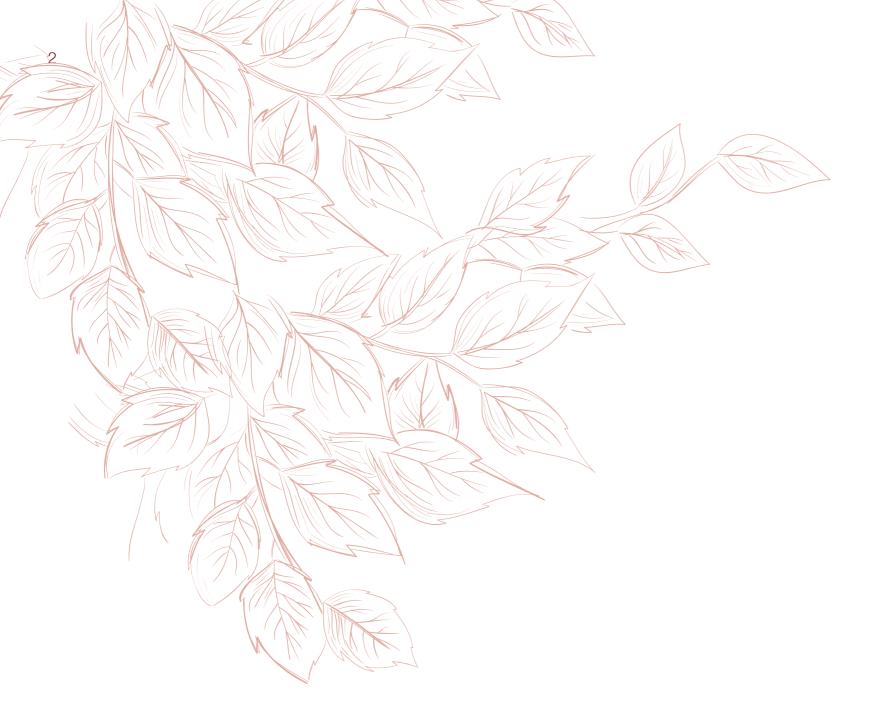


The Home Hospice Organization of Lebanon Annual Report

2017

A SANAD Patient's daugther kindly allowed us to share this heartfelt moment with SANAD's friends and supporters

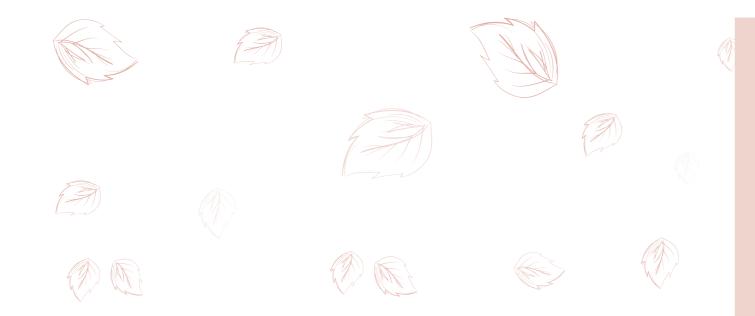


**(** How people die remains in the memory of those who live on. **)** 

Dame Cicely Saunders Founder of Hospice Movement

SANAD Home Hospice Care | Annual Report 2017 00





LETTER FROM THE PRE OUR MISSION SANAD'S CORE VALUES PALLIATIVE CARE HOSPICE CARE THE SANAD HOME HOS THE HOSPICE CARE UN THE MENTAL HEALTH U THE PROJECT AND RES THE FUNDRAISING UNIT OUTREACH AND ADVO IN NUMBERS SANAD'S TEAM

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# LETTER FROM THE PRESIDENT

What is "Growth"?

By definition, "growth" reflects a process of development, paired with an increase in size.

During 2017, SANAD embodied that word with all the meaning that it carries, exhibiting steady and consistent growth, crowned with an unwavering maturity and steady stride towards excellence.

Yet, this consistent growth begets further strides to accomplish more, combined with a boundless responsibility towards the patients and families of SANAD. In 2015, our 5th year, we had the privilege of supporting 41 patients and their families. The following year we were able to support 85 patients, and today, in 2017, SANAD supported 183 patients and their families during the most trying yet precious times of their lives.

In a bid to honor the SANAD promise made to each of our patients and their families, and prompted by this numerical increase, we were confronted with the most important dialogue of our eight years – What does this growth mean?

It means that, today, a total of 400 patients and their families had a peaceful and dignified end-of-life journey, surrounded by their loved ones, allowing them the quality of life and care they deserve.

It also denotes a shift in attitude towards hospice and palliative care at a professional level, with more Lebanese doctors endorsing palliative care, and at a community level, with a growing societal acknowledgement of palliative care as a basic human right and a viable care option for loved ones. Additionally, our role as palliative and hospice care providers is recognized among many stakeholders, especially as we expand our role beyond service provision. We are progressively showcasing mental health in palliative and hospice care as a discipline worthy of careful and structured analysis, engaging in projects with medical and academic institutions to provide capacity building guidance and knowledge generation, and raising community-based awareness about palliative and home hospice care in different regions in Lebanon.

But for us, the most important component of this growth is the increased responsibility and commitment to ensure and maintain the same unique, passionate, and professional care that SANAD provides to each and every patient, no matter how many and no matter how challenging.

It means that SANAD's message of care accompanies us to every patient's home, and that every new patient will be supported as if they were our first patient: with professionalism, sensitivity, compassion, and respect. We will dedicate an infinite amount of time and effort addressing concerns, fears, and anxieties. We will look into the finest details that matter to our patients, and always remember that they are at the core of the care plan and of every precious moment we spend with them and their family.

We've been privileged with wonderful community support around us, near and far, and this is the definition of empowerment.

Friends and supporters, you have empowered us with your trust as we were growing and developing; ensuring that we matured and flourished into a strongly rooted holistic approach that is fundamentally needed, and we promise you that this trust will be honored.

I leave you with our 2017 annual report. From the SANAD team and I, we wish you a very happy and healthy new year.

Lubna Izziddin, President

## **OUR MISSION**

Our mission is to provide comprehensive home-based hospice care to terminally ill patients while preserving their dignity and enhancing the quality of their remaining life.

We aim to assist patients in remaining as alert, functional and comfortable as possible within the calm sanctuary of their own home, surrounded by family and loved ones.

SANAD delivers these support services free of charge to patients and their families regardless of their nationality, religion, gender, diagnosis or ability to pay.

# **SANAD'S CORE VALUES**

### Respect

We at SANAD ensure total respect for patients' and families' beliefs, values and practices.

### Dignity

We aim to preserve patient and caregiver dignity, honoring their wishes and preferences until the end.

### Integrity

We uphold our mission through complete and utmost integrity and goodwill in all aspects of our professional practice.

### Collaboration

We collaborate closely with families and caregivers to ensure genuine communication and information sharing, and provide assistance in critical decision making.

### **Excellence**

With our conscientious and diligent team, we aim to provide professional and compassionate quality end- of-life care.

### Commitment

We are committed to uphold patient and caregiver rights and maintain confidentiality at all times.

### **Compassion**

Our actions and practices are driven by absolute compassion for patients and their families

# **PALLIATIVE CARE**

Palliative care is an approach that aims to improve the quality of life of patients and their families facing problems associated with a life-threatening illness. It focuses on the prevention and relief from suffering through early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

Palliative care teams are usually multidisciplinary in nature as they consist of doctors, nurses, psychologists and they might also include social workers, registered dieticians and pharmacists. All members of a palliative care team work together to coordinate the care and support provided to both the patient and their families.

# WHO IS PALLIATIVE CARE FOR?

Patients who suffer from cancer, cardiovascular diseases, Alzheimer's and other dementias, cirrhosis of the liver, chronic obstructive pulmonary diseases, diabetes, HIV/ AIDS, kidney failure, multiple sclerosis, parkinson's disease, rheumatoid arthritis, drug-resistant tuberculosis (TB) and other life-limiting illnesses can benefit from palliative care.

