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of public insurance and private health care or, in other words, health care without health insurance companies. (Besides costing far less, the Canadian system has lower infant mortality and higher life expectancy.)

The Government Accounting Office studied the possibility of using the Canadian approach - also called "single-payer" because there is only one payer for health care in each Canadian province - here and found that it would save money while covering all of us. Studies done at the state level for Massachusetts, California and a few other states support the GAO's finding. Opponents of the Canadian-style approach attempt to sway people by saying that taxes will go up. Taxes will increase, but costly and soaring health-insurance premiums will mostly disappear, out-of-pocket costs will shrink dramatically, and auto insurance premiums and the cost of workers' compensation will decrease. Overall, less money will be required to run this system and it will provide universal and comprehensive care, a great improvement over our current cruel and wasteful situation!

More and more physicians are supporting this approach. In an article in the August 13, 2003 issue of the *Journal of the American Medical Association*, almost 8000 physicians endorsed the single-payer approach to health care. These physicians realize that incremental change has failed miserably, and that the only way that we can afford high quality health care for all is through fundamental change. For more information, see www.pnhp.org/news/2003/august/doctors_call_for_nat.php.

Representative John Conyers from Michigan has introduced a single-payer bill -H.R. 676 - United States National Health Insurance Act (or the Expanded and Improved Medicare for All Act) -in Congress. There are 28 co-sponsors, sadly, none from Colorado. For more information on the bill, visit <http://thomas.loc.gov/> and enter the bill number.

How can you help? - Contact your representative and senators and let them know you want them to support this single-payer bill.

Locally, contact Health Care for All Colorado at 303-277-8306 www.healthcareforallcolorado.org

HCAC is an all-volunteer group working for affordable and comprehensive care for all in Colorado. Nationally, support Universal Health Care Action Network www.uhcan.org or Physicians for a National Health Program www.pnhp.org

"The Americans will always do the right thing - after the've exhausted all the alternatives."

- Sir Winston Churchill

A Small, Quiet Wish

Great Spirit please watch over all who wake, or watch or weep tonight and give your angels charge over those who sleep. Tend your sick ones. Rest your weary ones. Bless your dying ones. Soothe your suffering ones. Pity your afflicted ones. Shield your joyous ones.

All this, for **Love's** sake.

(adapted from St. Augustine's Prayer)



Dignity Care LLC

wishes everyone

A Happy Valentines Day!

volume two ♦ issue one Heartfelt Homecare february 2004

The Dignity Foundation

The first project of The Dignity Foundation is underway. The project called "No One Dies Alone" was instigated by Mary Kirk's personal experience of her father's passing. Her observation that her father was quiet and reassured when family members were in the room with him and that he was agitated and seemed distressed when they were not, triggered Mary's sincere desire for everyone to have someone there with them when their time has come to leave this life. (Unless it is their preference to be alone.)

Most Americans die in a hospital and many of those are alone when they die. Although things are improving, there is much more awareness and consciousness needed about the dying process. There are many instances when a hand held in the last moments would comfort and honor the person leaving this life.

Our idea for this program is TO BE THERE: to be there for the person passing, in whatever capacity brings them solace and comfort; to be there for the family, to offer support, relief and consolation; and to be there to help any other team that is supporting the dying person. Our mission is to coordinate a group of volunteers who are trained specifically to interact with those who are in the midst of this special time or if necessary to provide paid care givers who are also trained for this work. Some people may have no family or friends nearby and we would establish a team of people to be with them around the clock. For others it would be a matter of filling in when family and friends need to rest or need time to cope with other aspects of their lives.

To this end, Mary and I have taken the Volunteer

Hospice training and the volunteer training at the hospital followed by the Chaplaincy training. Our hope is to co-ordinate with volunteer groups, the hospitals, Hospice and the parishes within Boulder County, so that when a need arises we can be there to help in any way we can.

We are waiting for our 501-C3 (non-profit status) to begin serious fund-raising although some monies have already been accumulated. Anyone who wishes to participate in this program or anyone who would like to make a donation to support this project, please contact us at 303-444-4040.

NHH

Dignity Care Recommends Using The Five Wishes:

The Five Wishes is a legal document in Colorado (and 34 other states) which everyone (aged 18 or older) should know about. Most of us choose to ignore the possibility of our becoming seriously ill or seriously injured. Most of us choose not to think about the possibility of our dying. But we are all aware that tragedy can strike any of us - at any moment.

The Five Wishes has been called "the first living will with a heart." It addresses not only your medical wishes but your emotional and spiritual ones as well. The "easy to fill out" document offers the opportunity for you and your loved ones to discuss openly what you want and don't want should you no longer be able to make decisions for yourself. By discussing and outlining your wishes you

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Heartfelt Home Care

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Dignity Care, LLC wishes to thank Patricia at AppelfellerARTS for the design of our newsletter. AppelfellerARTS is a full service graphic design company specializing in packaging design.

Hi Everyone!

I hope that you have all had a joyous holiday season and that life is returning to normal... (What's normal anymore??)



Here at the office things are hopping. Aside from things running beautifully at Dignity Care, we are finding our way into the first of the Dignity Foundation projects, "No One Dies Alone". We are excited and grateful that so many

people have been both interested and supportive of this project.

