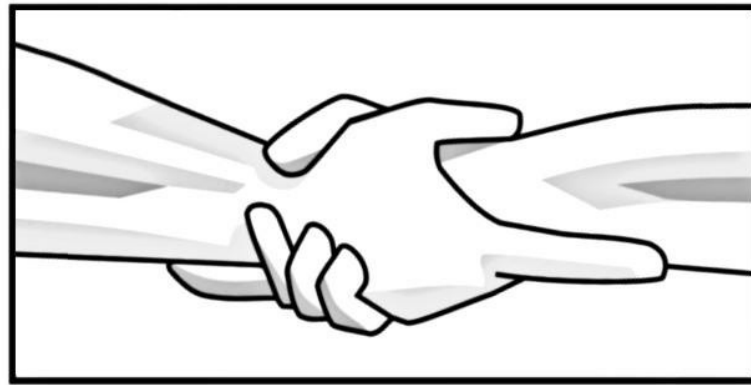


ROCKY MOUNTAIN  
**REFUGE**  
*for end of life care*



**2022 Annual Report**



# Mission & Vision

Our mission is to offer dignity to our Denver-area neighbors with terminal illness - ***who lack the shelter of a home*** - by providing a stable, appropriate environment for hospice agencies to deliver care.



Our vision is to provide a safe, comfortable place where those without a home can live during their last days. Our staff and volunteers offer family-style custodial care such as help with laundry, cleaning, and companionship. Our referring hospice agency partners provide skilled medical services, and equipment.

# Who We Are

## **Identified Gap in Care.**

Providing hospice care for unhoused individuals can be difficult to meet because hospice agencies are designed to assist in a home and typically have few or no beds in their own facilities. They struggle to provide care on the streets. Denver's homeless shelters meet immediate, short-term needs and hospice patients need individual custodial care for weeks, with privacy and stability that shelters are unable to provide. Unhoused people at the end of life often literally and figuratively fall through the cracks on the side walk.

## **Our Response.**

A working group began meeting in late 2017 to create an organization that could support of this vision. The group was inspired by the nationwide work of the Omega Home Network, and their prototype of a Social Model Hospice House was determined to be the best structure to pursue. The Board of Directors was officially established in 2018; and Rocky Mountain Refuge was approved by the IRS as a 501(c)(3) not-for-profit organization on April 15th, 2019.

## **How We Fill the Need.**

Rocky Mountain Refuge is filling this need by operating as a specialized shelter, providing custodial care to our terminally ill neighbors on the streets. Our staff and volunteers operate as an extension of someone's family giving basic care such as help with laundry, cleaning, and companionship. Our referring hospice agency partners can then provide the skilled nursing and physician services needed. We welcome everyone regardless of status and personal identity and are a non-sectarian social service organization.

## **Others doing similar work.**

The structure and vision of Rocky Mountain Refuge took inspiration from the Social Model Hospice movement. We are a member of the nationwide Omega Home Network. As far as we know there are only 3 other such shelters in the US that are focused specifically on the homeless population. We are the only such shelter in Colorado.

# Our Story in 2022

## What We Did.

We opened as a pilot project in early 2022 and were able to stay open for most of the year. We provided housing and custodial care for 12 individuals who were unhoused or housing insecure and needed hospice care. Of those served, 70% died while in our care and 30% were discharged. Of those discharged one discharged himself from hospice care and the rest were discharged to hospitals.

## Why Did We Do It?

We did it because there is a gap in care for folks who need hospice care but are unhoused or do not have a safe home environment to receive that care. People with terminal illness but no home have very few options. Emergency rooms, often a last resort for people on the street, are the most expensive and least effective setting possible. Most skilled nursing homes won't accept unhoused folks due to the length of time to approve benefits.

## What Did We Learn?

We constantly review our processes to determine what can be made better. This year we greatly streamlined our documentation of pharmaceuticals as well started a training program for our staff. Staffing has been increased by hiring an office manager who took over scheduling and direct staff communications and late in the year a program manager was hired to take over training, working with volunteers, and intake/discharge of residents. We also realized our need to improve our community awareness by explaining the need for unhoused individuals to have a safe place to receive hospice care to a wider audience. In addition, we also need to expand our ability to serve our clients by increasing our number of beds from 2 to 3.