### WHY CHOOSE PALLIATIVE CARE?

Palliative care is explicitly recognized under the Human Rights to Health. It reduces unnecessary hospital admissions through the proper management of pain and symptoms of the underlying disease. People who seek palliative care do not have to give up their primary care physician.

# **HOSPICE CARE**

Hospice care shares the same principles with palliative care, however it is designed to give supportive care to patients in their final phase of a terminal illness and it focuses on comfort and quality of life rather than a cure.

At the center of hospice philosophy is the belief that each of us has the right to die with dignity and with minimal pain. Hospice care aims to relieve patients from pain and other distressing symptoms, and offers a support system (for both patients and families) to help patients live as actively and comfortably as possible. It also focuses on providing psychological and spiritual support to help the patient and the family cope during the patient's illness and in their own bereavement.

# WHO IS HOSPICE CARE FOR?

Hospice care is appropriate if the patient's doctor certifies that the patient has a life-limiting illness, with six months or less to live.

Hospice care provides comfort and support for patients with all types of illnesses including cancer, heart, lung, vascular, kidney and neuromuscular diseases.

# WHAT TO EXPECT FROM HOSPICE CARE?

A patient can expect to have more control over the care and a comfortable and supportive atmosphere that reduces anxiety and stress. Additionally, the patient can benefit from the management of distressing symptoms such as pain, shortness of breath, fatigue, constipation, nausea, loss of appetite and difficulty sleeping. Hospice care helps patients and their caregivers carry on with their daily lives while expecting the best possible quality of life.

### **SANAD on top of the world** Omni Athletes, on the Marathon Grand Slam, carrying SANAD's flag to the North Pole.

"It was an honor to carry your flag to the pole, people there were asking us about you and they were inspired to hear about how you re-defined the meaning of hope."

NORTH POLE

MOSCOW 3821 km

SOUTH POLE 20004 kr

me Hospice Care

APOLIS 5021 Kn

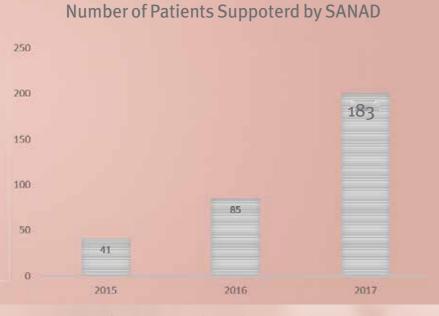
Dani Afiouni

# SANAD HOME HOSPICE CARE SUPPORT

SANAD was established to address the many challenges experienced by terminally ill patients and their families as they deal with their illness and its reality.

Our mission is to provide comprehensive, free-of-charge, home-based hospice care to terminally ill patients and their families, while preserving their dignity and enhancing the quality of their remaining life, in the sanctuary of their own home.

SANAD's holistic approach to hospice care addresses any medical, social and psychological challenges patients and their families may need.



SANAD's significant growth in the past three years.

### THE HOSPICE CARE UNIT - SERVICE PROVISION

By providing hands-on medical and psychosocial care, the Hospice Care Unit is a cornerstone of the support that SANAD delivers to its patients and their families.

This unit provides terminally ill patients with holistic medical nursing and psychosocial care according to best practices and evidence-based knowledge in palliative and hospice care.

### THE MENTAL HEALTH UNIT

By delivering person-centered family-oriented end-oflife care, the SANAD psychologists, aim to help patients, families, and SANAD's interdisciplinary teams—through collective actions— to affirm hope, meaning, purpose, and continued living in the midst of suffering. The psychologists provide psychological care to the patients and their families to alleviate a myriad of psychosocial issues associated with end-of-life, and with post-loss grief and bereavement.

### THE PROJECTS AND RESEARCH UNIT

The Unit develops local and regional capacity-building projects, research projects and articles on palliative and hospice care on policy level and implementation level. The Projects and Research Unit aims to enhance SANAD's role and to advocate for palliative and hospice care in Lebanon and the region.

### THE FUNDRAISING UNIT

The central role of the Fundraising Unit is to continuously provide financial resources to fund the organization's operations and ensure its growth and sustainability.

# **THE HOSPICE CARE UNIT - SERVICE PROVISION**

Since its establishment in 2010, SANAD has supported more than 443 terminally ill patients and their families.

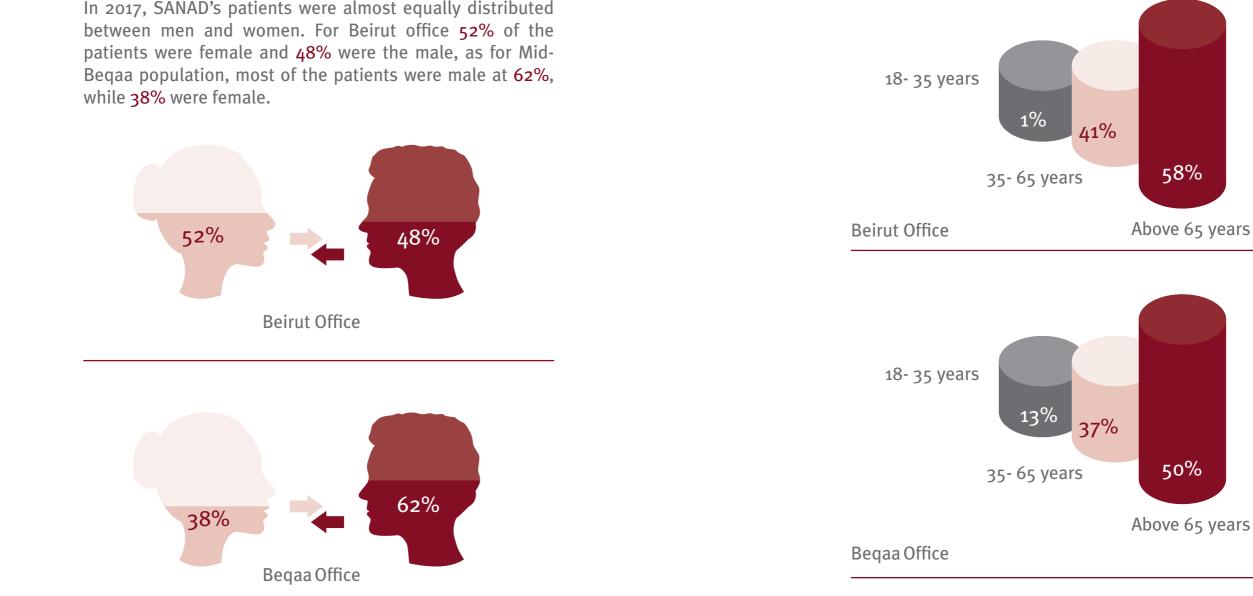
The following figures represent statistics from 2010 -December 2017 for both Beirut and Mid-Beqaa SANAD branches.

### **GENDER DISTRIBUTION**

In 2017, SANAD's patients were almost equally distributed

### AGE DISTRIBUTION

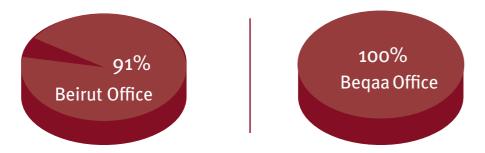
SANAD generally targets terminally ill adult patients who are above 18 years of age. The majority of patients in 2017 were 65 years or older. While patients between the ages of 35 and 65 years accounted for 41% in Beirut and 37% in Beqaa, those between 18 and 35 years of age were only 1% in Beirut and 13% in Beqaa.



### **DISEASE DISTRIBUTION**

Most of the patients referred to SANAD were diagnosed with cancer. A few other patients had end-stage diseases other than cancer such as Alzheimer's Disease, heart failure, chronic obstructive pulmonary disease and renal failure.

Although cancer cases and other end-stage terminal illnesses remain a priority, SANAD also admits elderly patients who are in need of medical support at their end-stage of life.



