



# 2025 Gratitude Report



**VNA & HOSPICE**  
of the Southwest Region  
Serving Bennington, Franklin, & Rutland Counties

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## Thomas Huebner

August 8, 1953 – March 26, 2025

We remember Thomas Huebner, a devoted VNAHSR board member and one of Vermont's most respected health care leaders. Through exceptional leadership, wise counsel, and a sharp wit, Tom strengthened both our organization and health care across Vermont. We are deeply grateful for his service and will honor his legacy by carrying forward the commitment Tom brought to our mission and to the state he served.



# A Note From Our CEO

It is an honor to write to you as I finish my first year as CEO of VNA & Hospice of the Southwest Region and my 25th year as a member of this incredible team.

I am deeply grateful for the trust you place in us to care for our patients—your family members, friends, and neighbors.

VNAHSR is, at our core, a values-driven organization. Our values spell **HEALTH: Honesty, Excellence, Accountability, Leadership, Teamwork, and Helpfulness**. HEALTH matters—to the patients who rely on our clinical expertise, to the families who place their confidence in us, and to the community that depends on accessible, high quality, compassionate care at home.

Because of your investments in VNAHSR – through your donations, volunteerism, and general support of our work – our values become real results for real people.

This past year, we provided services across Bennington, Rutland and Franklin Counties to nearly 500 children and over 4,000 patients. We employ more than 200 dedicated home health and hospice professionals, and are committed to ensuring that everyone who needs care receives it, regardless of their circumstances.

As you read this Gratitude Report, it is my sincere hope that you feel a deep sense of pride knowing the care you help make possible.

Within these pages, you will learn more about one of the most profound examples of your impact and our shared commitment to community. Each year, VNAHSR provides around \$2 million in charitable care to people who might otherwise go without. Philanthropy makes that possible. You make that possible.

Thank you for all you do for VNAHSR, for our dedicated team, and for the patients and families we are privileged to serve. Your partnership allows us to live our values and bring HEALTH to our patients every day.

**Jessica Boutin**  
RN, COS-C, CCS-HH



## Our Mission

To enhance the quality of life of all we serve through comprehensive home and community health services.

## Our Vision

To be the best provider of home and community based healthcare in Vermont.

# Strategic Plan

Our strategic plan, completed in 2024, sets the course for the future. It clarifies our priorities, aligns our efforts, and guides thoughtful decisions as the home health and hospice needs of Bennington, Franklin, and Rutland counties evolve.

Most importantly, the strategic plan helps ensure that families in our community can continue to rely on the comfort, dignity, and support that home health and hospice provide—today and into the future.



## People & Culture

Position the organization to be the employer of choice.

## Technology

Increase technical capabilities across all stakeholders.

## Partnerships / Growth / Advocacy

Strengthen community partnerships with stakeholders to become the preferred home health and hospice agency.

## Safety

Cultivate a culture of safety that prioritizes the well-being of all individuals by embedding safety practices into every aspect of operations.

## Financial & Quality Improvement

Ensure the long-term financial health and sustainability of VNAHSR by optimizing revenue streams, controlling costs, and effectively managing risks, while adapting to changing regulatory demands and healthcare needs in our communities.



"Our focus remains steady and grounded in our mission, along with this strategic plan—providing high-quality, compassionate care to the patients and families who rely on us every day. When our teams work together effectively, we ensure that care is not only clinically appropriate, but also respectful, patient-centered, and responsive to individual needs."

- **Jessica Boutin, CEO**

Melissa, Occupational Therapist





Towns Served  
**72**



Home Visits  
**93,864**



Patients  
**4,056**



Charitable Care  
**\$1,759,503**



Miles Driven  
**1,293,423**



Staff  
**248**



Quality of Care  
**★★★★★**



Days of Hospice Care  
**29,778**

# 2025 Impact

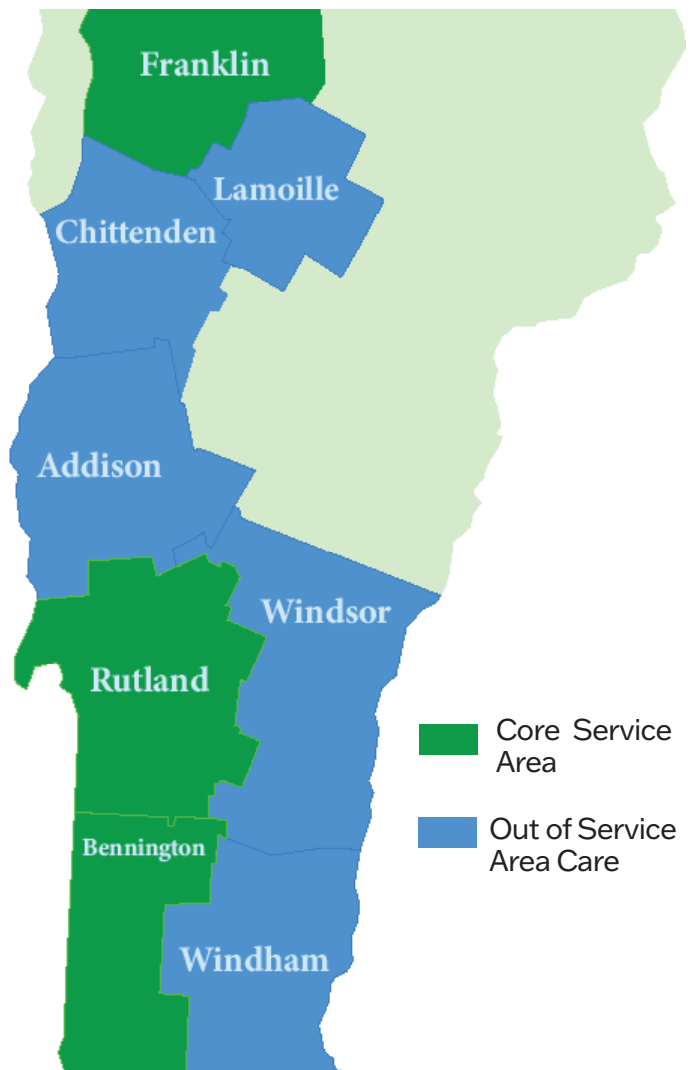
Thanks to your support, our team made over 93,000 visits and drove more than a million miles to serve 72 towns.

