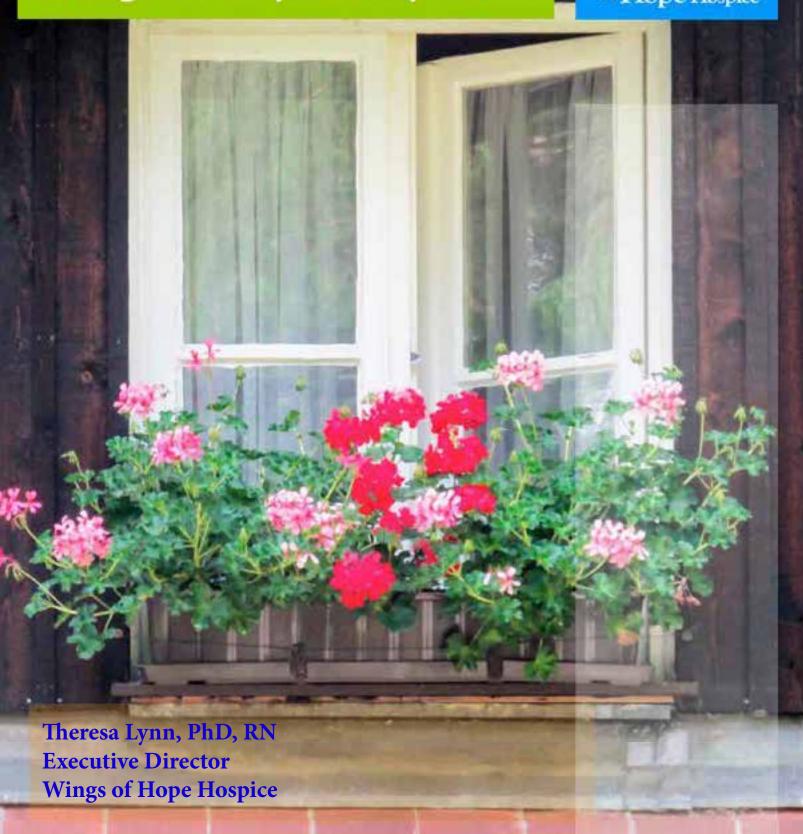
Windows Through Wings of Hope Hospice







The support we offer to people and families in Allegan County, Van Buren County and surrounding communities is centered on respectful and compassionate care. We do not charge patients or their families for our services. If you or a family member is facing an illness or condition that cannot be cured, we want to help you enjoy each moment on your own terms. Yet, we understand that you may not be familiar with the hospice experience. We hope you enjoy these personal stories shared by our staff, with a peaceful view through the windows of some of our friends.

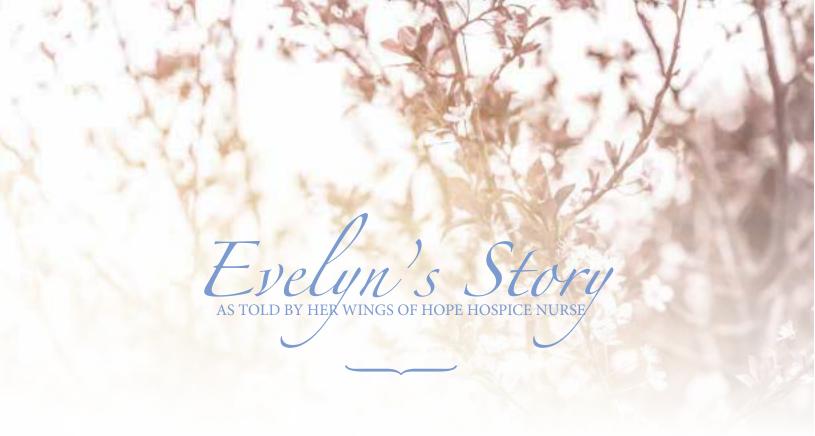
Evelyn's Story Nellie's Story Clarence's Story Jack's Story Betty's Story







Evelyn's Story
AS TOLD BY HER WINGS OF HOPE HOSPICE NURSE



Evelyn was dying from COPD or chronic obstructive pulmonary disease. It's an especially cruel illness, providing a roller coaster of good days and bad. A good day was one when breathing was comfortable. A bad day was when Evelyn couldn't catch her breath.