Patients diagnosed with Cancer

Beirut Office	Beqa
Cancer 91%	Cance
Geriatric 7%	Geria
Other 2%	Other

Beqaa Office		
Cancer	100%	
Geriatric	÷	
Other	-	

TYPE OF CANCER	Beirut	Beqaa
Lung	35%	10%
Breast	15%	15%
Prostate	10%	-
Pancreas	9%	30%
Colon	7%	10%
Gastric	6%	-
Bladder	4%	-
Brain	3%	10%
Ovary	3%	-
Multiple Myeloma	3%	-
Kidney	3%	10%
Liver	2%	15%

### AWARENESS OF DIAGNOSIS AND PROGNOSIS

In Beirut 67% of the patients were aware of their diagnosis, whereas, in Begaa it was 42%. In Beirut 33% were aware of their prognosis, while it was 8% in Beqaa.

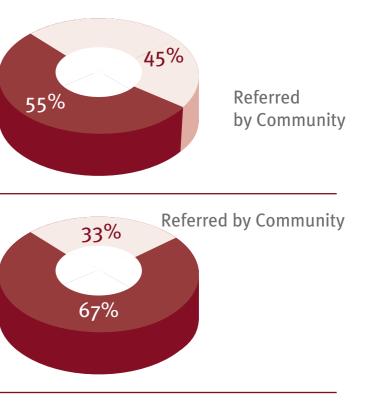
Aware of their diagnosis Not aware of their diagn Aware of their prognosis Not aware of their progn

### **REFERRAL SOURCES**

was 67%.

In Beirut **45%** of patients were referred by their family members, friends and through social networks, whereas in Beqaa it was 33%. In many cases, families who received our care in the past, referred patients to SANAD.

Referred by Oncologist



**Beirut Office** 

Referred by Oncologist

**Begaa** Office

	Beirut	Beqaa
	68%	42%
osis	32%	58%
;	38%	8%
osis	62%	<b>92</b> %
0515	02%	92%

In Beirut 55% of patients were referred to SANAD by their primary physicians, mainly oncologists, while in Beqaa it

### SANAD'S RESPONSE TIME

**Ninety-one percent** of all patients in 2017 were visited for the first time within 48 hours after referral.



SANAD's medical team is highly accessible to patients regardless of their condition, as the team is available 24 hours a day, 7 days a week.

In cases where the referral is made while the patient is at the hospital, the team visits the patient and the family at the hospital before the patient is discharged. In the meantime, SANAD's nurses ensure that the patient's medical supplies such as beds, mattresses, and oxygen machines are rightly situated in the patient's room at home.

### LENGTH OF STAY UNDER SANAD'S CARE

While some patients stayed with SANAD for only a few days before they passed away, others stayed with SANAD for more than six months.

On average, patients in 2017 in Beirut and Beqaa received SANAD's home hospice care for approximately 34 and 23 days respectively before passing away.

The patient's medical condition and the timing of referral to hospice both affected the duration of stay.



### **MEDICAL SUPPORT AND HOME VISITS**

SANAD's medical team of doctors and nurses prioritize symptoms and pain management. The team ensures that all the patient's medical needs (such as medication, equipment, and medical supplies) are covered, and that any problem encountered by the patient or family, whether physical, social, or psychological, is identified and addressed.

During every home visit, the nurse conducts a complete physical assessment of the patient, and accordingly provides the needed medical and nursing interventions after consulting with one of SANAD's medical doctors. The nurse makes sure that the patient is comfortable at home and takes all measures to relieve any suffering from pain or any underlying symptoms (such as nausea, vomiting or constipation).

### Medical Team Visits / Be Medical Team Visits / Be

In Beirut, the median number of Medical Team visits was 10 per patient, with a median length of stay of 18 days; hence the Medical Team conducted approximately 4 visits per patient per week, meeting patients' needs and complying with international standards. As for Beqaa, the median number of visits was also 10 visits per patient, with a median length of stay of 21 days; and so the Medical Team conducted approximately 3.5 visits per patient per week.

The team allows sufficient time to address patient and caregiver concerns, and answers all questions asked about patient care or otherwise, and makes sure that they are all discussed in depth.

The quality of care provided in each home visit is of utmost importance to SANAD, and with each visit, SANAD's nurses and doctors make sure that all the patient's needs are addressed.

irut Office	1520 Visit
qaa Office	216 Visit

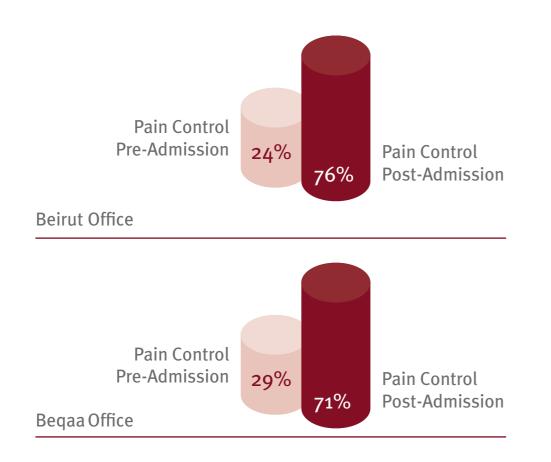
### PAIN MANAGEMENT

In 2017, only 24% of referred patients in Beirut, and 29% in Begaa were taking adequate pain relief medications prior to their admission to SANAD.

Adequate pain control was provided post-admission to SANAD to the remaining 76% in Beirut and the 71% in Begaa, ensuring that 100% of all SANAD's patients received adequate pain management.

With the proper management of pain and symptoms, a patient's quality of life is improved and that of the family as well.

Patients taking pain relief medication:



### FINAL DAYS OF CARE

Throughout SANAD's care, and as per our policy, SANAD's team methodically discuss end-of-life concerns and expectations, with the family or caregivers educating them on the different stages and signs that they will experience, until the very end. SANAD assures the family that they will accompany them throughout. Also, patients approaching their last days of life are visited more frequently. During these recurrent visits, SANAD's team addresses all concerns the family has and also provides psychological support during this difficult period.

During these visits, SANAD's nurse assesses the patient regularly and takes all measures needed to ensure that the patient's pain is properly managed, and ensures a peaceful and painless departure.

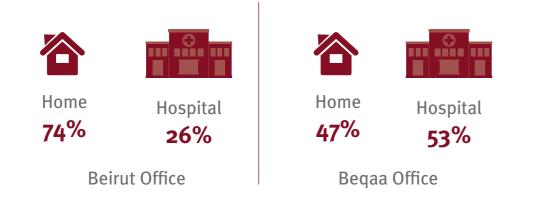
The patient's last days of life are a difficult time on family members as it creates a state of anxiety and stress, and so the presence of a professional by the family's side, eases those overwhelming feelings and comforts the family by taking any measure to relieve the patient from any suffering.

### A PATIENT'S PASSING

Although SANAD's team provides all needed interventions and medical equipment at home to minimize the need for hospitalization, and to allow the patient to pass away at home, certain circumstances may arise as well as critical medical conditions that can't be managed at home. In these instances, as per policy, SANAD advises that the patient be admitted to a hospital. In other cases, the family members themselves prefer the patient to pass away at the hospital.

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Patient's Place of Death in 2017:



Fifty-six percent of these patients who passed away at the hospital were referred by SANAD to the hospital due to critical medical conditions as per SANAD's policy.

Forty-four percent of these patients passed away at the hospital due to the families' preferences.