The first part of Dignity Wellness has also started in the form of our acquisition of a V.I.B.E. machine (which stands for Vibrational Integration Bio-photonic Energizer... quite a mouthful!) As we work with our Elders and see the hardships they undergo in their aging process, I have come to be even more adamant about the necessity of preventative care for those of us who are now "embarking" on our own aging "journey". Like the Oasis products that I have been promoting in my previous letters, I am now seriously recommending the use of the Vibe machine as a way of maintaining optimal health.

What does the Vibe machine do?

The Vibe machine is an electronic device that brings the vibrational level of the body's cells back to their natural (youthful) state of being. As we age and toxins accumulate in our bodies, some cells begin vibrating at lower frequencies thus allowing disease into our systems. By bringing the vibrational level of our cells up, we will be helping our body prevent disease. If we have already developed a form of disease it will help our body heal itself by giving it new energy to work with.

If you are interested in experiencing a Vibe session (the first one is offered at no charge) please call us at 303-717-0281.

Stay Healthy and Happy!

Love to you all,

Mary

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make it easier for family or friends to act on your behalf should a crisis occur.

The first two wishes of the document specify your chosen Health Care Agent (the person who will make the medical choices you have requested in your discussion) and the medical procedures you want or don't want (life support devices, surgeries, hospitalization or home care, hiring and firing health care providers, whether or not to authorize medications or medical procedures, etc.). The last three wishes outline how you want to be comforted physically, emotionally and spiritually, before your passing and what you want done after your passing.

Although this is a seemingly unpleasant topic, should tragedy strike, everyone involved will be better prepared to cope with the situation knowing your wishes and desires and beliefs were being followed as you requested. Five Wishes forms are being offered at Dignity Care.

Shifting Values

It's nice to know

I'm doing the perfect thing

At this moment

Even emptying a bed pan

Or powdering your bottom

There's no doubt

The angels are smiling

In the past

Busy days full of activity

Yet at day's end I'd wonder

Did I do anything of value?

Did I move ahead today?

Those questions no longer arise

Each moment with you is surely holy

When done with the right intention

From: A Caregiver's Journey

by Kaelin Kelly

Health Care: A Right, not a Privilege

"Of all the forms of inequality, injustice in health care is the most shocking and inhumane."

- Martin Luther King Jr.

Last September I attended a meeting sponsored by the Boulder Senior Center Advisory Committee called "Create Your Health Care Future". One of the speakers, Dr. Ron Forthofer, Board President of HCAC (Health Care for all Colorado) presented an impressive perspective of the deficiencies of our present health care system. Dr. Forthofer insisted that Health Care for all Americans should be a right, not a privilege.

We are all aware that the American health care system is a nightmare and getting worse all the time. As a nation we should be ashamed of our government's inability to provide adequate health care for its citizens, and as citizens we need to start complaining loudly about this state of affairs. We need to start putting pressure on our representatives so that widespread reform can be achieved: write to them, call them once a week. Write letters to editors and object publicly to the Band-Aid proposals for a system which is inherently corrupt, a system being bought and bullied by the pharmaceutical industry. We at Dignity Care hope you become inspired and join the fight to make affordable and comprehensive medical coverage available for each and every human being in America.

Here are some parts of Dr. Forthofer's observations:

"To put it succinctly, the American health care system is a mess! Despite having skillful and caring providers, high technology and spending 13 percent of our gross domestic product on health care (far more than any other developed country), we don't have affordable and comprehensive care for all Americans. The latest Census estimate for the number of uninsured was 43.6 million, and for those who have insurance, our system is a maze of complicated forms and fine-print restrictions that often result in the delay or denial of needed care.

We all know the symptoms - skyrocketing health insurance premiums, high prescription prices, denial of coverage because of pre-existing conditions, for-profit HMOs abandoning an area leaving their patients high and dry, physicians refusing to accept new Medicare patients because of cuts in reimbursement levels, personal bankruptcies because of catastrophic medical bills, etc.

In addition, of 28 leading developed nations in 1999, the United States ranked 23rd in infant mortality and 18th in both female and male life expectancies. We are clearly not getting results from our spending almost twice as much per person as the other developed nations. Why such high costs? We are being ripped off - much of the money we put into the system does not go for health care. Instead it funds huge insurance and managed-care bureaucracies. Their overhead - executive salaries and benefits, profits, advertising and marketing, lobbying of politicians, and administration - devours about 15-20 percent of health-care premiums. Moreover, health-care providers spend large amounts to deal with many different insurers, taking still more funds from actual health care. In contrast, the administrative costs of other nations with better health status are quite low. For example, Canada spends about one percent of its health-care dollar on administration.

Also, by delaying and denying care to the uninsured and underinsured, we greatly increase the cost of health care. The uninsured and underinsured are forced to use the emergency room for primary care and, because of delays in treatment, they also often require expensive surgeries instead of far less costly preventive care.

If we were to devise a new system, it should include: universal health care, (where everyone is insured); comprehensive care, (where everything that is medically necessary is done); choice of provider, including licensed alternative practitioners; decisions made by patient and provider, not some bureaucrat; emphasis on prevention; strong cost containment program; no unnecessary money spent on administration; and a system which is affordable and has a proven track record.

Canada has a health-care system that meets most of these requirements and it spends roughly half as much per person as we do. It is a system

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