# Paul's Story

“Paul” had initially been set up in a hotel room for hospice care, however this care no longer suited his needs. When he arrived at Rocky Mountain Refuge for End of Life Care with a garbage bag filled with various medications, the hospice nurse and our staff were able to consolidate to a manageable plan tailored to his needs.

The day before he passed, he was looking at a painting on the wall in the room when a staff member asked him what he was looking at. He responded with his final words, “I’m going to a family reunion.” From the comfort of his bed, Paul was able to pass with a sense of peace.





# Jane's Story

“Jane” lived with uterine cancer and consequent unmanaged pain for years, unable to receive the care she needed. She was in a perpetual cycle of being admitted to the hospital for intense pain, becoming medically stable, then getting discharged when she would find herself again without shelter and inevitably losing her pain medications to theft or overuse. Thus, she would return to the hospital. When she was transferred to Rocky Mountain Refuge, she was able to stay for 41 days. Rocky Mountain Refuge was able to break the hospital cycle and she was eventually able to pass away in comfort and surrounded by prayer.

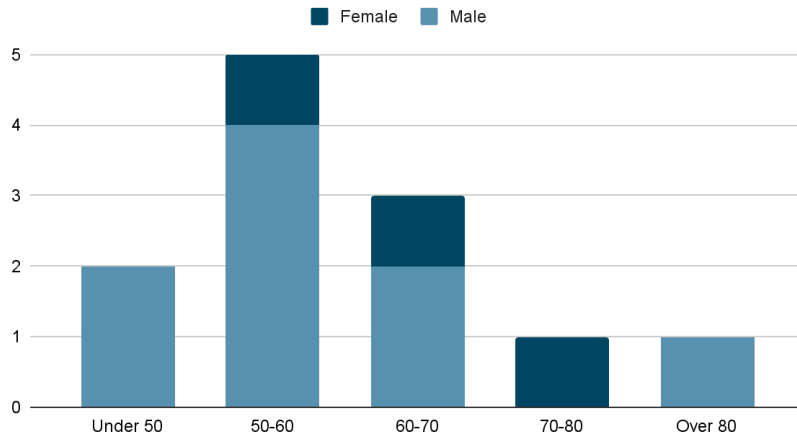
\*\*\* Names of all residents have been altered to protect privacy.



