Running a successful retail operation isn’t usually the hallmark of a hospice. But the Hospice & Palliative Care of Western Colorado has found that having an attractive storefront with the word “hospice” prominently displayed has been key to getting the word out about its services.

With the help of three employees who have floral and interior design experience, the upscale thrift shop in Grand Junction displays its merchandise with such flair that it received an award for retailing from a downtown business association. “People come away from that shop thinking, ‘They must have an amazing organization,’” explains Christy Whitney, president and CEO of the hospice. The store gets additional support from 90 volunteers and brought in $115,000 for the organization last year. But most important is the exposure for a hospice in a large, sparsely-populated area that depends on word-of-mouth for its reputation and referrals. It’s managed to be successful in a short time — almost half of all people who die in its service area receive hospice services, and that encompasses more than 7,000 square miles and a population of 150,000. In just 10 years since it was founded in 1993, the hospice has grown from serving about 200 patients to more than 1,000 patients each year.

Its large volunteer program, which includes a strong teen component, also helps make the community aware of hospice services. “We have 350 volunteers and when you start to have numbers like that they’re your greatest marketing element,” Whitney says.

The organization offers hospice care in patients’ homes, nursing facilities, and hospitals throughout the region, including a unique relationship with the local Veteran’s Administration (VA) medical center. That collaboration allowed the VA to become a sponsor of the hospice by providing $75,000 worth of in-kind services — meaning an office on its campus. The hospice supplies two team members for the VA palliative care consultation team.

Like many other hospices, the Western Colorado organization found that federal rules for reimbursement of care were making it harder to admit patients with a prognosis longer than six months. Their families were often caught in a bind when they couldn’t access home health services either. In response, the hospice organization created a program called Transitions that provides access to volunteers and 24-hour on-call services for patients falling between the cracks.

It’s also part of the organization’s “open access” approach to care, which expands eligibility to all patients who have life-limiting illness, regardless of treatment choices such as chemotherapy and radiation. Admission is overseen by certified hospice and palliative care nurses, who determine patient and family needs and then connect them to the hospice programs or another agency in the community.

The hospice reaches out to children in the community through its grief services, which serve 500 children a year. There are in-school programs that offer grief counseling in groups for children who have lost a loved one and Camp Good Grief — a three-day bereavement summer camp that involves more than 60 children and 30 volunteers.

In an innovative program, young people are reached in a youth correctional facility, where it was found that 75 percent of residents had a significant loss before getting into trouble. Teens are involved to a great degree in both fundraising and raising awareness of grief and end-of-life issues. In its “beauty queens” project, young people go to assisted living and nursing homes and give makeovers to residents. Teens also participate in a “legacy” project that records the life story of hospice patients.

The hospice is always seeking to extend its reach, despite the long distances involved. “We’re looking for new ways to integrate where patients who are seriously ill are, as opposed to waiting for them to come to us,” Whitney says.