2010 HAVE Award Recipients

Community Service Programs

Adaptive Sports and Adventures Program
Carolinas Rehabilitation
Charlotte, NC

The goal of Adaptive Sports and Adventures Program (ASAP) of Carolinas Rehabilitation is to provide competitive and recreational adaptive sport opportunities for individuals with physical disabilities and to support and promote the achievements of personal goals of adaptive athletes. ASAP provides ongoing adaptive sport and leisure programming which includes snow skiing, water skiing, kayaking, cycling, tennis, rugby, basketball, golf, fishing and swimming.

ASAP has three licensed recreational therapists on staff but relies heavily on volunteerism to deliver its programs to increase and maintain the healthy lifestyles of people with disabilities. ASAP’s water ski program requires 8-10 volunteers to assist only one skier. The weekly program is four hours each night which totals over 640 volunteer hours for just one of their many programs. ASAP’s Cycle to the Sea is their annual fundraising event in which cyclists with disabilities ride from Charlotte, NC to North Myrtle Beach, SC. Over the course of three days, volunteers on motorcycles and regular bikes flank the cyclist on all sides providing a safety barrier around them.

ASAP demonstrates the dynamic power of volunteers and how they enable people to be successful and most importantly healthy after a life altering injury.

In-Service Hospital Volunteer Programs

No One Dies Alone – Comfort Companions
St. Joseph Mercy Oakland Hospital
Pontiac, MI

Studies shows that approximately 50% of all people in the United States will die in a hospital and 25% of people will die in a nursing home. At St. Joseph Mercy Oakland Hospital (SJMO), 15% of those dying patients will be alone at the time of death. Another study show close to 40% of all patients have severe pain prior to death. If no one is at their side to call the nurse, the pain will persist or even worsen with no relief.

In 2004, SJMO did a survey of nursing staff that care for patients who died. One of the key findings was the suffering of nursing staff when they were caring for a dying patient who was all alone. The demands of the nurse’s regular rotation of patients and that of a dying patient were extremely stressful.
In 2005, the Volunteer Comfort Companion program, “No One Dies Alone”, was created. With 30 trained volunteers on hand, a member of the palliative care team would identify a patient who was all alone and at the end of life and would place a volunteer at their side. The training is unique and combines the development of self-awareness of personal feelings regarding death and dying with gentle ways to assist these special patients. Volunteers are also educated on what typically happens physically, emotionally and spiritually at end of life.

The volunteers ensure comfort and peace and eliminate two of the most common fears of people and terminal illness – dying in pain and dying alone.

**Fundraising Programs**

**Text for 10**
Monmouth Medical Center
Long Branch, NJ

“Text for 10” is an exceptional example of recruiting teens to become involved in hospital volunteerism. The volunteer along with the assistance of a 14-year old teen co-chair, who had lost her father to brain cancer, successfully recruited children, adults, families businesses and corporations, musicians and physicians to participate in a fund raising project for the David S. Zocchi Brain Tumor Center as well as for Monmouth Medical Center.

The co-chairs created “Text for 10” which was comprised of teams of ten, from five different locations throughout the Monmouth and Ocean counties. Each team member used their cell phones to simultaneously send text messages to ten friends and family members asking for a $10 donation. The event raised $50,000 for the Brain Tumor Center in a matter of minutes and is now an annual event!

**Community Outreach and/or Collaboration**

**Knapp Auxiliary Diabetes Food Chart Community Outreach Program**
Knapp Medical Center Auxiliary
Weslaco, TX

When the auxilians at Knapp Medical Center became aware that diabetes deaths ranked fourth in the central portion for the Lower Rio Grande Valley of Texas, compared to seventh nationally, they recognized the seriousness of this statistic and applied for a $10,000 grant to create Diabetes and Renal Food Charts. The educational food charts in use were out of print and not sensitive to the cultural background/literacy of the patients they served.

In collaboration with the hospital’s Public Information and Nutrition Services Departments, two user-friendly, bilingual, four-color food charts were developed. This effective teaching tool was appealing to patients and helped them learn how to understand food choices to better manage and regulate their disease.
Once the charts were developed, the Knapp dietitians suggested that the charts be made available for sale to area facilities. The Auxiliary turned the project into a community outreach project and took on the responsibility of production and distribution. After receiving an overwhelming response locally, it naturally expanded the project to include the entire state of Texas. In addition, The Texas Hospital Association partnered with the Auxiliary and they began to advertise the availability of the charts nationally in the *ADA Journal of the American Dietetic Association*. Orders from hospitals and clinics lead the way, but educators have requested them for prison populations, for use on Indian reservations and for indigent Eskimos in Alaska.

While fund raising was not the goal of the project, the Auxiliary has generated enough money to recoup the initial $10,000 grant and offset the additional printing. The project received the Texas Hospital Association’s 2000 Excellence in Community Service Award and the American Society of Directors of Volunteer Service’s Extraordinary Award.