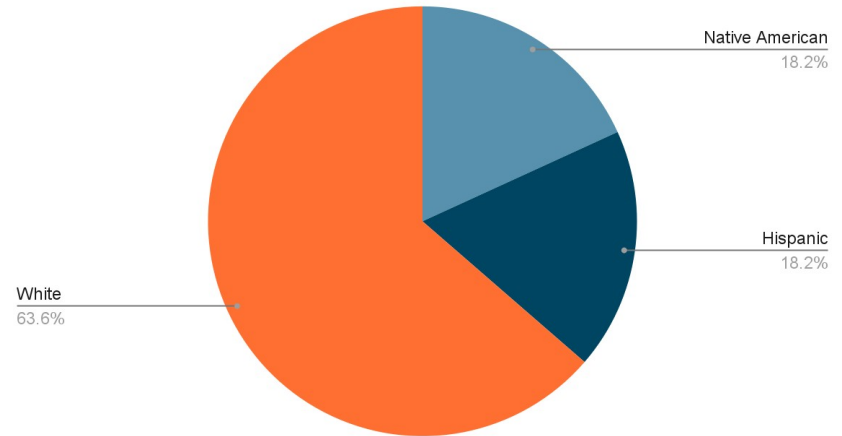
in  
*Loving  
Memory*

# Demographics

Age and Gender Identity

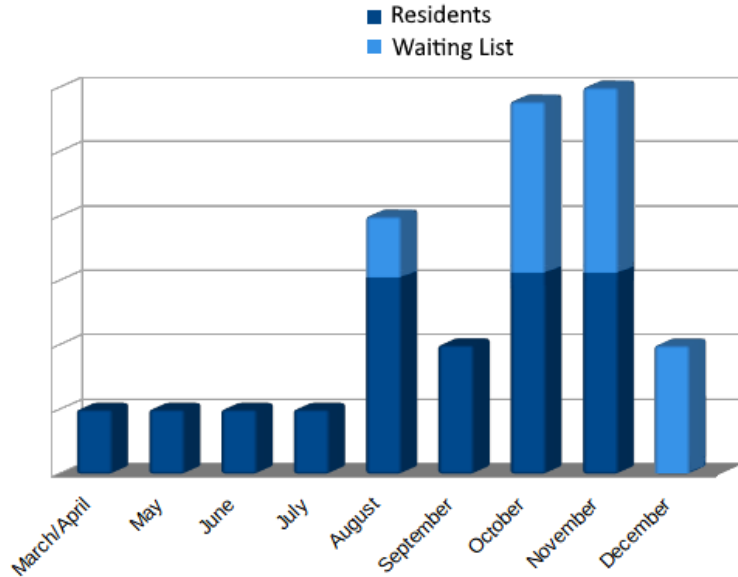


Ethnicity



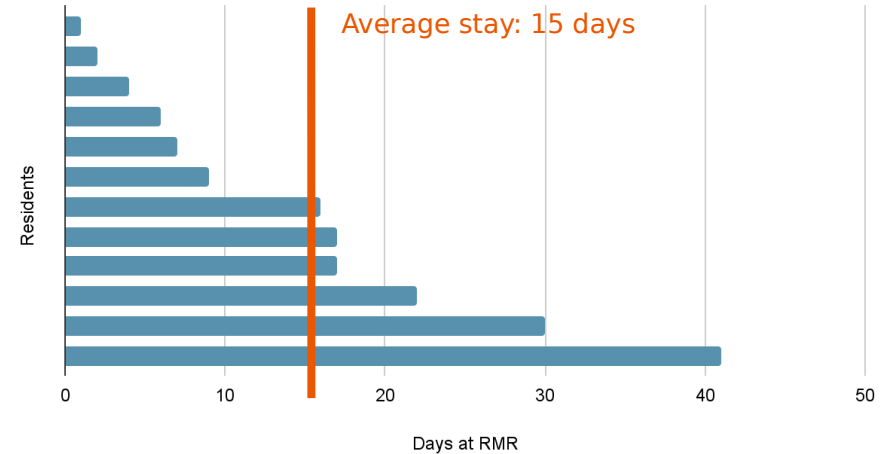
Rocky Mountain Refuge strives to serve all who come to us regardless of legal status or personal identity.

# Demographics



As we became more well known in the community, beginning in August we established a waiting list.

Length of Stay at RMR

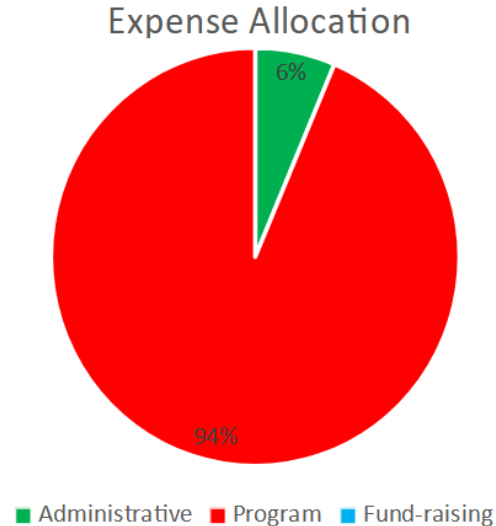
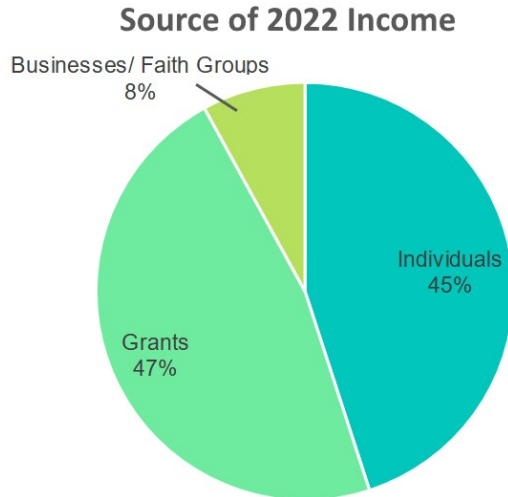


We had two residents who stayed with us 30 days or more in 2022, but the majority stayed two weeks or less.