### **BEREAVEMENT AND GRIEF SUPPORT**

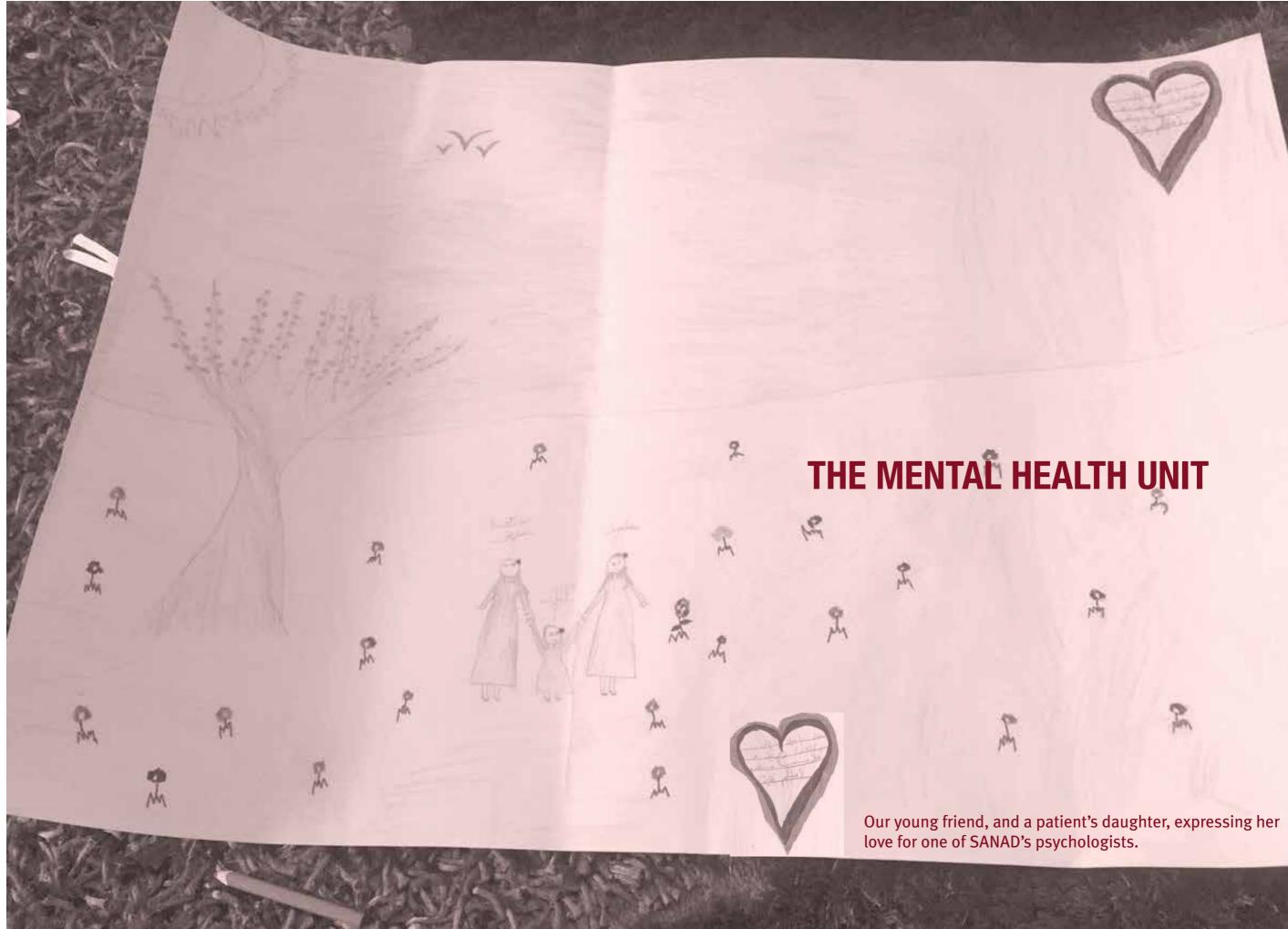
After a patient's passing, a member of SANAD's team attends the patient's funeral or visits the family at home later to provide any needed support. Families are contacted by SANAD's nurse again after a month, six months, and a year after the patient's death, to be updated on their coping and grieving situation.

As in previous years, all families were contacted by phone following the death of a patient. In 2017, the majority of families were visited by SANAD's nurses during their loved one's funeral, offering their condolences and support.

Families are later invited to be part of SANAD's Grief Support Group, if they feel they need further psychological support.

**((** We will be forever grateful to you for all your care and we thank you from the bottom of our hearts for helping us let our beloved father cross over in peace, love and dignity. **)** 

- Testimony from a patient's family



# B

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In addition to the psychosocial care provided by SANAD's nursing and medical team, the intervention of the psychologists might be essential in certain situations where the patients and their families experience deeper and more pressing clinical psychological needs. SANAD's psychologists attempt to help the patients and their families navigate the salient emotional challenges that characterize living with chronic or life-limiting illness.

Patients may experience fear and anxiety related to their uncertain prognosis, the possible disease progression, and ultimately, dying. Patients may also experience depression associated with a diminished sense of autonomy and purpose, dignity and control. Additionally, amplified by their increasing dependence on others, patients occasionally report relationship strain related to treatment demands, associated symptom and caregiver burden.

The presence of young children in the home also mandates the presence of the psychologists to assist in preparing the children for their loved one's departure, and to facilitate the transitions taking place in the home across family dynamics and new role-transitions.

They may experience spiritual or existential angst, crises of faith or hopelessness, questions of meaning, unfinished business, guilt or grief.

However, SANAD's psychologists are also mindful of the positive emotions and sense of well-being that patients and their families can experience, often producing expressions of gratitude, compassion, forgiveness, spiritual comfort, and post-traumatic growth. Psychologists are constantly familiarizing themselves with a range of developmental, demographic, and socio-cultural/spiritual influences on the experience of serious illness, the dying process, and preferences for end-of-life care, and are mindful of these factors.

SANAD's psychologists work unanimously with medical and nursing teams to provide updates on patient and caregiver wellbeing, in addition to ensuring a continuous flow of psychosocial support across all care providers within SANAD's teams.

The psychologists also advise the executive team on how to manage and facilitate complex issues faced with families and patients, and provide regular training on best practices, coping mechanisms, communication skills, and other essential information that effectively assists the team in providing more holistic care.

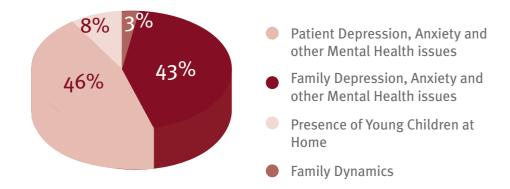
In 2017, the Mental Health Unit visited 29 patients and families to provide support on any of the issues listed above.

The Mental Health Unit signed a memorandum of understanding (MOU) with the Ministry of Public Health to create a curriculum about Mental Health in Palliative Care for Health Care Providers.

The psychologists have been contributing to and following-up on the psychological dimension of the implementation module (Hospital-Based Hospice Care) being piloted by the palliative care staff at the Rafic Hariri University Hospital (RHUH) under the supervision, guidance, and training of SANAD.

On a more academic level the SANAD psychologists conduct research and publish articles, guidelines, and findings on issues within psychosocial support in home hospice care in the region, and Lebanon specifically. In 2017, the psychologists began creating a solid process and plan for the role and work of the mental health professional/psychologist within home hospice care, in addition to documenting lessons learned and best practices. Additionally, there is an ongoing process of creating an evidence-based, resourced, integrated, and comprehensive patient/caregiver/professional framework and operational guide to assist in decision making. This work aims to create knowledge transfer, knowledge dissemination, increased research, development of best practices and policy on mental health in home hospice care. In addition, it aims to create networks and partners in a bid to increase momentum, raise awareness, and expand the base and reach of home hospice care.

Research will assist in outlining gaps in service and an increased needs in home hospice care to be used to impact policy change, and public awareness programs.









# PILOTING A PALLIATIVE CARE MODEL AT RAFIC HARIRI UNIVERSITY HOSPITAL

SANAD is currently piloting a project to establish a hospital based palliative care model in collaboration with Rafic Hariri University Hospital (RHUH), under the support and guidance of the Ministry of Public Health and WHO in Lebanon.

This pilot model is expected to meet the terminally ill patients' and their families' needs for palliative care support services within the hospital. It will also help improve the type of supportive care provided for terminally ill patients at RHUH to enhance the quality of life of patients and their families by addressing medical, social and psychological challenges throughout their hospital stay.

The program also aims to emphasize the importance of the continuity of care from the hospital to one's own home.

The project is now in its implementation phase and a palliative care model with a patient referral pathway has been launched.

As part of its commitment to the project and in order to ensure proper integration and sustainability of the model, SANAD is shadowing the palliative care team throughout the pilot phase and is closely monitoring and evaluating the implementation process at the hospital.













# SHBPP AND SANAD'S JOINT VOLUNTEER PROGRAM

The Salim El-Hoss Bioethics and Professionalism Program (SHBPP) at AUBFM and SANAD continue to join forces for the second year .

