

Why I Am Including Old Colony Hospice in My Will

by: Laura Kittery

©Old Colony Hospice & Palliative Care, Inc.

In September, 2002, Marsha Waszily, 55, of Cleveland, Ohio was doing the best she could in her new life. After thirty years of marriage, she and her husband had finally completed a long and bitter divorce. They had owned a professional job placement agency specializing in finding positions for engineers. They placed the right people in high-level positions on a national level. With the success of that business, Marsha had opened a separate division for placing office staff in temporary and permanent positions in and around Cleveland. They were very successful and enjoyed the high life in Cleveland society.

At some point, things went wrong in the marriage but Marsha was not aware of the full extent of it. As Marsha focused on her budding temp agency, her husband devised a plan to end the marriage and executed it over a period of a few years, surprising Marsha in the end by leaving her with a gutted shell corporation with only debts, no assets. And to make matters worse, just before he announced the impending split to Marsha and moved out, he took out a \$150,000 mortgage loan against their home, her dream house, which they had resided in for many years and in which they had raised their son, their only child. Foreclosure proceedings soon began but with help from their CPA, Marsha managed to stay in the home for two more years - long enough to revamp her life.

All of the contents of their home, after being carefully and methodically inventoried by Marsha, went into storage in a friend's warehouse. She moved into a studio apartment and diligently went to work at Corky & Lenny's, a very popular local deli restaurant where she worked as a waitress for tips. Having had the benefits of the best health insurance available for so many years, Marsha opted out of the insurance offered by Corky & Lenny's, planning to seek out a better plan of her own as soon as she could afford it.

That day never came. One day in late September 2002, Marsha suddenly experienced vertigo-like symptoms: debilitating dizziness and nausea. With no health insurance she was issued a prescription for antibiotics at the local emergency room and sent home. Two days later she was admitted to the hospital and received the diagnosis: lung cancer metastasized to the brain. Ultimately it was learned that she had one tumor in each lung and three inoperable tumors in her brain. As Marsha often said after that fateful day: "I went from roller blading around the block one day to being totally disabled the next day, with no warning whatsoever." Her only real vice—smoking-- had been her undoing.

Marsha had no one who could care for her. Her only sibling was a brother living on the west coast and they were not close at all. Marsha's father had died of stomach cancer when she was eight years old. Marsha's mother was at that moment being placed in a nursing home due to advancing Alzheimer's disease, and her step-father, who loved her dearly, was himself in his early 80's and was barely able to care for himself. Her son, now an adult, to Marsha's continual heartbreak had become addicted to drugs and was immersed in a seemingly endless cycle of using and then trying to

get clean in various programs and half-way houses around the city, so he also could not help her in her time of greatest need.

My husband, Brian, and I knew Marsha from meeting her several years before while vacationing in Hawaii, on the island of Maui. We had gone back to Maui annually since and had developed a community of friends there who we looked forward to seeing each year, including Marsha. Somehow through this network of vacation friends we caught news of Marsha being in the hospital and began to reach out to her with get well wishes. Once when we called the hospital, we were put through to the nurses' station and while speaking with one of the shift nurses, the words "brain tumor" slipped out . . .

Brian and I decided that we wanted Marsha to come to our home here in the Boston area and help her during this time of ill health. We were already geared to taking care of vulnerable and disabled people because of my parents. They both started having severe health issues in 1998, just after they each achieved their 80th birthdays. In my mother's case, it was Alzheimer's disease and after several years of home care we had finally made the gut-wrenching decision to place her in a nursing home - this ultimately culminated in her becoming a resident at the Blue Hills Alzheimer's Care Center here in Stoughton. This turned out to be the best decision we could have made for her and for us as her family of care-givers - but that's another story for another day. My father had moved from our home town of Wakefield to Stoughton to be near Mom and also for me to be able to assist him with his various maladies, though he was able to continue to live in his own home. The point is, when Mom had to go into the nursing home, I left my full-time position as a paralegal at a Boston law firm so that I could visit her and care for her daily, along with my father, and therefore I was home full time, set up and geared to assisting more than one ill person, and "plugged in" to the local medical services world, with Brian in full support of it all. We presented this scenario to our friend, Marsha, along with the sweetener of being within close proximity to the premier and world-class cancer treatment facilities in Boston. Our message was this: "Please come to live in our home and let us help you seek out the best treatments to give you an optimal shot at getting well. We don't want you to have to worry about paying rent or utilities, or food shopping and getting meals, or car repairs, or getting to doctors' appointments, or anything like that. We want you to let us take care of all of that and for you to focus on your health care and getting well, period." Thankfully, Marsha agreed and gave up her cute studio apartment, her beloved dog, and her job at the deli - doctors at the world-renowned Cleveland Clinic had given her decadron - "prednisone times ten" is how it was explained to us - this had shrunk the brain tumor that had caused her disability and enabled her to function almost normally - its effectiveness was a God-send but we were told that it could stop working at any time, without any warning - Brian drove out to Cleveland to help Marsha with closing up the life she knew, and brought her back to Stoughton to live in our home with us.