It was overwhelming for the family members witnessing an episode of difficulty of breathing. The person they love couldn't catch her breath. Without the treatments that Wings of Hope could provide, there was extremely little one can do except watch and feel completely helpless.

On the good days, it was almost easy to forget that Evelyn was so sick. If she didn't exert herself too strenuously, she could prop herself up on her couch and watch TV, talk with her children, pet her dog. We just didn't know from one day to the next.

I helped the family give her the right medications when those episodes came. It took a while, but she was resting easy by the time I left. Before Evelyn be-

came a Wings of Hope patient, her family would call 911 every time she had a bad breathing episode. Every time she would be put into the ambulance and rushed to the hospital.

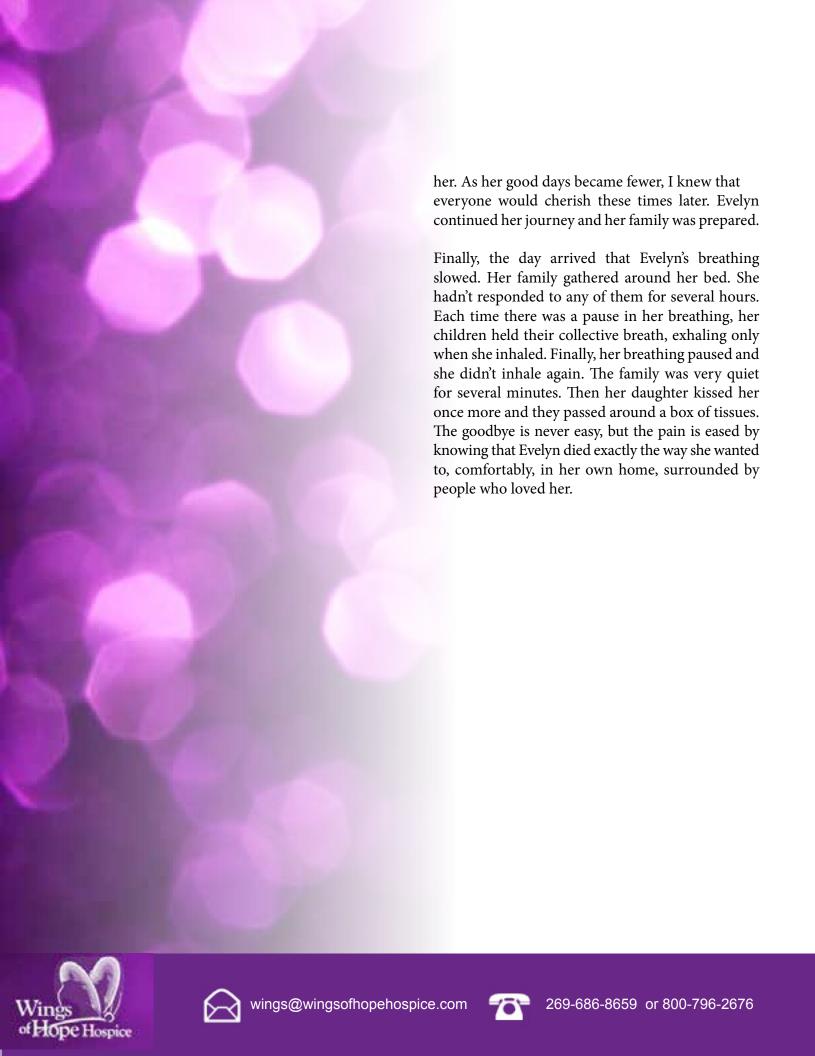
The heroic measures exhausted her, and and after a time she decided she didn't want to do it that way anymore. When she learned that Wings could help her family care for her in her home and that even an episode where she couldn't catch her breath could be treated at home, she asked for our help.

