself, has a history of embracing children’s health issues. That’s why when I brought my father the idea of funding the Pediatric Care Coordinator, he was immediately on board. Our two missions were perfectly aligned.

I wanted to be a psychologist starting when I was 13 years old. I guess helping people has always been part of me. My father is the philanthropist and my role model. He is a great man. Self-made. The child of an immigrant, he was born in the Bronx, graduated from Bronx High School of Science and then attended Columbia University on full scholarship. He achieved the American Dream and wanted to give back by helping others. He’s the real thing and I admire him so much. We both feel blessed to be able to support such a worthwhile organization and program. ■

— Sharon Manne

MJHS extends our thanks to **THE MANNE FAMILY FOUNDATION** for funding this critical position. The Pediatric Care Coordinator has been hired and is already playing a pivotal role in meeting the quality and expansion goals of our Pediatric Care Program.

ABOUT THE MJHS PEDIATRIC CARE PROGRAM

The **MJHS Pediatric Care Program** is a key initiative created in response to a profoundly important unmet need. An estimated **32,000 children** in New York City have severe chronic illnesses. This number includes children born with progressive congenital disorders and those who develop serious illnesses, such as cancer during childhood. Whether or not cure is possible, these children and their families often experience the distress of physical and emotional symptoms, and their parents can be overwhelmed by the burdens associated with navigating the health care system at large, while trying to maintain well-being of the family.

The MJHS Pediatric Care Program is unique within the greater New York area. It includes both palliative care and hospice for our youngest and most vulnerable patients as well as their families. MJHS also offers the only hospice inpatient residence in New York City to care for children as well as adults.

The hospice program provides home visits by a physician, nurse, social worker, chaplain and, when appropriate, a creative arts specialist. The palliative care component of our program, is available for families who are ineligible for hospice or decline the benefit. This program also offers home visits by a pediatrician (who is a specialist in palliative care), support from our Pediatric Care Coordinator (through telephonic outreach and secure video-conferencing), and bereavement counseling for parents and siblings. When appropriate, home-based access to a social worker, a chaplain and a creative arts therapist are also provided.



I have been employed by MJHS for nearly 20 years. For the last 12 years, I've worked for MJHS Health Plans as an Enrollment Supervisor for HomeFirst, a product of Elderplan and one of the largest managed long-term care plans in New York.

HomeFirst is committed to providing care for at-risk members of the community, like Susan. At 43, she's one of our younger HomeFirst members. She has significant mental health issues, but is able to live in the community in what is known as "supportive housing" that provides a team of psychiatrists and social workers as an important safety net. She has no close family and is basically on her own.

Susan is a very sad story. While she had significant physical problems that ended her ability to work in 2006, her psychiatric issues didn't really emerge until four years ago when she was sexually assaulted. Since that time, she has suffered from terrible depression, anxiety, paranoia, PTSD, and she was also diagnosed with schizophrenia.

As a result of the sexual assaults, she does not shower; instead Susan takes what she calls "bird baths" at her sink. She sleeps in her clothes and shoes, has no mirror—because she can't even look at herself—and won't let anyone touch her.

Overtime, her condition deteriorated, Susan started to isolate herself. Concerned about her worsening condition, she was referred to our program by her social worker. Susan was pleasant

HomeFirst

Helping Susan Reconnect With The World Around Her

and cooperative during the assessment process, and was enrolled into HomeFirst. Just a few days into her enrollment, however, her Care Manager received a concerning call from the home health aide agency informing us that Susan was reluctant to accept assistance

with personal care. The HomeFirst Care Team, together with the social worker from her supportive housing, decided to set up an in-home assessment visit. Both the HomeFirst licensed social worker, with extensive experience in mental and behavioral health, and the Clinical Supervisor were present for the discussion.

During the visit, we explained to Susan that under Medicaid guidelines we would be required to dis-enroll her if she was unwilling to accept services. We also reminded her of all of the ways HomeFirst could help make her life better. Much to our surprise, with tears filling her eyes, she pleaded with us not to dis-enroll her. Susan made a commitment to start accepting the care that she so desperately needed but found so hard to accept.