While our core service area is Franklin, Bennington, and Rutland counties, your generosity also reached neighbors in Lamoille, Chittenden, Addison, Windsor, and Windham counties—patients who might otherwise have gone without, and patients who have specifically requested our skilled and compassionate services.

Every visit delivers comfort, dignity, and reassurance to families throughout Vermont's Green Mountains. Thank you for making this possible.



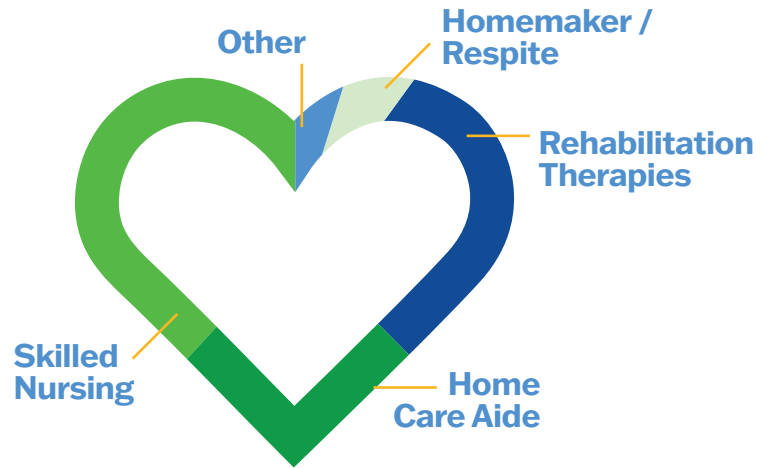
## Visits Across Vermont



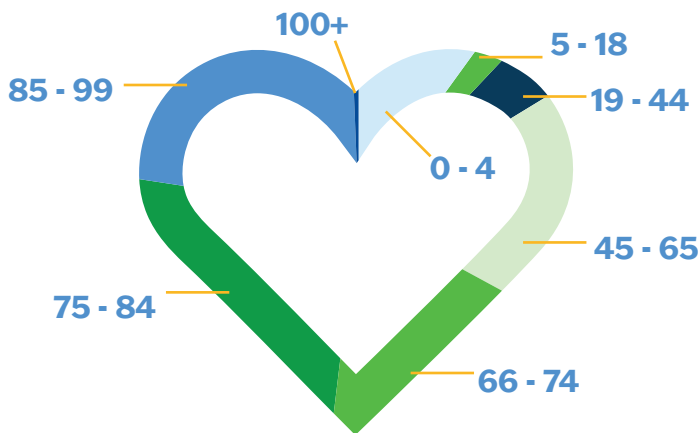
# Serving Our Patients

## Home Visits by Type

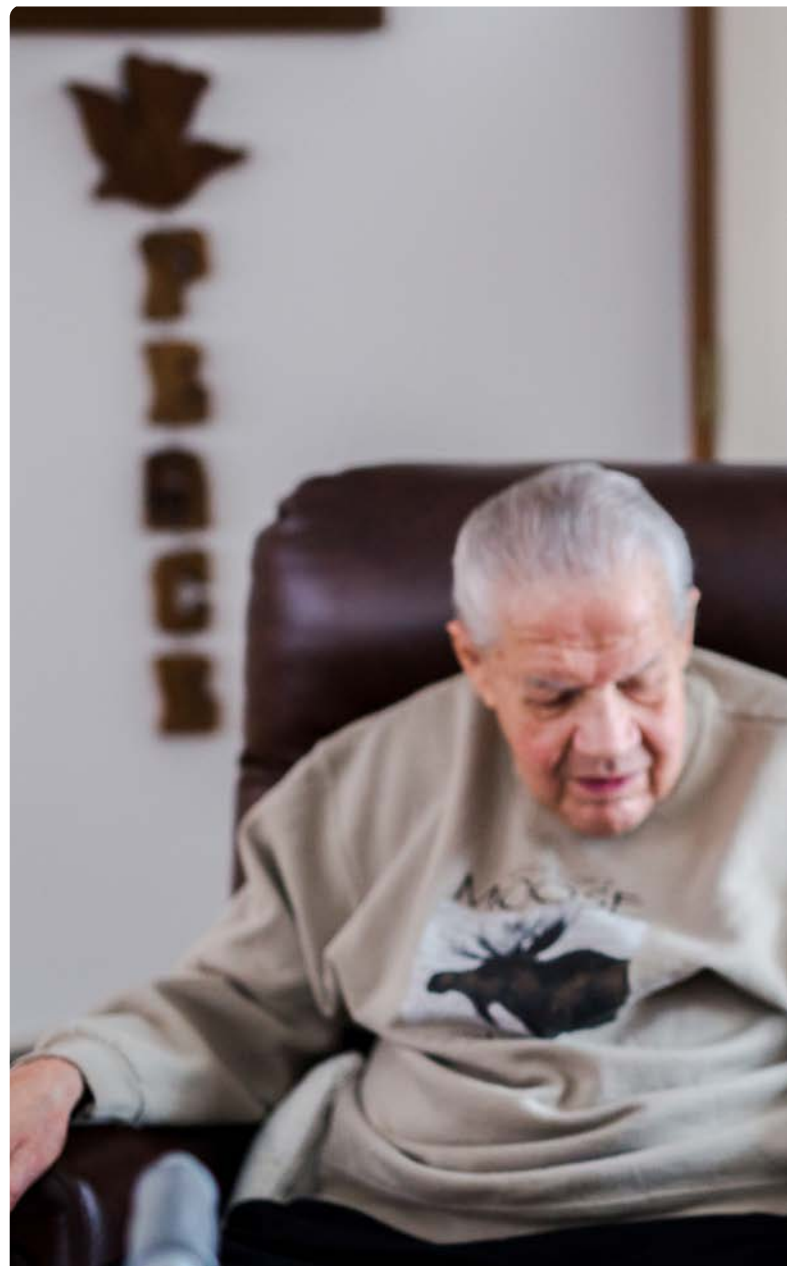
Care Type	# Visits
Skilled Nursing	35,867
Home Care Aide	22,451
Rehabilitation Therapies	25,952
Homemaker / Respite	5,108
Other	4,486
<b>Total Home Visits</b>	<b>93,864</b>



## Age Distribution of Patients

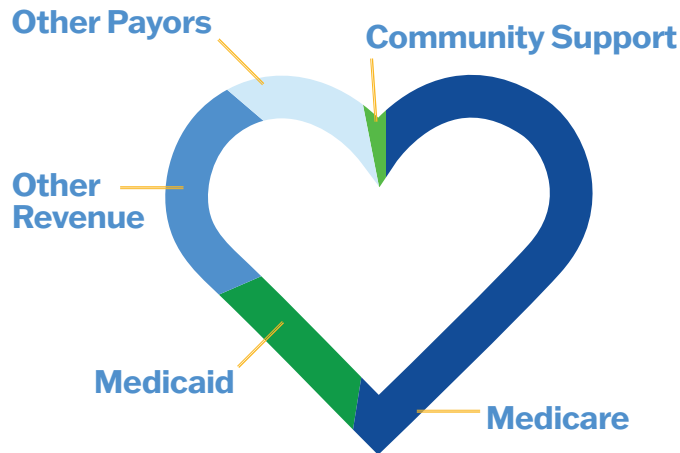


Age	Patients