We were able to end the exhaustion and disruption of the ambulances and hospital rooms, back and forth, away from home, with everyone rushing around. We came to Evelyn's home every time a breathing emergency occurred, and every time Evelyn recovered to the point where she had good days again. This time became gold for Evelyn as she relaxed in her home and spent time with what and who were meaningful to

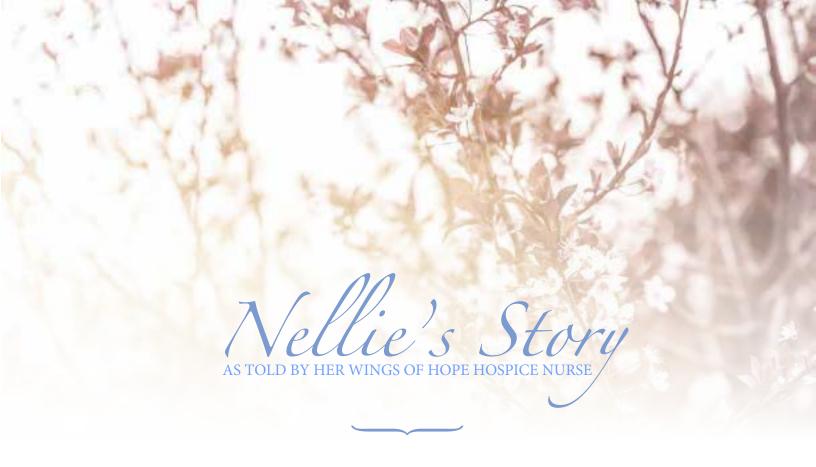








Nelle's Story
AS TOLD BY HER WINGS OF HOPE HOSPICE NURSE



The first time I met Nellie, we both laughed at my inability to understand her English through her thick Dutch brogue. She was a small woman, petite and tidy in a comfortable way. Her body was more than eighty years old. She walked bent forward a little as though she had been of service her entire life.

The house smelled like cookies because she had a visitor coming. I told Nellie she didn't have to treat me like company. I was her hospice nurse, and I would be checking on her once a week or more often if she needed it. After the first few minutes, I asked Nellie how she was feeling. "Good," she said. I asked if she was having any pain. "No," she replied. I told her I noticed that every once in a while she would wince and put her hand on her stomach. Finally this stoic woman admitted to experiencing quite a bit of pain. She scored it an eight on a ten-point scale, with ten being the worst pain imaginable.

Not surprisingly, Nellie didn't want to take medication. She didn't want to become addicted to anything; nor did she want to be drowsy. Her family was important to her and she did not want to miss anything with them. I explained she didn't have to do anything she didn't want to because she was in charge. I asked her if she would consider trying pain medication because she might be able to find a balance of drowsiness versus pain where they would be simultaneously tolerable to her. She agreed to try a low dose of medication. Then she chuckled and said, "I suppose it doesn't matter if I become addicted now."

Independent as she was, she declined visits from a certified nursing assistant to help her with personal care. She did have some legal questions though, and I knew it was a perfect opportunity for our social worker to build a rapport with her. Nellie's minister visited her frequently so she didn't feel a need for our chaplain to come.







After three cookies, two cups of coffee, one physical assessment and a lot of laughter, it was time for me to go. Nellie promised she would call our office if she had any questions or if she was not comfortable.

Over the next three months, I met all four of Nellie's daughters. They were just as warm as their mother, and I knew there was a lot of love in this family.

Slowly, Nellie grew weaker. It took her longer and longer to walk from the kitchen to the living room. She agreed to use a walker to give her something to rest on. She started to eat less. Her daughters were very concerned, but I explained that a decreased appetite was a sign her body needed less food now. Already an expert on her own pain, Nellie had become quite knowledgeable about how to use the medication. She knew that if she took it regularly, her body would feel more consistently comfortable, that she would not be on roller-coaster peaks of pain and valleys of drowsiness.

Now Nellie was sleeping more, almost all day and all night. The medical equipment company had managed to fit the hospital bed in her bedroom. Her bedside commode was there too so that her daughters could easily help her relieve herself. Eventually she couldn't get out of bed at all. Her daughters asked about a catheter, and Nellie agreed to it.