At first and for several weeks thereafter, Marsha was almost fully functional, even insisting that she be in charge of cleaning up the kitchen after meals - she wanted to contribute to the household. We enjoyed Halloween, her favorite holiday. Marsha dressed up as the Statue of Liberty to join us in our tradition of greeting trick-or-treaters at our door dressed up in costumes ourselves. In early November, she and Brian threw a little surprise birthday party for me. Immediately after that, word came from the nursing home that my mother was "failing to thrive" and that she probably had less

than a week to live - unlike in the past, even I could not get Mom to eat or take her medicines. She passed away on November 17th and Marsha, imagine, attended her wake and funeral! She was all class.

We enjoyed a beautiful, though heavy-hearted Thanksgiving, together with my father at our home. In December we took Marsha out Christmas shopping at T.J. Maxx - she loved that store! I have kept one or two items that she bought on those trips - with the price tags still on them, just as she had left them - I had learned that leaving the price tag on a new purchase was a sign that Marsha really liked an item - a cute quirk of hers that those price tags commemorate to this day.

She and I conspired together to have a masseuse come to the house to give Brian a massage for his birthday on December 22nd - and then for a limousine to pick a group of us up for a Christmas-light ride that night - but she wasn't feeling well at all and barely made a 2-mile loop in the limo before begging off for her bed. She never went out again after that, and she passed away on the morning of January 26, 2003 in the room in our home that she said had become her home - to this day, we refer to our spare bedroom as "Marsha's room".

In the interim three months that she was here, the doctors at Dana-Farber Cancer Institute offered what grains of hope they could: gamma-knife treatments to reduce the brain tumors, along with radiation and chemotherapy - to prolong her life perhaps two to three months. She declined the treatments, having seen her father suffer terribly only to die at a later date, but with his hair lost and terrible bouts of nausea and illness along the way. She explained to us her reasons - we were "newbies" to this arena - and initially thought: "They are offering treatment! Please accept it!" But after hearing her out, we respected her carefully thought-out decision and though we only ever spoke of her getting well and perhaps then having to decide whether to return to her beloved Cleveland or stay here near us, who loved her so, we poured our energy and resources into helping her with all of her remaining endeavors. It was important to her that the Medicaid insurance applications that she had started in both Ohio and Massachusetts were followed through on, and she turned that over to me to handle. It was Marsha's hope that the health care professionals who had cared for her despite her lack of health insurance be compensated in any way she was able to provide, even it was at a reduced fee rate through Medicaid, and even if this was accomplished by me for her posthumously. Marsha also had sought to have her security deposit returned on her studio apartment lease - this amounted to about \$350 and she had been assured by the rental agent that her health-related reason for breaking the lease would be sufficient to allow for it - she turned this over to me as well and I tried to get this done for her but the owner of the apartment complex had not even returned Marsha's calls, and returned my written correspondence unopened as well. It was very difficult and hurtful to us all to try to understand how anyone could be so cold toward someone facing their own sure and imminent demise. The many kindnesses we received from Old Colony Hospice caregivers provided some measure of antidote to this emotional pain.