0 - 4	410
5 - 18	80
19 - 44	177
45 - 65	675
66 - 74	769
75 - 84	1,040
85 - 99	885
100+	20



# Financials

## Revenue

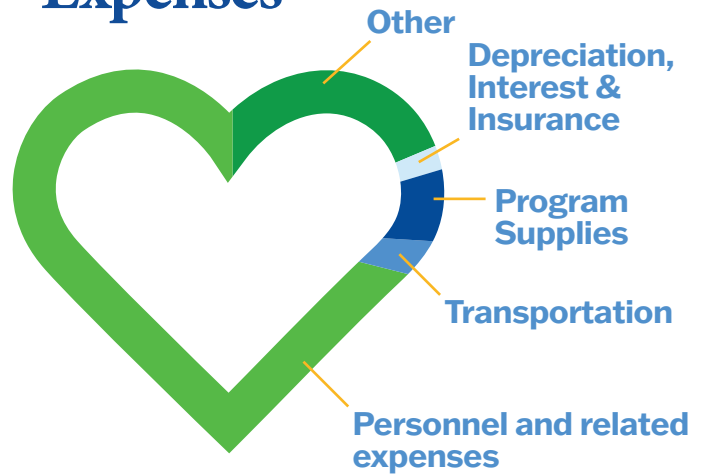


Type	Amount \$
Medicare	\$13,398,614
Medicaid	\$4,026,832
Other Revenue	\$2,776,559
Community Support (United Way and contributions)	\$754,432
Other Payors	\$4,537,590
<b>Total</b>	<b>\$25,494,027</b>



Marty, Physical Therapist

## Expenses



Type	Amount \$
Personnel and related expenses	\$19,837,695
Transportation	\$790,500
Program Supplies	\$1,473,804
Depreciation, Interest & Insurance	\$ 486,386
Other	\$5,228,924
<b>Total</b>	<b>\$27,817,309</b>



# Charitable Care: Our Mission

Imagine that later this summer you are out on your favorite walking path here in Vermont. You trip on a root, fall, and require surgery. Your recovery demands extensive physical therapy—not to get back to peak hiking form, but simply to walk without pain.