Medical students at AUBFM are being taught the importance of becoming healers in addition to healthcare practitioners and skilled technicians. To that effect, the SHBPP has introduced physicians, patients and society courses that aim at helping students appreciate that medicine is an art not only a science, and that humanism and empathy are part and parcel of being a doctor.

To bridge the gap between theory and practice even further, the SHBPP and SANAD collaborated on a pilot project to provide an opportunity for second-year medical students at the AUBFM to volunteer with SANAD in meeting the social, emotional, spiritual, and practical needs of individuals and families living with a life-threatening illness through working with terminally ill patients and their families at their homes, under the full supervision of SANAD's medical team.

Medical students are offered an opportunity to appreciate and see first-hand the psychosocial dimension of illness. In addition, this experience will allow medical students to gain hands-on experience in voluntarism and to sensitize and equip them with the skills needed when working with patients and their families within the patient's own environment. Patients suffer, and so do their families, which is a perspective often ignored in medical schools. In December 2017, SHBPP and SANAD invited medical students who volunteered from last year to talk about their experience in this joint project and "Aha Moments" with prospective medical student volunteers - Med 2 and 3.

The presentations were lead by both SHBPP's and SANAD's teams presenting the program objectives, its vision, and plans for this year. This was followed by the testimonies of three wonderful medical students and concluding remarks by both organizations SANAD and SHBPP.

Finally, new students submitted applications to be part of this year's project cycle. It was a fantastic day. We are looking forward to another fruitful cycle.





# **GALA DINNER** Them Shine Ferever

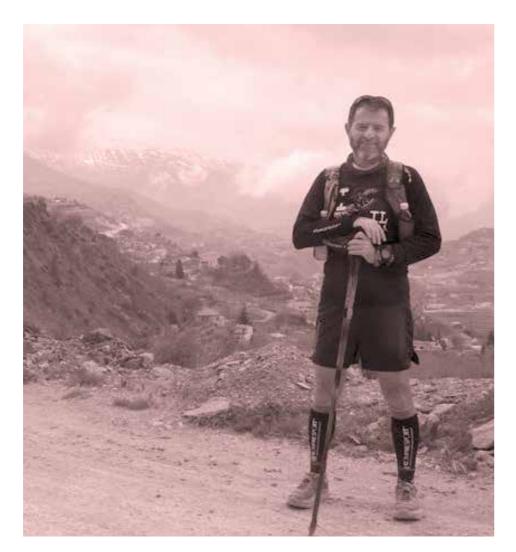
MAY 20, 2016

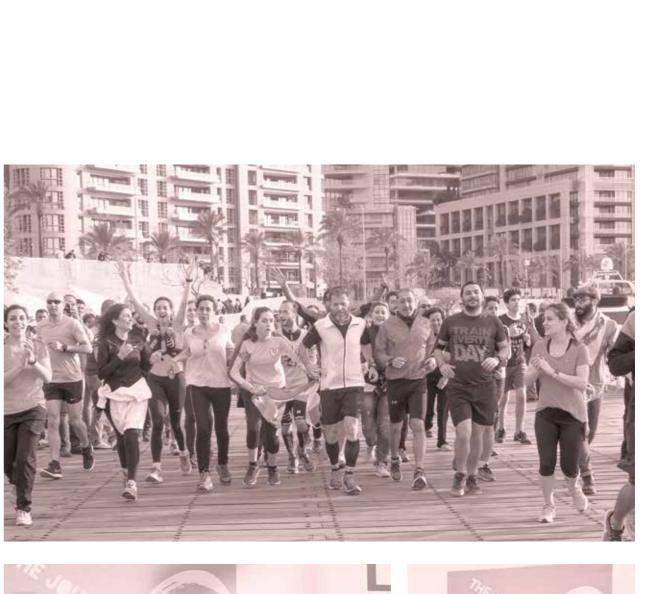
# THE FUNDRAISING UNIT



# **SEVENTY-TWO HOURS FOR SANAD BY ALI KEDAMI**

On April 6, 2017, Ali Kedami, a renowned Lebanese marathon runner and ultra-endurance athlete, ran for all the people taking their last long journey. A self-imposed challenge over 72 hours was accomplished, to bring awareness and engagement to the mission of SANAD, to help expand our operations and support more patients and families in the most precious times of their lives. During these 72 hours, Ali ran day and night, across the city, mountains, and villages, in an infinity-shaped path. He barely stopped or slept, running to infinity and back.











# MUSIC AND POETRY EVENING IN BEQAA

As part of its fundraising music and poetry event, SANAD organized an evening with the Oud maestro Charbel Rouhana and Tunisian poet Anis Chouchene in July 2017. This event was organized at Sama Chtaura with the exceptional efforts of the Beqaa Committee to launch the Mid-Beqaa office that is generously supported by the Mhanna and Matta families.







Annually, SANAD participates in conferences and conducts training and awareness sessions on palliative and hospice care. Sharing SANAD's success stories and the accumulated experience throughout the years with different stakeholders in the community can bring them closer to the essence of palliative and hospice care.

The importance of conferences, training, workshops and awareness sessions is that knowledge and information can be mutually shared. SANAD believes that empowering the community by providing valuable information it needs can create a ripple of enthusiasm and momentum, and that is how it aims to engage the community in supporting everyone's right to be free from pain and suffering.



# **OUTREACH AND ADVOCACY**

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SANAD

A Song for SANAD by Charbel Rouhana, MAY 2017 | With the very kind and continuous support of MBC, SANAD produced a video for Charbel's present to SANAD « بخاطرك حبيبي » in 2016; the song will be officially launched early 2018. The song was written and composed by Charbel Rouhana, produced by MBC, and directed by Danielle Rizkallah.







hospice and palliative care stakeholders.







الشاركات في الحلقة الطاشيا التبوعيبة حبول واحب He he then he he h إهر الرعابة الشليقية

### فريق متخصص

قالت لرئم لجمعية سند الرعابة التلطية نى ليشان ليشى عرالد معية الرضمي وعاللاتهم خلال فريق مد لتلطيفيه من ثلاثة لطياء وأريع سين وجشاقتم م باعي والروحا and then allies

والنقطت اطراف الح د. الرئيسة التنقيدية ليب الأطفال رشا العمد، مبينة أن الرعاية التلطيقية للإطفال هي رعايّة متكاملة تشعل الجسم والعقل والروح وكذلك دعم أسرة الطقل، كما أنها عتابة فريدة من نوعها تتطلب مهارات وتنظيم موارد خاصة تخلك عدا هو سائد في خدمات الرعاية الصحية الله وفة

OCTOBER 2017 | Touch, the telecommunications company, generously funded the production of a promotional video for SANAD, launching a text message fundraising campaign.

A Palliative Care Awareness Session in Kuwait, OCTOBER **2017** In Kuwait, SANAD participated in a panel discussion with Soroptomist International Club Kuwait and other Kuwaiti

لويذيات فى المجالات الإنسانية والصحعة , الكويت سماغة في الرعاية المتطبقية، مشيدين بدروها في مس تعاني من الألاد المزملة كمرضى السرطان وغبرهم

وقلن خلال الحلفة النقاشية الذي بظمتها جمعية سورويله بة المجتمع، أمس الأول تحت عنوانَ «مَهَابَةُ العَنَابَا للمساعدة والأميل عندمنا لا مكون المناك علاجه إن مجال الرعاية التلطيفية يعلقي مُمسانِدة مُعْلَى جَمعيات النفَع العام العاملة في هذا الجال، ومنها مركز الرغاية التلطيفية في الكويت لرعاية الأطفال وجمعية سند لتعتابة التلطية

نات إلى أشمية التوعية بالعناية التلطيفية وزعاية اللرقسى الذين بحانون من أسراطن مزملة طويلة الإصد والإسراطن للستعصية، والذين لا أمل لهد بالشقاء وأصبحوا في مراهل الرض الإخيرة، فضلا هن شحمين جودة محياة الرضى وأسراهم مبيئات أن يركز أكر عابة الللطيفية بحنضن (34 مواطّن وتلّبم وتصرت رئيسة جمعية سورو بشمست الكوينية للنصية -