We developed a plan that we shared with Susan's psychiatrist. With everyone on board, so began Susan's journey back. To help build trust we made sure that Susan was always seen by the same home health aide. That continuity of care, and the warmth and compassion she experienced, began to break down her defenses.

We started to bring Susan back slowly. At first, it was cooking her meals and brushing her hair. Soon, Susan let us help her change her shirt. And then—a breakthrough. Susan let her aide remove her socks and soak her feet, coated with years of dirt.

Continued on next page

We must admit, that when the team learned she actually let her aide complete the simple act of soaking her feet, we were so proud of the milestone. Within a month, Susan was showing tremendous progress.

As the relationship with her home health aide grew, so did her confidence and willingness to accept care. When we called to check on Susan a month later, she had continued to make progress and was allowing her aide not only to wash her feet but also her legs.

Susan's psychiatrist reports that she's doing a hundred times better than when we started. The team at HomeFirst takes great pride in knowing that we've played a major role in helping her get there. Without question, HomeFirst, and our compassionate team of professionals, play an invaluable role in caring for at-risk members of the community. ■

—Myrna C.
Enrollment Supervisor, HomeFirst

To learn more about HomeFirst visit www.homefirst.org

**Some information, including the name and picture, was changed to protect member privacy.*

Supporting What's Needed Most

I've known Linda Schur Scalettar, Chief Development Officer for MJHS, since high school. I've also worked with her in support of other philanthropic endeavors that provided great personal fulfillment. So when Linda and I met recently to discuss how I could help MJHS, I asked the question I always ask "What do you need most?"

I like to fund initiatives that will continue on even after I stop funding them. I have found along the way that if it "matters most" to the organization, they will fulfill their commitment to continue the program long after my funding is gone.

Linda highlighted three priorities ranging from the MJHS Hospice Inpatient Residence—with a focus on pediatric care, the system-wide MJHS Patient Care Fund, and hiring a part-time music therapist for residents of Menorah Center for Rehabilitation and Nursing Care (also part of the MJHS family).

My wife Diana and I were already aware of, and inspired by, the positive impact music therapy can have on individuals with dementia. We also quickly learned about the ground-breaking work MJHS has done in this area. The choice seemed clear.

We decided to fund a part-time music therapist for three years at Menorah to work with residents. Not only will the music therapist work directly with some of Menorah's most vulnerable residents...but the therapist will also educate staff, family members, and caregivers about the power of music therapy, documenting its effectiveness along the way.



Music Therapists, Bringing Music to the Bed-side

While we view *Tzedakah* (the Hebrew word for acts of charity) as an obligation, it's one Diana and I happily embrace. Supporting MJHS, and the music therapy program, will make a significant difference in the lives of so many patients and families and will allow us to fulfill our goal of generating the greatest impact possible. ■

—Ira Riklis

Soothing sounds of music helps ease the symptoms of residents who are diagnosed with dementia and Alzheimer's. MJHS, and the patients and families touched by our dementia program, extend our gratitude to **DIANA AND IRA RIKLIS** for their generous support.

Honoring Veterans in Word and Deed

When men and women who have served in the military are at the end-of-life, their needs—and their memories—are often influenced by their time in uniform. Because of this, it is a great honor for MJHS to be a top level partner in *We Honor Veterans*, a program of the **National Hospice and Palliative Care Organization (NHPCO)** in collaboration with the **Department of Veterans Affairs (VA)**. This pioneering program focuses on respectful inquiry, compassionate listening, and grateful acknowledgment.

By recognizing the unique needs of veterans and their families, our hospice team is able to be sensitive to how their military experience might affect their needs at the end-of-life.

Old Age is a Blessing

Herbert Epstein was a retired captain, a WWII veteran who was at Normandy and was one of the liberators of Buchenwald. The Williamsburg, Brooklyn native was also a MJHS Hospice patient who was honored for his incredible service to this country.