Your physician refers you to home healthcare and you select VNAHSR based on our strong outcomes with post-surgical patients. Your insurance covers fifteen physical therapy visits. After that, you pay out of pocket. You are out of work and have no income because of the injury. You cannot drive. You are homebound.

What happens if you still need care after appointment number fifteen?

**Does VNAHSR stop coming?  
We do not.**

Our mission, vision, and values compel us to ensure that care is not determined by a coverage limit or a temporary hardship. In addition, under Vermont regulations, VNAHSR must provide (or arrange for the provision of) designated services to all eligible patients within our service area.

Dan DiBattista, President of the Board of VNAHSR, recently explained that this requirement creates a tough environment in which to operate.

In Vermont, VNAs must provide services regardless of funding. He says, “Then again, if the State dropped the requirement tomorrow, I don’t think we would change anything. We would find a way to do it because we are mission-based. **We will always find a way to complete the mission.**”

This is where charitable care—also known as unreimbursed care—comes in. Charitable care includes three primary categories: under-reimbursed Medicare and Medicaid visits, services provided to uninsured or underinsured patients, and non-billable but clinically essential work such as medication coordination and complex care planning.

In many cases, reimbursement does not fully cover the actual cost of delivering care particularly



Claire, RN PEDI Hi Tech

in a rural state like Vermont, where travel distances, workforce costs, and an aging population increase operational demands.

Despite these demands, VNAHSR consistently performs well on quality-of-care metrics compared with both in-state and national peers. A major reason for that success is the investment made in the exceptional team members who care for our patients every day.

“Our people are the key to delivering high-quality, compassionate care in the home,” says Chief Organizational Development Officer Jessica Fredette. “The cost of providing care continues to rise as we work to offer competitive compensation that allows us to attract and retain the talented professionals our patients deserve.”

Fredette explains that these rising workforce costs are occurring at the same time as reimbursement rates from federal and private payors continue to tighten. “There is an ever-widening gap between what it costs to provide care and what we are reimbursed,” she says.

“We will always find a way to complete the mission.”



"I became aware of the VNA a few years ago when I had my first knee replacement. And I had a second one last year. I live alone and the surgeon ordered the visits after both surgeries. It was a wonderful experience both times and I was very grateful."

**-Mary Walker, GEM**



In 2025, unreimbursed care provided by VNAHSR totaled **\$1,759,503**. This figure represents a range of care including:

- Physical therapy visits beyond coverage limits
- Skilled nursing for patients without adequate insurance
- Hours of coordination that keep patients safe at home and out of the hospital.

Your generosity makes this possible. Philanthropy bridges the difference between reimbursement and reality. Our Thrift Store generates more than \$200,000 annually. Town funding contributes approximately \$300,000. Individual donations add another \$300,000. Together, these diverse revenue streams strengthen our foundation and reduce volatility.


Even so, charitable care remains a significant investment in our community. We approach this responsibility with discipline and transparency. We actively manage costs, measure outcomes, and pursue operational efficiencies. At the same time, we will not compromise on access. When someone in our community needs care, we provide it.

That is where you come in. Our financial sustainability is increasingly reliant on philanthropic support.

### Because of you...

 ...a temporary injury does not become a permanent setback.

 ...coverage limits do not define recovery.

 ...care is delivered based on need, not ability to pay.

That is charitable care. And that is the impact of your support.

Thank you for standing with us and believing in the power of care delivered at home.

# Ways to Give



## Our Annual Fund

Your gift goes where it's needed the most.



## Give Every Month (GEM)

Monthly giving is easy, automatic, and impactful. You set the amount. We deliver the care.



## Sponsor an Event

Our annual golf tournament is a great way to directly support our agency.



## Life Insurance & Retirement Plans

Add us as a beneficiary of your life insurance policy or retirement plan.



## Charitable Distribution from Your IRA

Donate from your IRA. Talk to your financial advisor about possible tax benefits.



## Add Us To Your Will

Bequests can be transformative, consider leaving a percentage of your estate to charity.



## Transfer Appreciated Stock

Make a meaningful gift and maximize your tax benefits.



## In Memory Of

Consider donating on behalf of your loved one.



## In Honor Of

Give in their name, spread the compassionate care.





While Ana's work is rooted in the daily life of The Meadows, Marty works in people's homes across the community. There, he helps people regain strength after illness, injury, or surgery, and guides them through healing.

"It's not just about getting from point A to point B," Marty explains. "It's how you move. How safe you are." Working in his patient's homes, he helps them understand their bodies again, set realistic goals, learn safe movement, and rebuild confidence.