When Nellie stopped eating, her daughters knew her time was getting shorter. They gave her sips of water. They bathed her in bed and sang to her. Nellie seemed to always have a little smile on her face, even when she was sleeping. I remember thinking she looked beautiful in pink. Peaceful.

Perhaps her peace came from whatever she was seeing in an upper corner of the bedroom. Sometimes she would speak in Dutch to the corner. Her family was convinced her husband, their father, had come to her.







I was driving from another patient's house when I got the message from my office that Nellie was actively dying and the daughters wanted me to be there if I could. When I arrived I found them surrounding the bed, singing to her and praying. Nellie's breathing was slow and uneven. Nellie's daughters kept her mouth comfortably moist with mint flavored swabs.

One of the daughters motioned to me to come and sit next to Nellie. I looked at her worn face and just knew her eyes were still twinkling under her closed lids. Her cologne – straight from Holland – was on the bedside stand. She had sniffed it whenever she felt nauseous. I loved that cologne.

The time between breaths became longer and longer. Her daughters surrounded her once more. Each had a hand on her. Each said "goodbye," "I love you" and "it's okay to go." One more breath. Minutes passed before we all looked at each other and knew Nellie had died. Everyone hugged each other and cried and even laughed a little. The daughters said they knew their mother was in a better place, that now she was with their father. They'd been apart for so long, and now she finally got to be with him.

I called the funeral home and while we were waiting, one of the daughters gave me Nellie's cologne. She insisted, saying it didn't cost much and Nellie had wanted me to have it.

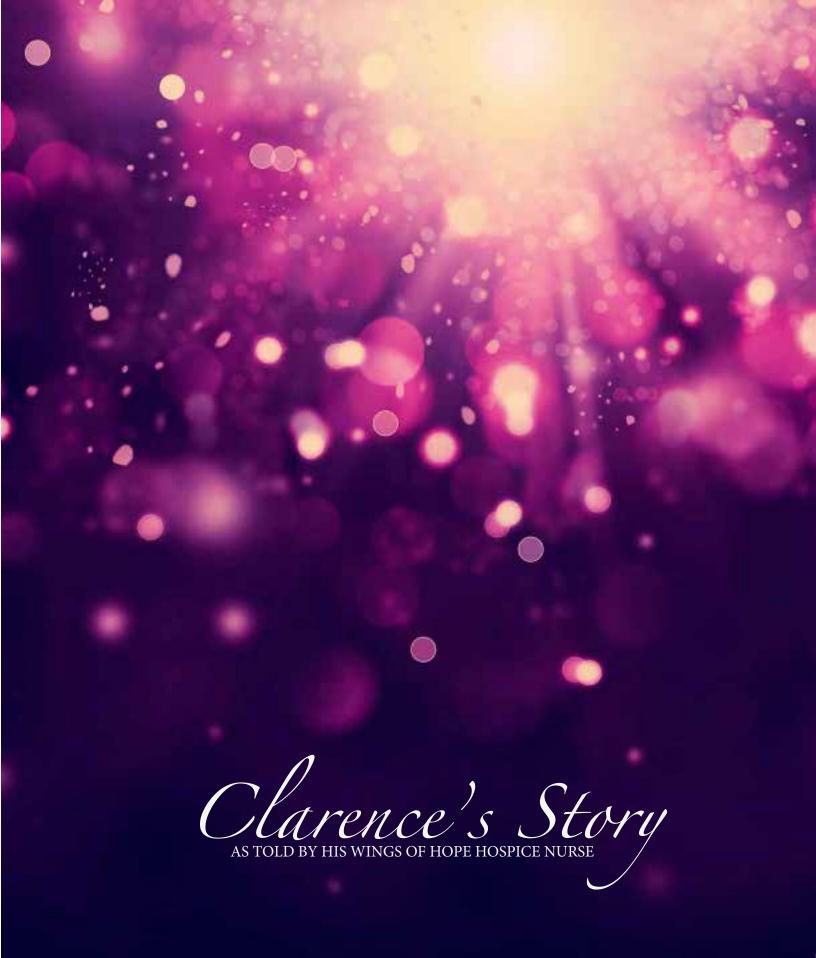
After the funeral home left, I said my good-byes, awed by what I had just witnessed. I had attended other deaths, some peaceful, some emotional, some that happened quickly and others that took longer than expected. But this death was beautiful. It had happened in a crowed bedroom in a tiny house in the middle of farm country with a humble, hard-working woman. And it was beautiful. What an incredible honor to make my living this way. I felt blessed.