A member of the 512th Division 1st Army, Capt. Epstein was in heavy maintenance and was stationed in France, Brussels, and Germany. When he and his fellow soldiers reached Buchenwald, the captain says dead bodies were stacked in such high piles, they looked like wood from a distance.

This devastating sight was one that he never forgot and one of the many reasons why he said: “old age is a blessing.” ...A blessing because he was fortunate enough to have returned home to the love of his life, married, created a family, and lived long enough to meet his first great grandson.

We learned this life story because Capt. Epstein had a strong connection with his hospice team. He felt safe enough to talk about the horrors he witnessed, and his care team took the time to listen and be conscious of triggers.



A recent celebration of Herbert Epstein's military service planned by MJHS. Shown with members of the hospice team, a retired major, and JROTC cadets. It goes without saying that Capt. Epstein was a true inspiration, role model, and hero. We are so grateful for his service to this nation and honored to have cared for him. Go to the photos section of [facebook.com/MJHS01](https://www.facebook.com/MJHS01) to see more pictures.

Capt. Epstein was drafted by the U.S. Army in 1943, a year after he graduated from Brooklyn Law School and had started his career as a practicing attorney. Following his military service, he married Celeste in 1946. Together they had four children. As a civilian, Herbert took his family to Brussels, Paris, and Normandy—they stopped at many cemeteries and paid their respects to fallen heroes of different nationalities and backgrounds.

For many years, Capt. Epstein stayed in touch with men from his company. That connection was very important. He died peacefully at home, surrounded by family, at the age of 99. ■

At the request of the **HONORABLE JOSEPH CROWLEY**, three American flags were recently flown over the U.S. Capitol to honor our veterans at MJHS Hospice. These flags will now escort veterans at the MJHS Hospice Muriel and Harold Block Residence in the Bronx during part of the journey to their final places of rest.

Brightening Up Rooms, One Rose at a Time

“No one has ever given me flowers before,” commented Jonathan, a patient at the MJHS Hospice, Mollie and Jack Zicklin Residence in Riverdale. “They really brighten my room.” Jonathan is just one of the hundreds of MJHS Hospice patients who’ve received a flower delivery from Repeat Roses since our partnership with that company began in February of this year.

Repeat Roses is an organization that picks up flowers from events throughout the country and repurposes them for distribution to nonprofits. MJHS, understanding the impact that flowers can have on our hospice patients and their family members, sought out the help of Repeat Roses. If a patient or family member accepts the delivery, the arrangement is placed by the bedside and replaced weekly. The response has been overwhelming. These beautiful arrangements have the ability to lift spirits and offer comfort during what can often be a challenging time.

Repeat Roses started in response to the overwhelming waste they saw in the event industry, with thousands of tons of flowers being put in the trash as soon as an event ended. They knew they could do better and set out to shift the paradigm by reimagining the single-use floral arrangement. Today, in addition to just repurposing the arrangements, they also compost the flowers after they have wilted, making them a zero-waste service from start to finish. ■



We greatly appreciate the support we receive from **REPEAT ROSES** and look forward to continuing a partnership that brightens so many rooms and lives through the gift of flowers.

Providing an Outlet for Expression Morgan Stanley Volunteers Help Assemble Art Kits for Our Patients

A hundred art kits, for kids of all ages, were distributed across all MJHS Hospice Residences and Inpatient Units thanks to the generosity of Morgan Stanley. As part of Morgan Stanley’s Global Volunteer Month, dozens of volunteers personally assembled kits for MJHS patients and their family members, filling them with donated art supplies, coloring books, and toys.



At the MJHS Hospice, Muriel and Harold Block Residence in the Bronx, a patient passed while her daughter and eight-year-old grandson were at her bedside. The grandson became inconsolable. A social worker at the Block Residence immediately gave him one of the art kits to help ease his sorrow and provide an outlet for him to express his feelings. Not only did the young boy calm down, but he also asked to take one home to help his little sister. Amidst profound grief, the mother took comfort in the nurturing instincts of her son.

MJHS, a pioneer in the field of Creative Arts Therapy for hospice patients and their families, understands the value of expressing grief through art. These kits play a pivotal role in that process. ■

The children receiving the art kits are either MJHS Hospice patients or a young family member of a patient.