**Ana and Marty both lead with trust.** Both take time to educate, to explain not just what to do, but why it matters. Both understand that progress, especially for older adults, is as much about confidence and connection as it is about strength.

Ana and Marty have built something lasting, relationships not only with residents, but with staff, families, and the broader community.

That longevity shapes outcomes in ways that are both measurable and deeply human.

Ana recalls working with a 90-year-old resident recovering from a fractured femur. At first, the resident could walk only a few feet. Over time, with patience and encouragement, she regained strength and confidence.

"She ended up walking from her room to the dining room," Ana says. "About 250 feet."

Moments like that are the visible milestones. But behind them are countless smaller ones, a joke that breaks tension, a gentle explanation that builds trust, a familiar face that makes someone willing to try.

**Even the staff notice the impact.** "They'll say, 'They don't walk for us, they walk for you,'" Ana says with a smile.

It's said lightly, but it speaks to something deeper, the power of relationships in care. In a field where services can feel fragmented, Ana and Marty offer something different: consistency and connection.

Over time, their care becomes something residents and families come to rely on. Not just for recovery, but for reassurance that they are known, supported, and never navigating their healing alone.

**For all you give our community, thank you, Ana and Marty!** 

## Two Therapists, One Community of Care



Ana and Marty Locsin, physical therapists with VNA & Hospice of the Southwest Region, have spent many years caring for people across Rutland County. Not side by side in the same room, but in parallel, each building deep, lasting relationships in their own setting.

Ana is a steady presence inside The Meadows, an assisted living center in Rutland. For residents there, she's not just a therapist who visits, she's part of the rhythm of the building. She knows the staff, collaborates closely with nursing, and, most importantly, knows the residents.

"You already know them," she says. "When you walk in, they're happy. 'Oh hi!' they say. 'Did you miss me?'"

**Familiarity carries weight,** especially in assisted living, where transitions can feel overwhelming.

"Seeing a familiar face helps with participation," says Sherry Halnon, Director of Nursing at The Meadows. "Sometimes residents might hesitate with someone new, but with Ana, that barrier just isn't there."



# Q&A

## Nicole DeNoyers Hospice Volunteer



### How long have you been a Hospice Volunteer with VNA?

I've been volunteering with the VNA since March 2024.

### What would you say to someone who is interested in becoming a volunteer?

Do it! Go create your own adventure in volunteering (with Mary Pleasant's lovely guidance of course).

### Why did you want to volunteer with our agency?

When my dad died in 2011, I was fortunate to have an amazing hospice volunteer sit vigil with us. I thought it was remarkable that she could step into the storm and just be so peaceful. It was one of the most stressful experiences of my life - yet here she was, calm and earthbound. I was grateful for her presence. I wanted to pay that forward when I had time.

### You've really been expanding educational offerings, can you tell me a little bit more about the Advance Directive workshops?

The Advance Directive workshops were born of Death, Dying and Danish events. While facilitating DDD events, attendees kept asking questions about advance directives, so it seemed that developing an offering tailored specifically to answering those questions would be useful.

Another volunteer in Bennington had a similar experience. And, voila, here we are. The Advance Directive workshops were launched in Bennington and Rutland counties last year and in Franklin county this year!

### What about being a volunteer is most fulfilling to you?

There's so much I get back from volunteering. I've met some really incredible people at the bedside and in the community. I know I've been able to touch some lives and bring peace to patients and their families as they face death. I think I'm beginning to internalize the value of presence vs. the need for doing which is big for me. And, I learned that I'm not done learning. There is so much mystery to death and end-of-life care.

### Anything else you want people to know?

I'm grateful for the opportunity to give back a little and learn a lot. I love this experience! Thank you!



**Thank you to all VNAHSR volunteers!**  
If you are interested in becoming a hospice volunteer please call or email Mary Pleasant Hospice Volunteer Services Coordinator: 802.442.0540 | [mary.pleasant@vnahsr.org](mailto:mary.pleasant@vnahsr.org)





The chaplain helped him find the confidence to join the Tuesday night rosary group.

My father started hospice care after his kidney disease became very advanced. His kidney function was steadily declining. He needed dialysis but refused it.

“I’m an old man. And I’m tired,” he said. “What will it really do for me?”

When the doctors told him that without dialysis he might live only a few months, he was at peace. His care team recommended hospice because his life expectancy was less than six months.

He was a simple man. He loved honoring holiday traditions, watching birds, and having friends stop by. He had many questions about hospice, especially whether it fit with his religion.

The people from hospice answered every question with patience and love. They listened and made sure he understood what hospice would mean for him.

The answer that mattered most: the hospice team would keep him comfortable as his body failed. There would be no more attempts to save his life but the hospice team would provide care and services to make him as comfortable as possible. He wept with relief.

About a month after starting with hospice, something surprising happened. My father began to regain strength in his legs. Before long, he was walking up and down the halls. While nothing would change the fact that his kidneys were failing, thanks to hospice care he felt better emotionally, physically, and spiritually.

Around that time, we realized he might be able to go home for his final months. Dad wanted to die in the house where he had lived for nearly forty years. He wanted to watch “his” birds in “his” trees.