* This story won Honorable Mention in a writing contest sponsored by the National Hospice & Palliative Care Organization.











Clarence was 77 years old and one very sick farmer. Having been a hard-working dawn-todusk corn farmer his whole life, depending on others was not something that came easily. He'd gone to the emergency room at the hospital because he was having trouble breathing. It had been bothering him for a while but when it became overwhelming, he knew he couldn't ignore it any longer. Tests revealed the worst possible news - Clarence had a very fast-growing kind of lung cancer. He was numb. His family was devastated. His life expectancy was suddenly so short he could barely comprehend it. He was admitted to the hospital because he couldn't take care of himself at home. Every day he felt worse. His world grew smaller and smaller.

Clarence thought about friends he wouldn't see again...places he'd never go again... He thought about his wife who had died 6 years previously. By the time Wings of Hope Hospice arrived,

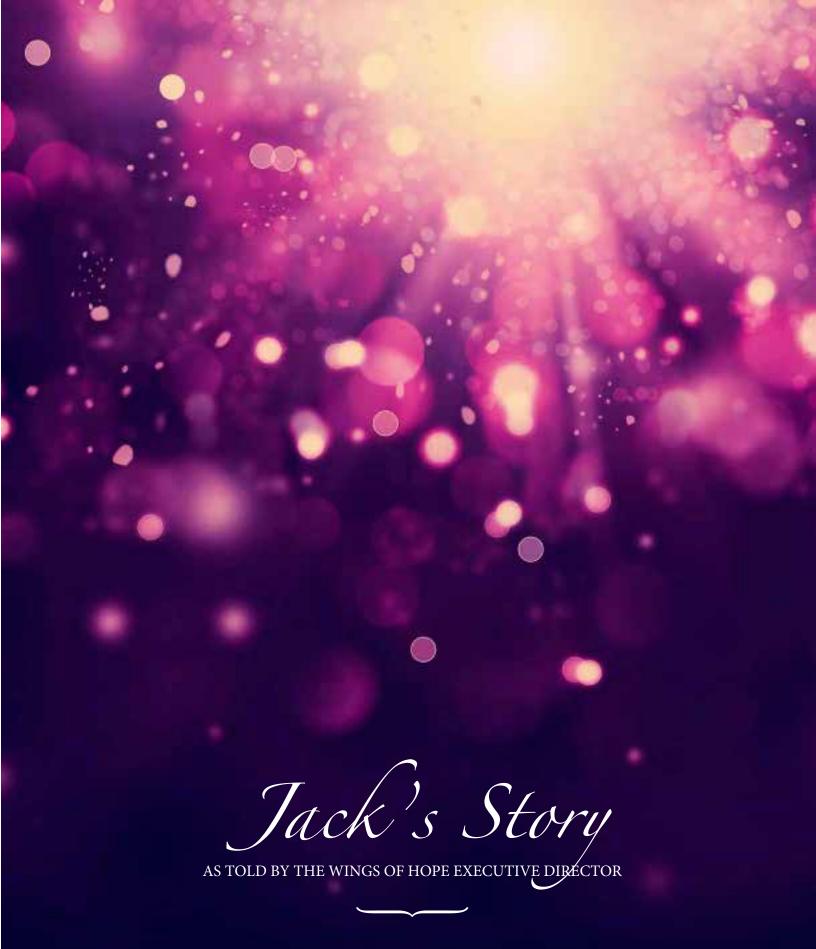
he had one wish: to see his corn fields one more time. We talked to his family, hospital discharge planners, and even neighbors to see what would be possible, if they could get him home and keep him safe and comfortable. We were able to take care care of all the paperwork, put together a schedule for the family caregivers, and arrange for an ambulance ride. The nurse put in a 16-hour day that day, but Clarence got home. And we made sure he got to see his corn. He died the next day.