We are so grateful to **MORGAN STANLEY**, and their workforce volunteers, for these transformational art kits.

A Fresh Perspective



Farmers markets are at their best in the summer. They draw record crowds, showcase delicious fresh fruit, and create a wonderful sense of community, including at **Menorah Center for Rehabilitation and Nursing Care**.

Thanks, in part, to a microgrant from UJA, Menorah’s popular farmers market expanded this year—after a wildly successful debut in 2015. Visitors were wowed by the wider range of produce selections, as well as wheelchair-friendly displays. And they were delighted to meet young people participating in the UJA initiative called Live With Purpose, which helps connect New Yorkers with volunteer opportunities like our farmers market. As the summer progressed, UJA got others involved, too. Sara Liebowitz, of the boutique catering company called Kitchen Couture, donated needed kitchen equipment.

The farmers market is the brainchild of Loyola Princivil-Barnett, Menorah’s administrator. She started with the simple idea that residents and patients would like to re-experience a beloved summer ritual. What she created is a go-to summer spot for our residents, patients, their families, and our staff.

MJHS thanks UJA-Federation of New York for their ongoing support. ■

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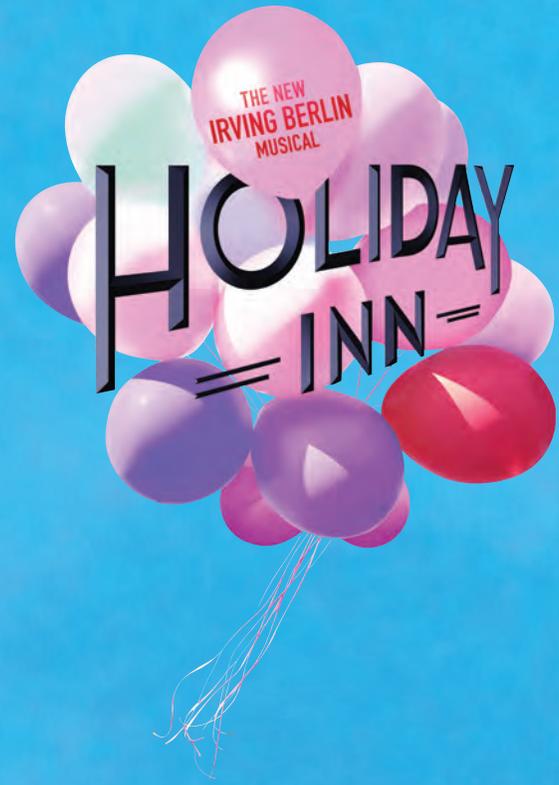
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MJHS Hospice on Broadway receives

RAVE REVIEWS



Hospice on Broadway, our annual fundraiser in support of MJHS Hospice, was once again a huge success and received rave reviews. This classic event, held on **November 9th**, featured cocktails and dinner at the RedEye Grill, followed by Roundabout Theater's production of yet another classic—the Broadway musical *Holiday Inn*.

This year, two distinguished guests were honored:

Gerald J. Ferrante, *Managing Director of Wealth Management Complex Manager* at Morgan Stanley, was recipient of the MJHS Corporate Partnership Award; and **J. Donald Schumacher, PsyD**, President and CEO of the National Hospice and Palliative Care Organization, was presented with the MJHS Humanitarian Award.

MJHS was also honored to have Rhonda Waithe, mother of a current pediatric patient, movingly share her family's experience with the MJHS Hospice program.

A special thank you to our newest sponsor—**Morgan Stanley**—for their commitment to our hospice program and for helping to make the evening a resounding success. We'd also like to extend our gratitude to **Sylvia Golden**, a Roundabout board member and MJHS supporter, for her efforts to bring these two passions together. To our honorees, generous guests, loyal sponsors, board members, senior leadership and staff, thank you all for making Hospice on Broadway a smash hit. ■

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**Thank you for all the ways you come through for the people in our care.
All the best to you and your family this season.**