سبي الغواص أن تجربة الشويت الرائدة في مجال لرعابة الكلطيقية تستنفق الإشبادة. منوهة بتعريز الدعم النقسي والاجتماعي للمرضى واسرهم والمبطح بهم، مشددة على اهمية لبغبة في التطفيف من المعاناة وتحسن نوعية المياة . عادة ا

### باكورةالعمل

واستعرضت الغواص لحة موجزة عن باكورة انطلاق الجمعية مشيرة إلى أنبة تم أنتشاه الغرع الكونتي ليحمّعية منور ويقصت العلية والأوروبية، في 21 اكتوبر 2015 وتم إشهارها من قبل وزارة الطوون الإجتماعية كجمعية نقع عام في المسلس 2015 تحت اسم «جمعية سورويلمست الكويت للتنمية الإجتماعية». ورادت سالقول: وتضبع هذه الجمعية نشمة من الشنف

التسانية الكوري فيداً الناجحة، اللائم أنهن ماج طويل في العمل التطويمي، واللائم وصل عدمن إلى 24 عضوة والتزمن بتسخير طاقاتين ووقدتهم، ليماء مستقبل أغضب لتشساء والاطفال

دعم نفسى واجتماع

تجربة ناجحة في تحسين نوعية الحياة وتخفيف المعاناة

بالسلاء فى جميع انصاء العائم اول مركز

بدوراما، قالت استشارية الطب التلطيقي في مركز الرعاية التلطيقية في الكويت و أمينَة الإنصاري أن الركزُ هوَّ الأولُ مَنْ مُوَعَهُ في الشرق الأوسنة انتشى عام 2011 لرعاية مرضى السرطان اللقدي بضم أربعة أجذمة للرهال والنساء وطاقته لاسربرأ. وذكرت الاتصاري أن للركري يستقبل حاليا 21 حالة يوميا م

مين ألا عاما فما فوق من المواطنين والوافدين، مشيرة إلى تزايد المالات في العيادات الخارجية ومركز التويت لكافحة السرطان امتي جمعة/

An Awareness Musical Event for Palliative Care in Kuwait, OCTOBER 2017 | Zain and Soroptimist International Club Kuwait in cooperation with SANAD, and in support of palliative and hospice care in Kuwait, held an unforgettable evening of music and songs at Sheikh Jaber Al Ahmad Cultural Center.



### Palliative Care as Social Responsibility -Qatar, OCTOBER 2017

Weill Cornell Medicine-Qatar

SANAD participated in Weill Cornell Medicine-Qatar's series on the intersections between law and medicine which took place on October 13, 2017 in Doha, Qatar. Legal, and ethical issues surrounding end-of-life care were discussed with the attendance of expert speakers from around the globe, and more than 200 physicians, nurses and other healthcare professionals.

SANAD's medical director and psychologist, discussed the roles of non-profit institutions, family and society at large in improving quality of life for patients receiving palliative care.

A Book Reading Session for SANAD's Children's Book, NOVEMBER 2017 | A book reading session for SANAD's children's book that delicately targets the issue of death and loss to children in a compassionate manner, was organized at Librairie Antoine.





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### An Awareness Raising Session in Majd Al Baana, DECEMBER **2017** | SANAD conducted an awareness-raising session on palliative care in Majd Al Baana in Mount Lebanon.

Mental Health in Hospice Care, DECEMBER 2017 | SANAD shared its accumulated experience in mental health in hospice care during a workshop organized by The Kamynu Trust Fund, that is generously supporting SANAD's Mental Health Unit since 2015.



A Lecture to AUB Marketing Students, DECEMBER 2017 | SANAD presented its experience, focusing on its growth, development, and sustainability, over the past eight years to Marketing students in the Public Relations class at Olayan School of Business at AUB.



### Impact Assessment of SHBPP Program, DECEMBER 2017

Previous medical student volunteers discussed and shared their experiences with new medical student volunteers during the impact assessment of volunteering program with the Salim El-Hoss Bioethics Professionalism Program.



impact on the patients' quality of life.

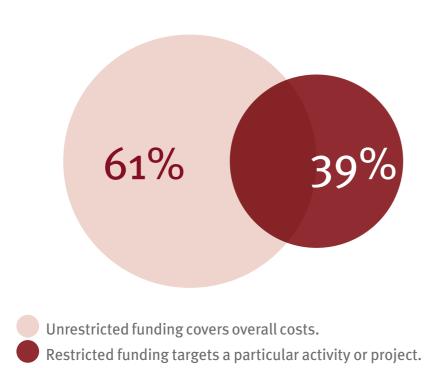


A Workshop with Adyan, DECEMBER 2017 | SANAD's team attended an informational session with ADYAN, a foundation for inter-religious studies and spiritual solidarity, discussing different religions points-of-view on end-of-life and their



# **HOW DID WE RAISE FUNDS THIS** YEAR?

As a non-profit organization, SANAD relies mostly on fundraising programs and activities to sustain and expand its provision of hospice care support services across Lebanon. SANAD's funds come under two categories, restricted and unrestricted, as shown in the figures below.



In 2017, 61% of SANAD's funds were from unrestricted sources of funding.

### SOURCES OF UNRESTRICTED FUNDING IN 2017

61%	Fundraising
22%	Corporate S
4-0/	Donations f

### **SOURCES OF RESTRICTED FUNDING IN 2017**



# **HOW DID WE SPEND IT?**

The main focus of SANAD's activities is providing home hospice care to terminally ill patients and their families, so the majority of funds raised each year is directly allocated for the actual medical care provided.

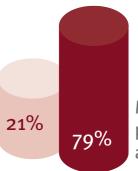
Operational and administrative expenses

Regardless of the amount of money raised each year, SANAD holds the quality of the home hospice care it provides in the utmost value and seeks to maintain its support services at the highest standard.

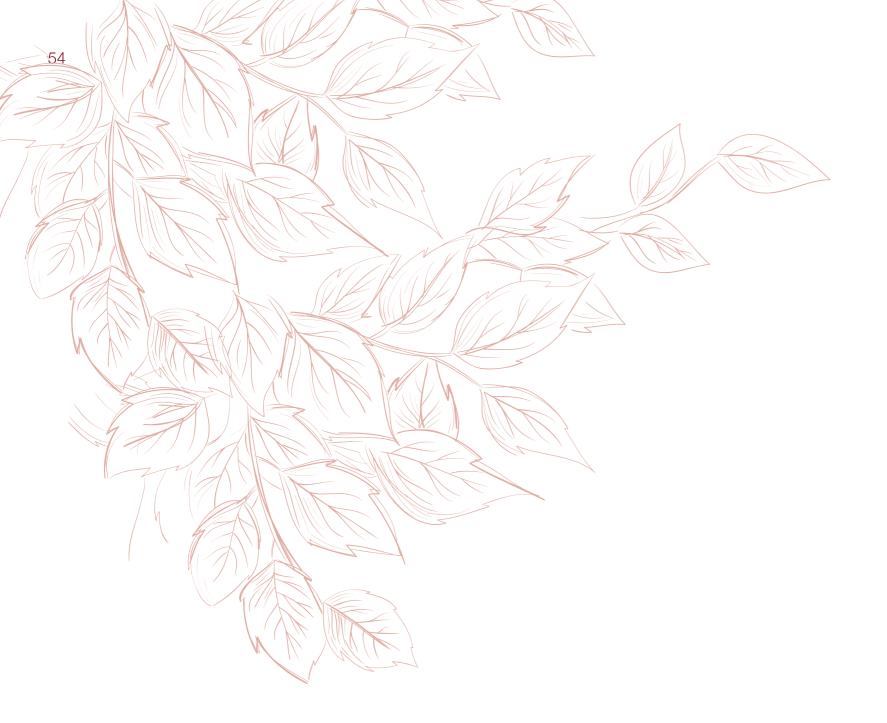
52

g Events Support 17% Donations from families and individuals

> Individual Donors International Organizations



Medical and psychological care and support



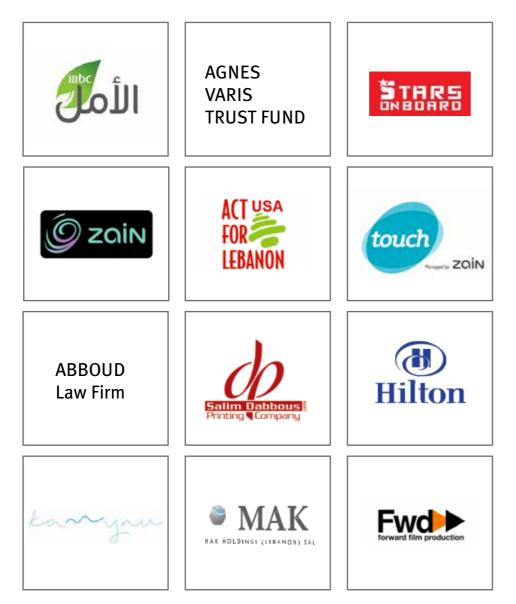
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# "We couldn't have done it without you!"