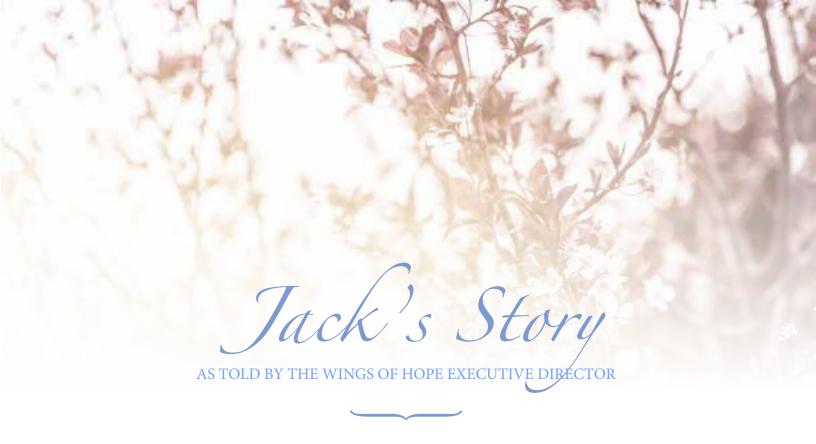
Some journeys with Wings of Hope are long, some are short, like Clarence's time with us. But each experience is important, memorable and valued. Being able to focus on whatever it is that the person most deeply wants and needs – and give it to them in whatever way we can - is what makes our invitation to families so heartfelt. We are here to encourage, support and make the most of each person's time.











I hear my name called out from the front of the house as I enter through the side door. And then, "I've been waiting for you!"

Seventy-eight year old Jack is a natural storyteller and he's had a life full of colorful experiences. Lying in a hospital bed in the corner of the living room, Jack launches into his first story.

He was born and reared in Allegan on an 80-acre farm. He attended the school that is now part of the historical section of the Allegan County Fairgrounds. After one and a half years in high school he quit and joined the U.S. Navy at age 17. The year was 1948.

His first job in the navy was swabbing decks. Then he was a barber, and after that he was a ship service man.

Jack has traveled to many places. Among them are France, England, Germany, Spain, Italy, Cuba and the South Pole. He describes the oddity of watching penguins in the perpetual daylight of the South Pole, "They just line up. You could watch them all day because you don't know what time it is. When we got up, there was sunshine. When we went to bed, there was sunshine. We had to wear special sunglasses."

As a barber in the South Pole, Jack cut Admiral Byrd's hair. "He was very fussy. Just scissors and a comb. No clipper. He didn't like to be called "Admiral." He wanted to be known as an "expedition leader".

When asked if he'd like to revisit any of the places he's been, Jack replies, "I'd go back to Germany. It's a beautiful country and the people are nice. They treated me good there. The only thing I didn't like was that they loved eels. They smoked them and ate them."

Jack mentions his ex-wife taking care of him now that he has severe chronic obstructive pulmonary disease – COPD - and how much he