Getting him home nearly took an act of Congress. We immediately set about a rapid, and not insignificant, renovation. We added a ramp, widened the bathroom doorway, installed a taller toilet with handrails, replaced the sink to accommodate a wheelchair and rearranged furniture to reduce fall risks.

Finally, on August 1st, four months after starting hospice, he returned home. Some things had changed but it was still his home, and he knew it.



## Hospice Care: Letter from a Family

We first met the hospice team when my father was receiving care in a nursing home. For a while he had his own room because of an infection. Every visitor had to dress up in big yellow gowns and gloves before visiting him.

First came the hospice nurse. She was petite and the gown practically swallowed her!

Even though the nursing home had nurses and aides, the same nurse from hospice visited him every week. She knew the staff there and quickly got to know my father. She suggested creams for sore spots, checked on how he responded to medications, and made sure he was as comfortable as possible.

Next came the social worker. She had curly red hair and a huge smile. My father could never remember her name. Whenever we mentioned her, he’d grin and ask, “Is that the pretty one?” She connected him with services, checked on his feelings, and cared about our whole family.

Then came the hospice chaplain. Though his chaplaincy was nondenominational, he was Catholic like my father. That shared faith meant a lot to Dad. When he could finally move around the nursing home again, shyness and embarrassment held him back.



Hospice arranged visits almost every day. A nurse came on Mondays and Fridays. The social worker—the “pretty one”—visited on Tuesdays. The chaplain came on Fridays. We were also lucky to have a live-in caregiver. We used the last of my father’s savings to make that possible. It was important to him to stay at home, and the extra help made it safer.

As time passed, the nurse from hospice began visiting five days a week. She was an angel on earth.

On my father’s final day, she arrived around 7 a.m., shortly after I did. She held his hand and told him a joke, just like she always did. Then she quietly stepped back.

We played Gregorian chant music, which he loved. Friends stopped by, and his caregiver sat beside him holding his hand.

When he died, the nurse helped us with the next steps, even calling the funeral home and staying until they arrived. The chaplain offered bereavement support.

I cannot say enough about hospice and the importance of getting involved early. By the time my father died, the hospice staff felt like family. They cared not just for him, but also for his family and his close friends who came by every morning for coffee or to help with laundry.

Hospice workers walk into homes knowing they will face grief, family struggles, and the reality of death. Yet they do it every day with compassion and grace.

Over and over, hospice providers wrap their angel wings around an entire home, making sure patients and loved ones are held with tenderness and dignity.

In many ways, the entire hospice team became our family’s angels. Every visit, every question answered, every gentle touch reminded us that even in the hardest moments, compassion can lift a family and make a house feel like a true home.

I wish to thank everyone, including the donors and volunteers, who support your programs for the help you gave us.



*\*This story has been shared with permission, with identities kept anonymous to respect the privacy of the hospice caregiver and patient involved.*

# What Is Hospice?

Hospice care, also called end-of-life care, terminal care, or comfort care, is a specialized, collaborative approach for patients in the late stages of an incurable illness who wish to focus on comfort and quality of life rather than further curative treatment.

This multidisciplinary, patient- and family-centered care supports physical, emotional, and spiritual comfort, helping patients and families navigate this stage with dignity.

By connecting with hospice early, patients can experience profound comfort through the relationships and services that surround them.

Opportunities through our hospice program might include:

## Physical Comfort

- Medical care and symptom management
- Medication, pain management, and medical equipment
- Personal care such as bathing, dressing, and grooming

## Emotional Connection

- Relationships with the care team
- Conversations with a medical social worker
- Legacy work with trained volunteers

## Spiritual Care

- Care aligned with your faith and beliefs
- Visits with a hospice chaplain
- Connection to faith leaders in the community

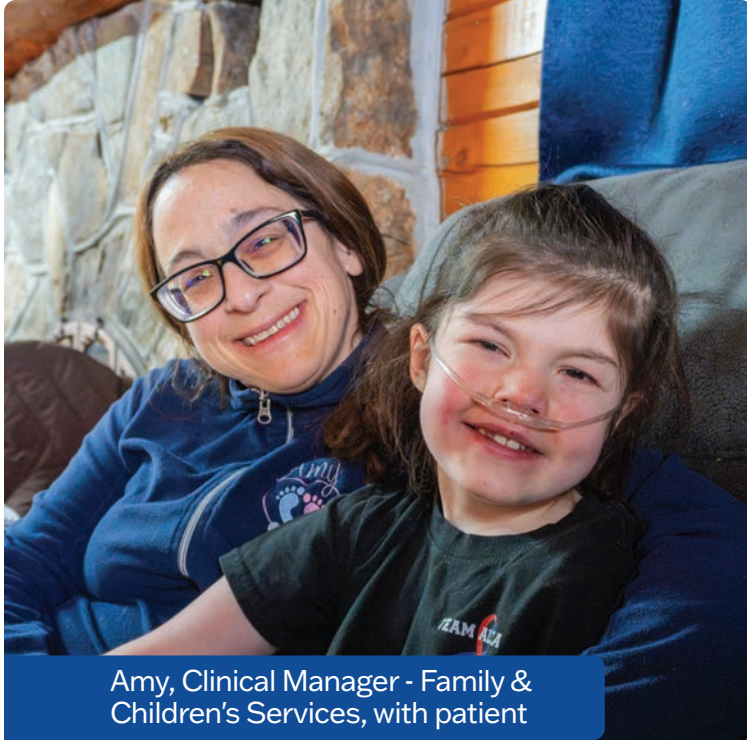
## Bereavement Support

- Discussions about death and dying
- Grief counseling
- Support groups

# Pediatric Programs:



## Did you know?



Amy, Clinical Manager - Family & Children's Services, with patient

When most people think of home health and hospice, they picture care for older adults. While it is true that the vast majority of our patients are older adults, did you know that 12% of our patients are children?