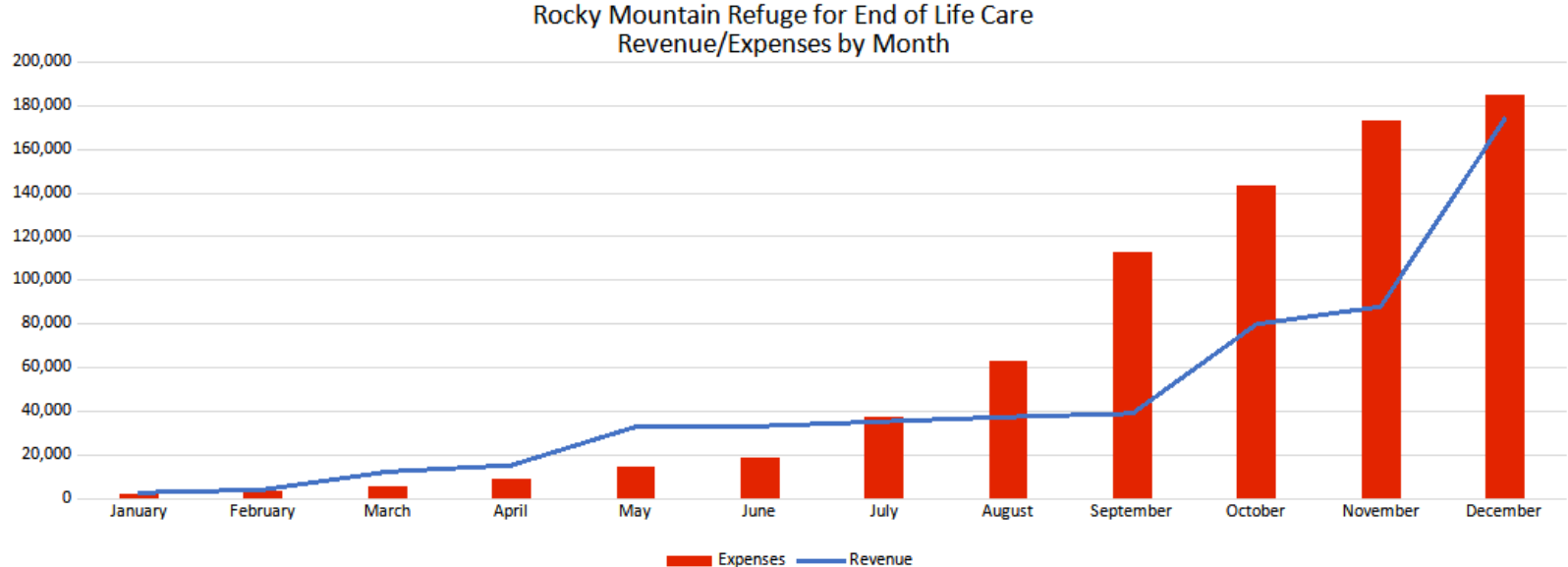
# Our Income in 2022

Rocky Mountain Refuge provides our services to our residents free of charge. To do that, we seek funding from various community organizations, foundations, and individuals. We raised a total of \$174 thousand throughout the year. Most of our income (94%) went directly to resident care. The source of our income was nearly evenly split between individuals and foundations.



# Our Expenses in 2022

Rocky Mountain Refuge opened in February, 2022. We understood there were many things we did not know but felt the only way to learn was to live the mission. One thing we clearly struggled with was fundraising in mid-year at which time our expenses surpassed our income. Nonetheless, we were able to stay open until mid-November 2022 and with renewed fundraising are prepared to resume operations in early 2023.



# Our Impact in 2022

Our most immediate impact has been in the lives of our residents who ended in comfort rather than in uncontrolled pain and alone. Many of our residents were so happy to be in our facility and were able to finally relax and let nature take its course.