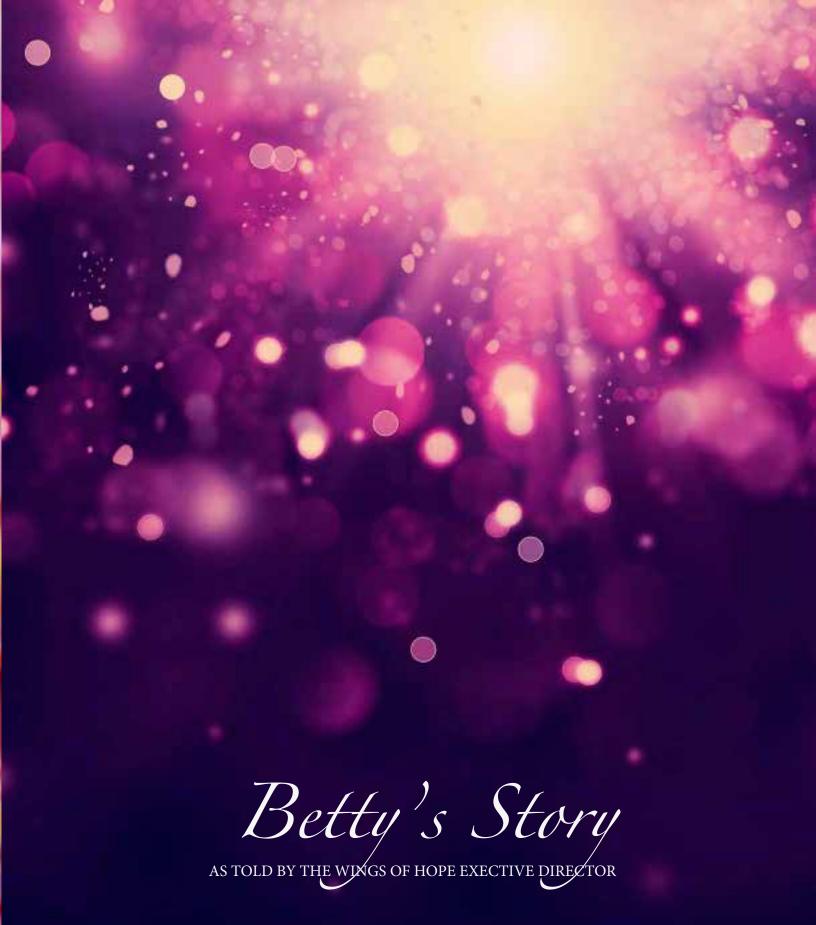
appreciates it. I suddenly realize a woman has been sitting very quietly in a darkened corner of the living room. She softly says her name is Betty. Taking care of Jack makes her tired, she says, but she's going to keep doing it.

I say goodbye to Jack, and he kisses my hand and tells me he loves me. Checking in on Jack, being part of a little slice of his life is rewarding. Being able to meet and gain the trust of another human being during a transition of life is what it's all about.











Betty's blue eyes are first thing I notice when I meet her. They draw me in. She smiles and says hello and I like her instantly.

Betty is immediately direct. "I don't want to die around Christmas. Two or three weeks afterward - that's OK. I'm not afraid of dying. It's in the Lord's hands. I just don't want my kids and grandkids to connect Christmas with Nan's death."

She is very close to her grandchildren. She points at pictures on the wall in the hallway and shares names and birthdays. I ask her what she thinks about, and she says, "my grandchildren....and him." She nods toward the living room where her husband Dan is watching television. "He's the love of my life."

Betty and Dan have been married 43 years. They were high school sweethearts in Michigan City, Indiana. They have four children and 14 grand-children who call them "Nan" and "Poppy."

Her eyes closed, Betty dozes while I write. I look at her soft face and her pink sweater and ask her what words of wisdom of wisdom she might share.

"None," she replies with a quick shake of her head. "I don't give advice because usually I'm wrong. I'm a firm believer that if you don't know what you're talking about, don't talk."

I ask Betty about her illness. She'd had six bouts of pneumonia and the cancer was found with the last one. She had chemotherapy and radiation. Neither worked. Part of one lung needed to be removed with surgery. Hospice came after that.