# **PATIENTS' FAMILIES AND INDIVIDUAL DONORS**

SANAD would like to thank patients' families and individual donors for their generous donations and support throughout the year.

# **OUR STRATEGIC PARTNERS**



# **OUR VALUABLE SUPPORTERS**











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# **SPONSORS FOR 2017 EVENTS**





# FOUNDING AND BOARD MEMBERS

SANAD's founding board members share the passion of supporting and advocating for palliative and hospice care. They provide advice and guidance on technical issues related to the provision of palliative and hospice care, assist in developing SANAD's strategies and future plans, and support the executive team in upholding SANAD's mission and vision.

### Mrs. Lubna Izziddin, BA in Mental Health and Counseling / Founding Board Member and President

Mrs. Izziddin is a social development consultant with 20 years of experience in youth development and child protection in Lebanon and the Arab world. Through working with the UN, INGOs and local NGOs, her work has varied from development and management of programs, to technical workshop design and facilitation for different organizations and groups in the social development field. She offers consultations in various areas such as youth development and empowerment and child protection.

### Mr. Nadim Abboud, Counsellor and Attorney at law; L.L.M., M.B.A. / Founding Board Member and Vice President

Mr. Abboud is the Managing Partner of Abboud & Associates, president of the Blue Stars Sporting Club, co-founder and member of the executive committee of the Brand Protection Group (president 2013-2015). He is a contributor to the drafting of many laws and regulations, a lecturer and trainer at universities, the Institute of Finance-Basil Fuleihan Institute and the Lebanese Army Command and Staff College. He was a first aider at the Lebanese Red Cross (1986-1993), and lastly, author of "La Croix des Années Rouges."

### Dr. Muna Khalidi, PhD in Social Policy and Planning / Founding Board Member and Treasurer

Dr. Khalidi is a social development expert with 20 years of experience in social development work in Lebanon and in the Arab region. In addition to her work experience in the public sector, her experience spans other sectors such as NGOs, INGOs, the UN, academia and media sectors.

### Dr. Rabih El Chammay, MD, / Founding Member

Dr. Rabih El Chammay is a psychiatrist, working in diverse settings that range from clinical work to teaching, training, supervising and conducting consultancies for the UN, INGOs and NGOs in Lebanon and the Arab region. He is currently the focal point for health and human rights at the Ministry of Health and the mental health advisor for International Medical Corps, Lebanon.

### Dr. Thurayya Arayssi, MD / Board Member

Dr. Arayssi is an associate professor of medicine at the Weill Cornell Medical College in Qatar. Her area of specialty is in rheumatology and geriatrics. She is also the associate dean of Graduate Medical Education at the same institution. Dr. Arayssi has authored or coauthored more than 60 papers, abstracts, book chapters and has presented multiple seminars and lectures at regional and international conferences.

# Mr. Elie Aaraj, BSN, MS Community Health / Board Member

Mr. Aaraj is a co-founder and the Executive Director of the Middle East and North Africa Harm Reduction Association (MENAHRA). He is also serving as the President of the Regional/Arab Network Against AIDS in the Middle East and North Africa Region – RANAA. Mr. Aaraj is the Founding President of the Order of Nurses in Lebanon, and the founder of the SIDC Association (Soins Infirmiers et Développement Communautaire).

### Ms. Carol Mansour, BA in Sports Medicine/Psychology / Board Member

Ms. Mansour is a documentary filmmaker. After working for several years as an editor and director at a local TV station, she founded her own production house in 2000. Her documentaries have addressed socioeconomic issues including war, street children, child labor, migrant women workers, refugees, water, environment and other related topics.



# **SANAD'S AMBASSADOR**

### Ali Jaber

Mr. Ali Jaber, Dean of the Mohamad Bin Rashed School for Communication at the American University in Dubai and General Director of the MBC TV Group, has kindly been shouldering the responsibility of raising awareness about SANAD's mission by becoming its ambassador.

Mr. Jaber's commitment and involvement in supporting SANAD is evident in his activities on all levels, including increasing our visibility, participation and advocacy for hospice care. As a jury member of the popular Arab TV program, "Arabs Got Talent," and through other platforms, Mr. Jaber has given SANAD and the concept of hospice care much exposure in the Arab world.

# **SANAD'S ADVISERS**

### Mrs. Helen Smaha Nuwyahid

Mrs. Nuwyahid is currently SANAD's adviser on technical issues related to palliative care and is our representative at the National Committee for Pain Relief and Palliative Care.

As a director of nursing, she has undertaken a major restructuring and revamping of nursing service departments in two prominent Beirut hospitals. As a consultant, educator, and administrator, she has designed and implemented curricula for schools of nursing. She has accumulated a breadth of experience from both Lebanon and the United States. Mrs. Nuwayhed is a previous president of the Order of Nurses.

### **ADYAN Foundation**

The ADYAN Foundation is a Lebanese foundation for interfaith studies and spiritual solidarity, with Christian and Muslim founding members. The member's expertise cover fundamental theology and political philosophy, religious and Islamic studies, educational leadership, research in psychosociology and in sociology of conflicts and social work.

### Ms. Ghada Najjar

Ms. Najjar has a master's degree in clinical psychology research, with special focus on parental counseling. She has worked with diverse groups of parents to develop their ability to communicate with and positively engage children, and to lead them to the path of autonomy and independence.





# **FOUNDING PRESIDENT**

**Acting Director (Volunteer)** 

### Lubna Izziddin

SANAD's interdisciplinary team members - the doctors, registered nurses and psychologist - work closely to achieve a holistic approach to care. Our team focuses on addressing the medical, social and psychological challenges that patients and their families are facing due to the underlying terminal illness.

# HOME HOSPICE CARE MEDICAL TEAM

Medical Director Dr. Salam Jalloul



As a family physician and geriatrician who studied at the University of Rouen, France, she has been a practicing physician for more than 20 years in France and Lebanon, and completed her Palliative Care Certification from the University of Lyon in 2014. She is a member of the Order of Physicians in Lebanon and is a founding member and the current president of the Lebanese Geriatric Society. Dr. Jalloul has been recently appointed as a member on the Palliative Care Committee and an associate at the Department of Family Medicine at the American University of Beirut Medical Center (AUBMC).



### Medical Doctors: Dr. Jospeh Kahhale - Beirut Office:

Dr. Kahhaleh worked as an emergency physician and assistant surgeon in the operating theatre. With several years of experience in research, he was appointed at AUB as a research associate on a component of the burden of disease in Lebanon and worked for WHO on several research projects as principal investigator. Currently, he is an instructor at the Faculty of Medicine at AUB, and a lecturer in medicine and in public health and health management at the Lebanese University, Faculty of Public Health and Faculty of Dentistry. He is also a member of the Lebanese Order of Physicians.

### Dr. Rosa Rhimi - Beqaa Office:

Dr. Rhimi's professional experience began at the University Hospital, Faculty of Medicine "Miguel Enriquez," and the polyclinic "Wilfredo Perez Perez" in Havana, Cuba as a family medicine specialist. She has been practicing in Lebanon since 1992.