We also want to remember the effect we had on the lives of the family members and loved ones of our residents. Family members are often at a loss about how to care for someone on the streets. They can suffer long term grief if their family member dies alone, afraid, and in uncontrolled pain. Rocky Mountain Refuge provided a great deal of comfort to these family members. These metrics of care in a shelter at the end of life compared with dying on the streets are distinctly more qualitative than quantifiable.

We significantly reduced the cost to various local hospitals and the wider community. Most (85%) of our residents were admitted directly from hospitals and of those only 23% had to be added to hospice care before we could admit them. The remainder were already on hospice care.



# Plans for 2023

## Add one more bed

**Increases the number of residents we can serve**

**Reduces the number of folks on the wait list**

## Remodel bathrooms

**Become ADA compliant**

**Increase safety for residents and staff**

## Reducing costs

**Adding a 3rd bed would help us reduce the cost per resident**

**Staff will be challenged to find ways of reducing costs throughout the year**

# Memorial Services

There are  
many people  
who come and go  
in our lives.

A few  
touch us  
in ways  
that change us  
forever.

Making us better  
from knowing  
them.



Each person who  
came to us last year  
was remembered  
with a memorial  
service.

“Most importantly, we will know that at least some of our unhoused friends died in a comfortable bed with some dignity and someone holding their hand.

***No one should die alone***, and we are doing something about that”

# **Thank you!**

To each and every one who supported us in 2022. We are deeply grateful. We would like to personally thank some of our stand out supporters on the following pages.







## **Members of our Compassionate Care Circle**

Belinda Waldron  
Dr. Nancy Robertson  
James Patrick Hall  
Kate West  
Lorena Fajardo  
Mariah Quish  
Marrton (Marry) Dormish  
Mary Watson  
Michele Ferguson  
Peter DeBlois  
Rachel Rogers  
Rebecca Schuyler  
Richard & Alison Rabinoff  
Richard & Mary Kay Kisseberth  
Ridgeway Financial, LLC  
Sherri & Gary Schanbacher  
Tim & Julie Mueller  
Wendy W.

## **Supporting Foundations and Organizations**

Brenda Sue Brown Charitable Trust  
Brewability Lab  
Brotherhood of Saint Gregory  
Columbine Unitarian Universalist Church  
Daniel's Fund  
Dietvorst Family Charitable Fund  
Envestnet Asset Management, Inc.  
Fidelity Charitable – Tony Blando  
Gill Foundation  
Kong Company  
Regis High Jesuit Community  
Schwab Charitable  
Seraphim Capital Management  
SS Cyril & Methodius Russian Greek Catholic  
Community  
St. Andrew's Episcopal Church  
St. Timothy's Episcopal Church  
The Duffy Charitable Gift Fund  
The Mary Jane Shewfelt Charitable Trust  
Thrivent  
Trinity United Methodist Church

## **Our Largest Individual Donors**

Alexis Rodriguez-Carlson  
Carolyn Kubena  
Chad Hartmann, TRU Community Care  
Cheryl Rottman  
Chris McGuire  
Claire Gosnell  
Daniel Wright  
David Nowling  
Deborah Little Wyman  
Grace Malacrida  
Heather Gasper  
James Patrick Hall, BSG  
Jennifer A Ditmarsch  
Karen S Keeran  
Kathy and William M Kreidler  
Kelly R Arnett  
Leonard Galliah  
Loretta Ulibarri  
Mariah Quish

Marilyn Greenwalt  
Mark W. Bell  
Martha Birney  
Michele Ferguson  
Nancy M. McMahon  
Olivia Simon  
Pat Petrash  
Patricia Wagner  
Paul Smith  
Rachel Rogers  
Rebecca Schuyler  
Roger Bowden  
Sarah Harrison  
Susan Backus  
Tim & Julie Mueller  
Tony Blando  
Tracy Magill  
Wallace Smith, Ridgeway Financial, LLC  
William Sweeney

## **Community Partnerships**

Bayaud Enterprises staffing  
Compassus Hospice  
Compleco Hospice  
Denver Hospice  
Elevation Hospice  
HealthONE Hospice  
Lutheran Hospice  
Namaste Hospice  
TRU Community Care Hospice