In 2025, nearly 500 children and their families benefited from our programs. We offer six pediatric programs across Vermont, supporting children at every stage—from before birth through early childhood development, and including care for complex medical needs and pediatric palliative care.

Pediatric programs are more reliant on grants and donations than some of our programs. In fact, despite how vitally important these programs are for the well-being of children in our community, they are often underfunded.

If you already support this work, thank you. You are making a real difference for children and families in our community. Who your support helps:

- A mom during pregnancy or postpartum
- A baby with a birth injury
- A child developing skills for independence with occupational therapy
- A child with serious illness receiving care
- And many more children and families who rely on these services every day

These programs change lives—but they don't always receive the funding they need. Donations directed to pediatric programs ensure children receive needed care.



### Strong Families Vermont

Professional support for women who are pregnant or up to six weeks postpartum. Includes ongoing support for their baby until their second birthday.

### Pediatric Hi-Tech

Specialized in-home care from registered nurses for children and youth with complex medical issues, such as children with tracheostomies, feeding tubes, ventilators and more. For all ages, from the tiniest premature infants through end-of-life care.

### Maternal Child Health

Primary and preventative services during pregnancy and to help newborns make the transition from hospital to home.

### Children's Integrated Services

Statewide prevention and early intervention services program for pregnant or postpartum parents, children, and families.

### Rehabilitation Program (Kids on the Move)

Trained physical, occupational, and speech therapy for children with genetic and developmental disorders, orthopedic injuries and diseases, and developmental delays. Services are provided in the home or school setting.

### Pediatric Palliative Care

Specialized medical care that supports children with serious illnesses by easing pain and symptoms, strengthening emotional and spiritual wellbeing, and surrounding the whole family with guidance and compassion at any stage of the journey.

# Much More Than a Thrift Shop: Every Purchase Has Purpose



Jennifer and Deb at the Thrift Shop

On a sunny spring morning in Manchester Center, Deb Henky lifts a brown cocktail dress from a stack of donations. Nearly new and name-brand, it's the kind of find regular customers have come to expect. She clips on a hanger, smooths the material, and places it on the rack—ready for its next chapter.

**Money for the Mission:** Every purchase made at the Thrift Shop directly supports our patients by helping fund essential services.

In 2025, Thrift Shop revenue totaled more than \$200,000—representing thousands of items given new life, and new purpose to benefit our programs.

**Familiar Faces:** The Shop is managed by Deb, whose knowledge of fashion and more than eight years of leadership have shaped its character and success. She says, “We want the store to feel like a high-end consignment shop with thrift store prices.”

Last fall, Deb was joined by a second employee, Jennifer. Together, with the support of more than a dozen dedicated volunteers, Deb and Jennifer have built a loyal following rooted in connection. While the team thoughtfully curates outstanding

inventory, they also cultivate something even more meaningful: relationships. Customers return not only for items they might find, but for the warm welcome, the familiar faces, and the sense of belonging. For many, a first visit quickly becomes a regular habit.

**Circle of Care:** Operating a thrift store—and doing it well—is a true labor of love. Each donated item is carefully evaluated. Most are sold to support our programs, while others are thoughtfully redirected to meet other community needs.

Lightly used children’s clothing and toys are packed into suitcases for youth in foster care. Unsellable blankets are passed along to a local animal shelter. And when someone walks through the door in need, the team responds—quietly assembling care packages and offering help in the moment it’s needed most.

**Making a Difference:** Our Thrift Shop is so much more than a place to buy gently used items—it is a place where community is strengthened every day. Friendships are formed. Families are supported. Children and neighbors in need are treated with dignity and compassion.

With every purchase, you help make it all possible. Proceeds from the Thrift Shop support home health and hospice care for family, friends, and neighbors across Vermont.

We are deeply grateful for your donations, purchases, and spreading the word. Because of you, this circle of care continues to grow.

Thank you for supporting the Thrift Shop! 





On a chilly day in March, Dan joined a small group of employees for an interview in the warm Marsha J. Hance Comfort and Care Center at VNAHSR headquarters in Rutland.

Dan says he was always interested in healthcare. In fact, he considered medical school. Instead, his path led him into engineering and leadership at GE. During a long tenure with GE, Dan led large teams in Massachusetts before transferring to Rutland to oversee a GE plant here in our community. Dan loves it here – this is his home.