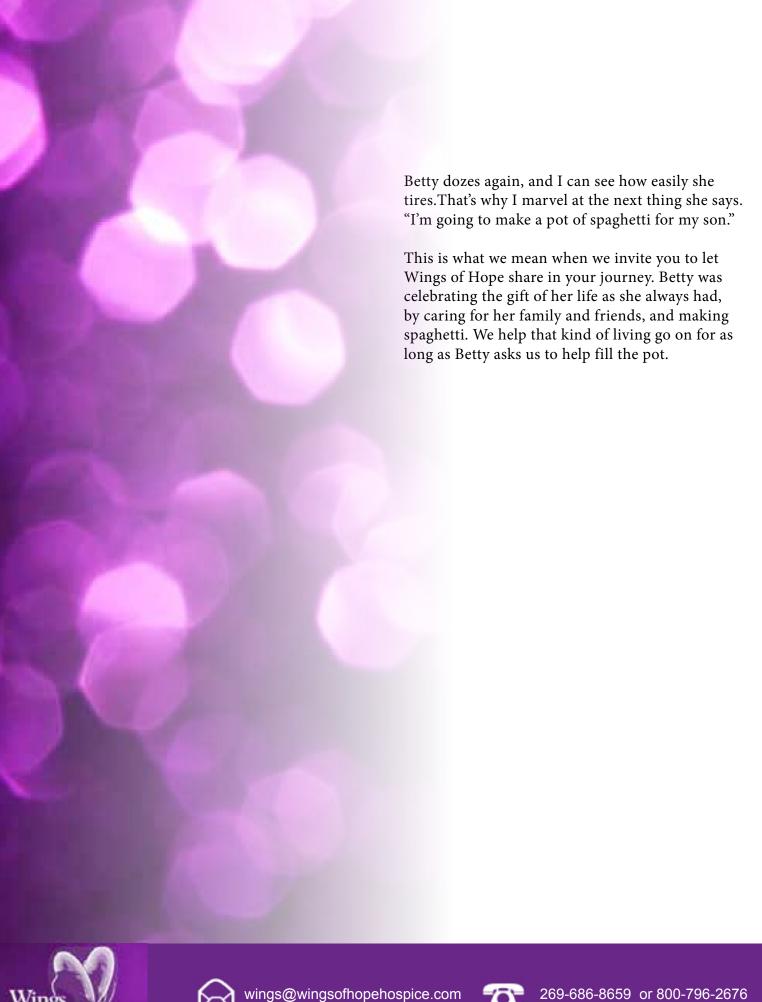
"I always thought hospice was a death sentence," she muses. "But I really needed the help. I think if you just talked to people you could help them understand it's not a death sentence."

"I take 32 pills a day," she says. "I really have to work myself up to take them. It takes a lot of energy."



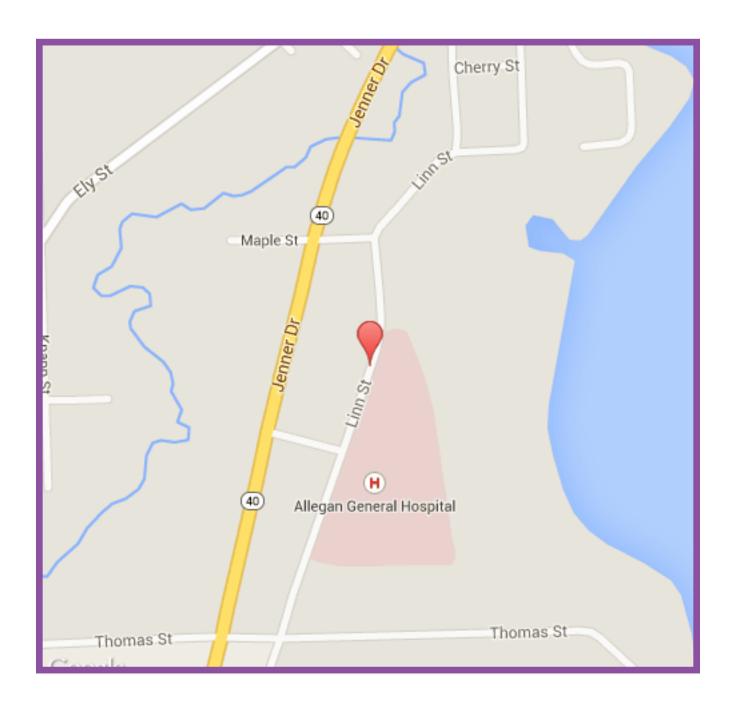












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