Meanwhile, somehow we had become aware of Old Colony Hospice and they had come in to assist us all. Not being aware of all that they do to help, early in October, just after Marsha came to us and in anticipation of her eventual needs, I rented a U-Haul truck and drove up to Malden one very rainy day to the Masons medical equipment center. They accept donations of canes, walkers, commodes,

wheel chairs, adjustable hospital-style beds - the list goes on - and they issue them for free to anyone in need of them. I knew of their service from when Brian's father had been ill and debilitated - as I said we had lived in Wakefield growing up - and as his needs progressed, various medical appliances were borrowed and returned, borrowed and returned, from the Masons program administered from the back of a Malden warehouse. As I drove home with that U-Haul cube truck full of every level of appliance I thought Marsha might need in the coming months, it was pouring to the point of deluge, and a car passing me in the high-speed lane suddenly hydro-planed and turned its nose clock-wise, striking the door of the U-Haul. Fortunately, both vehicles were able to get to the side of the road and neither myself nor the young lady driving the other car were injured. We stored the equipment in our friend's warehouse, not telling Marsha anything, just making her comfortable in our guest room like any other guest. When we started to need equipment for Marsha's various health needs, Old Colony Hospice provided everything needed, as needed - free of charge and it was all brought in and set up for us. The trip to Malden and the equipment from the Masons was never needed. Old Colony Hospice also did not care that Marsha had no insurance.

Not only did Old Colony Hospice provide for the physical needs of our dear Marsha, but they also provided all of her medicines, delivered to our door, at any time of day or night. And health care professionals of all disciplines: CNA's and nurses - angels all. And a social worker specifically to help Brian and me with our emotional needs as well. And a chaplain if requested. Even a volunteer to come and visit with Marsha - just visit with her as a person, as a friend - perhaps to read to her, or watch a favorite program on television with her - whatever she might like to do. This was especially crucial for someone like Marsha, who had come here from another place, with no other friends or acquaintances here but us.

And when her time was near, a nurse came at 10:00 at night to hold our hands and assist us in this final, and frightening stage of caring for our friend - and to provide as much comfort care to Marsha as she could, helping us adjust her pain medicine and recognizing that her fidgeting was due to a full bladder and giving her the blessing of a catheter . . .

And when all was done, they helped us with our grief. One little detail that was especially thoughtful and compassionate was the question of whether we wanted Marsha's bed to stay for a while or did we prefer to have it removed right away? You don't know how you will feel about the answer to this question until you get there . . . they know this.

About a month after Marsha died, we held a memorial service in our home for her before taking her ashes to Maui for release into the ocean at Kipahulu, per her request - about 25 people came, no surprise that most of them were the various people who had helped us from Old Colony Hospice - they came and they shared memories, and grief, and sadness, and happiness, and all that goes with knowing and loving and caring for someone - and they helped us again in this way.

For months and up to a year after, we heard from the grief counselor, checking in on us. And we know they are there for us still if we need them, with the resources of grief counselors and groups, or with the opportunity for catharsis offered by their volunteer program - the chance to "pay it forward" and receive something back for yourself in the process.

And so we have been there for them in return. We try to take advantage of almost every opportunity they provide to let them know how much their support meant to Marsha and to ourselves. But even in those offerings, we find that they are still giving to us. Yes, we make a donation in Marsha's memory to the "Circle of Remembrance" - but I finally attended the Circle this year, and I walked away with so much more than my dollars could give - the ceremony was beautiful and respectful, insightful and informative, heart-wrenching and remedial . . .

We have attended fund raisers for OCH and yes, we have had a lot of fun at them, perhaps a good meal too - but we also received the soul food of being with others who have experienced the pain of terrible loss, and the relief and gratitude of finding the help they and their families needed during their times of need from Old Colony Hospice.

We give to Old Colony Hospice but we can never repay what we have received and what we continue to receive from this invaluable service organization. The Jewish people have a tradition after a loved one dies of wearing a black ribbon on their lapel and tearing the fabric of the ribbon each day, a bit more each day, because the fabric of their lives has been torn from the loss of their loved one. I feel that Old Colony Hospice, its people and the services they provide, help to mend the fabric of our lives, indeed of our society as a whole, through their many acts of care, compassion, and kindness - for it is said that a society is judged by how it cares for and treats its most vulnerable citizens - the premise of Old Colony Hospice is that you and I matter, each and every day of our lives, even at our most vulnerable time, when we are ill and unable to care for ourselves - they give all of us the greatest gift any of us could ever hope for - respect, dignity and palliative care in our final moments. Including Old Colony Hospice in my will with a bequest will be my final "Thank You" to OCH - to its professionals and volunteers - for all that they gave to me in my life, and to my loved ones as well, and to the greater good of us all.