Currently, she is a member of the medical staff in the Department of Family Medicine in AUBMC. Dr. Rahime is also a member of the Lebanese Order of Physicians, the Lebanese Society of Family Medicine, the Cuban Order of Physicians and Cuban Society of Family Medicine.

# HOME HOSPICE CARE NURSING TEAM

### **Nursing Director**

### Zeinab Zebara, RN



Before joining SANAD in 2013, Ms. Zebara worked as a registered nurse in the obstetrics and gynecology oncology department at AUBMC. She participated in a number of statistical research studies in different disciplines including children's asthma, geriatric complications, pressure ulcers, and domestic violence. She is certified in administration of chemotherapy under the Nursing Skills Competency Program at AUBMC. With more than four years of dedication to SANAD, Ms. Zebara is currently the supervising hospice nurse at SANAD.

### **Hospice Nurses**

### Saria Gerges, RN



After graduating in 2007 from the Lebanese University with a BS degree in nursing, Ms. Gerges worked at St. Charles Hospital in the surgical and intensive care units until 2009. She then worked at AUBMC for seven years in the obstetricgynecology (oncology gynecology) department. She has a certificate from the National Collaboration Prenatal Neonatal Network and another certificate from a course she took on acute pain. During her years at AUBMC, Ms. Gerges was a member of the pain committee at the hospital. She was also awarded the best ob-gyn RN. She has been a member of SANAD since April 2016.



### Hamsa Bou Hadir, RN

Ms. Bou Hadir attained her BS degree in nursing from the Lebanese University in 2012. She worked at Sacré Coeur Hospital for a year and then moved to Levant Hospital where she worked for two years.

Ms. Bou Hadir completed her nursing studies at the Lebanese University, after which she became a surgical Registered Nurse for two years at la Clinique du Levant. She has also served as a pediatric RN at Sacre Coeur Hospital. In March 2017, she joined SANAD as a hospice nurse. She is passionate about working with and supporting terminally ill patients, which motivated her to become part of SANAD's team. She was appointed as a hospice nurse at SANAD early 2017.

### Elie Mcheik, TS, RN

Having graduated from Bir Hassan Institute with TS 3 in nursing and with a diploma in reanimation from the Lebanese Red Cross. Mr. Mcheik worked as a Registered Nurse for two years in the Oncology unit at Al Hayat Hospital and then he moved to La Clinique du Levant where he served in the emergency department. He has built an extensive experience in the ICU at Al Hayek Hospital. Elie joined SANAD in early 2017.

### Rasha Zouki, BSN, RN

After graduating from the Lebanese University with a bachelor's degree in Nursing Sciences. Ms. Zouki joined the Libano Francais Hospital where she served for 12 years as a Medical-Surgical Registered Nurse. She recently joined SANAD to serve as a hospice nurse in the Mid-Beqaa office.



# **MENTAL HEALTH TEAM**

### **Daline Basset**

Mrs. Basset graduated from the Lebanese University with a BA in clinical psychology, and from USJ in 2006, where she acquired a master's degree in clinical psychology and psychopathology. Mrs. Basset completed four years of intensive training in analytic psychology, and conducted her clinical rotations in Hôpital Psychiatrique de la Croix and Om El Nour. She previously worked with homeless children at Home of Hope for six years, at Notre Dame de la Délivrance, and at Rabitat el Mahabba. She currently works at Blessed Organization with mentally challenged individuals, at the Spiritual Maronite Court and as a private practitioner. Mrs. Basset joined SANAD in May 2015 as a hospice psychologist.

### **Hiba Salem**



After completing her bachelor's degree in Psychology from the American University of Beirut in 2007. Mrs. Salem went on to pursue a master's degree in Expressive Therapy and Mental Health Counseling from Lesley University in Cambridge, MA (2012), and a master's degree in Clinical Psychology from Boston University in Boston, MA (2014). She has worked as a mental health counselor within the refugee population with various NGOs and institutions. Additionally, she worked as a mental health counselor within the Bournewood Health Systems at Bournewood Inpatient Psychiatric Hospital in Boston. During her time in the US, she also worked with Boston University and Harvard University conducting research within the fields of Clinical Psychology and Developmental Psychology. In May 2017, Mrs. Salem joined SANAD as a mental health counselor.

# PROJECTS, RESEARCH AND TRAINING OFFICER

### **Farah Demachkieh**



Ms. Demachkieh holds a bachelor's degree in Nursing Sciences from the American University of Beirut and has 10 years experience in nursing clinical practice in emergency and Sports medicine fields both in Lebanon and Qatar. She newly pursued her master's degree in public health with focus on health promotion and community health from AUB. Her recent public health experience focused on operational research targeting disadvantaged populations in addition to process evaluation and needs assessment at primary health care settings.

# FUNDRAISING AND ADMINISTRATION TEAM

### Ayman Abdou



Mr. Abdou joined SANAD in 2015 as an administrative and fundraising officer. Through his previous and varied work experience and his educational background, he has accumulated knowledge on financial, administrative and managerial sectors that are pivotal to his scope of work at SANAD. He works closely with SANAD's fundraising officer in organizing and monitoring SANAD's fundraising events. Additionally he is responsible managing any human resources-related issues at SANAD. He is currently pursuing his master's degree in economics at Université Saint-Joseph.



Ms. Raya attained her BS in biochemistry from the Lebanese University, Faculty of Sciences in 2016. She is passionate about helping her community by volunteering in several programs including those organized by LOYAC. She started as a volunteer with SANAD and eventually joined the fundraising team in May 2016. She contributes to SANAD's social media platforms and keeps our audienceup-to-date with SANAD's news and events.



### **Hussein Taleb**

Najah Raya

Mr. Taleb has substantial experience in management accounting in the private sector, and more than six years of commitment to SANAD as its accountant.



### **Christine Zino, BA**

Ms. Zino has recently joined SANAD as an administrative assistant for the Mid-Beqaa office.



# **LOGISTICAL SUPPORT TEAM**

Ali Al-Sayed Mohammad Fayad

Field officers: Mr. Al-Sayed and Mr. Fayed provide logistical support for the Hospice Care Team in the field.

# A GLIMPSE OF SANAD's PREVIOUS EVENTS







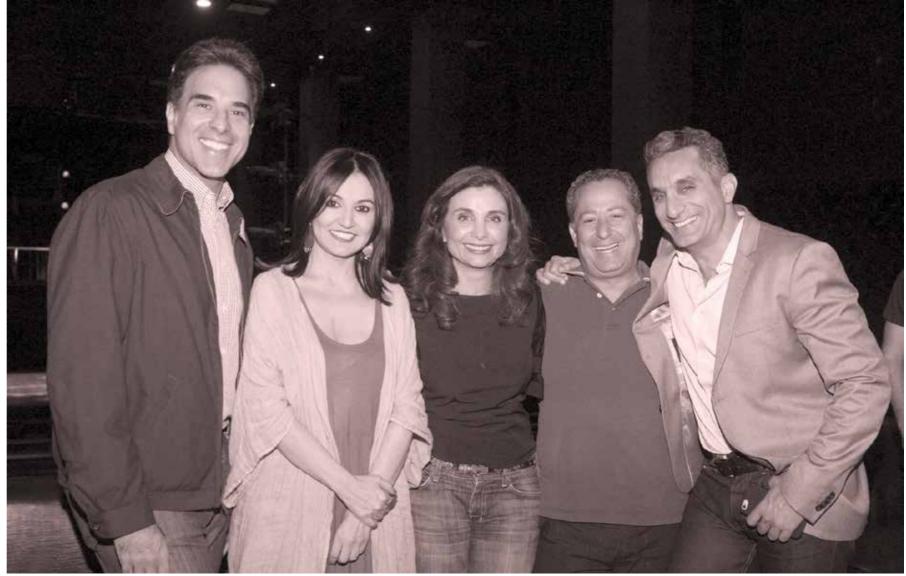














































Hom رعاية التلطيفية ي من مرض عضال



@Sanadhospice

Follow us on all our social media platforms to know more about our news and updates and how you can support SANAD!

### *For more information:*

SANAD's website www.sanadhospice.org

SANAD's Blog www.sanadhospiceblog.wordpress.com

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