Now retired, Dan devotes much of his good-natured energy to VNAHSR where he serves as President of the Board. As President, DiBattista helps guide an organization that employs nearly 250 people and provides almost 100,000 patient visits each year. In some ways, one could say, DiBattista’s original interest in healthcare never left him.

### **The Power of Hospice**

When Dan first joined the Board at VNAHSR, he focused on learning the finances and governance operations of VNAHSR. Then, when a person in his life became ill with terminal cancer, he had the chance to see the high-quality day-to-day compassionate care provided by the nurses and other direct-service caregivers.

Dan was often there when VNAHSR caregivers arrived. He says, “They were so amazing. They gave so much love – so much of themselves – knowing the outcome will be a person’s passing, how do they do that every day?”

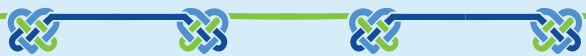
Dan spoke of many more things about hospice saying, “This is the good news channel.” Five or six years into his tenure on the board, he attended an appreciation event for hospice volunteers. He says, “There were like a hundred people there. All volunteers. No plus ones. The family here is so much bigger than anyone realizes.”

### **A Culture of Dedication**

One part of Dan’s role as President of the Board is mentoring new board members. For Dan, the culture of VNAHSR is an important aspect of the agency’s success.

Dan says, “I encourage every board member to attend the annual employee recognition event. That’s where you really see the culture of VNAHSR.” He pauses, interlaces his fingers and goes on, “What always strikes me is the tenure of the team –

## **Dan DiBattista: One of the Good Guys**



Ask anyone around VNAHSR about Dan DiBattista, and their response will be some variation of, “Dan’s a real good guy.”



35 years, 40 years. It's incredible! This is tough work, I ask myself why they stay here, and it's just apparent that there is a tremendous love for what they do. Our folks go into people's homes and things aren't always good there.

They often see living conditions and relationships that are really difficult. And yet, instead of losing people, we get the opposite reaction – our people dig in further, with empathy.”

In an environment of hard work, ever-changing in-home dynamics, and more, Dan says that culture is everything. “The closeness of people at VNAH SR is amazing. That’s why ‘People and Culture’ is one of the key focuses of our strategic plan.”

### **Leadership That Cares Deeply**

Speaking of the organization’s senior leadership team, Dan says, “The financial acumen, rigor, and precision it takes to run a complex service-based organization like this is remarkable. Then add in all the regulatory and compliance aspects along with the designated agency status in Vermont. The leadership here is outstanding.”

Dan also speaks with admiration about VNAH SR CEO Jessica Boutin. “She’s incredibly smart,” he says. “But more than that, she cares immensely. She loses sleep over this place.”

### **Giving to VNAH SR is a Good Investment**

Over his many years of service to VNAH SR, Dan says he has gained a deep appreciation for the role home health and hospice play in our region.

“I wish more people understood how important visiting nurses—and all of our programs—are to our communities,” he says. “Once people really see the work that happens here—how it helps people heal at home or allows someone to die at home surrounded by loved ones—they often develop a real passion for supporting VNAH SR.”

Dan has that passion and as a result, he generously contributes to VNAH SR in several meaningful ways. Dan gives his time, his expertise and his financial contributions.

When asked about his philanthropy and why he gives to VNAH SR, Dan says, “With all I know about the people and leadership of VNAH SR along with the regulatory and financial environment the agency is operating in, giving to VNAH SR just makes sense.”

More simply, he states, “It would be hard not to give knowing about the organization and what we do. I don’t know how I couldn’t. It’s a good investment.”

### **Looking Ahead**

Dan would tell a young person thinking of going into home health care, “Go for it. I’d tell anyone who is going to nursing school to think about home health. If that’s in your heart, you really ought to look at it. It will be infinitely more meaningful than any other work in nursing.”

Summarizing his experience with VNAH SR, Dan says that whether it’s end-of-life care or recovery from illness or injury, “The ability to give folks the choice to be home – it’s God’s work.”

Finally, when we talked about the hospice work VNAH SR does, Dan said it makes him think about his own end. When asked about how he would like to be remembered, he said, “I’d like people to say, ‘He was a good person.’”

**They already are, Dan.** 



# Our Donors

Within the next few pages, we recognize donors who gave in 2025 by the number of years they've supported our work. Whether a first gift or a 30th, this listing celebrates both new connections and enduring partnerships. Thank you to every donor whose loyalty makes this work possible.

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# Sign up for Golf Day Fore VNA 2026

Nothing can stop the fun—or the impact—when a community comes together.

From the first tee to the final putt, our annual Golf Day fore VNA tournament was filled with laughter, friendly competition, and plenty of memorable moments on the beautiful greens of Mount Anthony Country Club. Golfers, business partners, and volunteers made it a true “par-tee” with purpose—raising \$47,000 for our patients and families.

Behind the fun is something even more meaningful. These critical funds help sustain our home health, hospice, and community-based programs, ensuring compassionate care is available to all who need it, especially as we continue to provide nearly \$2 million in unreimbursed charitable care each year.



It’s more than a great day on the course—it’s a powerful way our community comes together to make a difference.

**Scan the QR Code to sign up today!!**



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