Touching Lives

Hospice care touches the lives of patients, families and our professional hospice team members in a most intimate and profound way. In the course of daily caring for our hospice patients, our physicians, nurses, home health aides, social workers, chaplains and volunteers hear inspiring stories of how their patients touched the lives of numerous people.

Those moving, inspiring and often heroic stories are relayed through family members and friends, and occasionally they are shared directly by a patient reflecting on his or her life.

Inez Brumley, of Collinsville, was 79 when she died of cancer while being cared for in her home. Hospice of Green Country was there for Inez and her family, providing compassionate end-of-life care and meeting her medical, emotional and spiritual needs.

During Inez’s 15 months of hospice care, her team of caregivers became keenly aware of their patient’s remarkable life and legacy. As the oldest of 10 children, a wife of nearly 50 years, mother of three, ordained minister, businesswoman, doll-maker, grandmother of six and great-grandmother of 11, Inez touched the lives of many people.

Inez began attending school at the age of 6 in an Oklahoma community called Evening Shade, now known as Vian. Her family later moved to a farming area, Mudlake Bottom, which today is underwater and in the middle of Lake Tenkiller. Her early memories included riding the family horse to Buckhorn School. She graduated from Vian High School in 1946, married Paul Brumley, and moved to St. Louis, Missouri, where the couple began their family.

The Daycare . . .

During the 20 years in which she cared for children in her home daycare, Inez influenced hundreds of young lives. She quickly gained a reputation for her patience and kindness with children, which led to a steady growth of her successful daycare business. At one time, she cared for as many as 25 children a day in her home.

“Back in the early ’60s there weren’t a lot of women who worked outside the home,” her daughter, Donna Drake, explained. “Mother simply began caring for the child of a friend of hers and the word spread.”

In later years, her patience and gift for teaching also extended to adults. Inez graciously shared her talent for making porcelain dolls with women who, like Inez, took great delight in creating beautiful antique replica porcelain dolls. For 20 years, Inez welcomed women into her home, several days each week, and taught them the art of doll-making.

Hospice of Green Country volunteer, Donna Rice, was among the women who faithfully showed up at Inez’s home every Thursday morning. Rice handcrafted 44 different porcelain dolls during the five years that she studied with Inez.

“It takes a lot of patience to make porcelain dolls,” Rice said.

Over the years, Rice became a close friend of Inez, along with other women who regularly gathered around her kitchen table to work on dolls. Countless conversations and life lessons were shared among the doll-makers, as Inez believed God had given her a gift to touch other women’s lives through this enjoyable hobby.

“We might start around 10 a.m., take a break for lunch, and then work a few more hours on the dolls again,” Rice recalled.

“Having lunch together was the highlight of the class for Inez. She loved to cook and socialize, and she especially loved to have company in her home.”

Rice, a Hospice of Green Country volunteer for 12 years, later became the hospice volunteer assigned to help Inez and her family. Dedicated hospice nurses, home health aides and chaplains also comprised the caregiver team.

Touching Lives continued on page 2.
Hospice volunteers touch the lives of others in so many different ways. They may provide transportation for patients who have no other way to get to doctor appointments, or take them to get a haircut. They may sit with patients so caregivers can run personal errands. Sometimes hospice volunteers simply visit with patients and listen while they share thoughts and feelings about what is happening to them in their disease progression.

At other times, our volunteers write letters for patients, who are no longer able to perform that task on their own. Some volunteers make patients feel better about their surroundings by helping them with light housecleaning. Often, the friendly faces of our hospice volunteers bring hope to our patients, helping them feel better about each day.

One volunteer and her therapy dog brighten the day of patients who no longer have pets of their own. Another patient is thrilled that volunteers bring her husband to regularly visit her in the nursing home. Other volunteers deliver medication or food to patients, who no longer can get out to shop for groceries or pick up their prescriptions. Sometimes hospice volunteers simply hold the hand of a dying person, letting them know they are not alone.

Some patients request their life history be recorded. Specially trained volunteers use a video camera and micro- phone to informally interview patients about life memories that might otherwise be forgotten or not passed along to future generations. Family members and friends have been touched by the effect that a life history gift has on them, while patients benefit because it helps bring closure to their lives.

Some hospice volunteers receive additional training in the grief process and are available to people who would like to talk with someone after the death of their loved one. These companioning volunteers might go to lunch with someone who is grieving, take him/her for an outing, or help in making a memory book. Sometimes they may sit and listen to a grieving person’s memories of their loved one.

Other volunteers work quietly behind the scenes in the Hospice of Green Country office, answering telephones, filing, making copies and helping with mailings.

This past December 4, 36 volunteers came to our office, in conjunction with our annual holiday event, to prepare holiday baskets for our patients. The holiday baskets were filled with special gifts and foods, which volunteers and staff members personally delivered to our patients and their families. Members from B’nai Emunah Synagogue also prepared and delivered 10 delicious holiday dinners for our patients. Those examples are only a few of the ways our volunteers reach out to others, touch lives and let hospice patients know we truly care.

Whatever the task, our dedicated hospice volunteers always rise to the occasion, touching many hearts along the way. In 2004, between 80 to 100 active Hospice of Green Country volunteers contributed 7,138 hours of service, which included: making 2,843 contacts with patients, driving 65,201 miles and fulfilling more than 2,002 requests from our patients and staff. We continue to celebrate our wonderful volunteers in their daily and selfless service to others.

Benelle Reeble, Ph.D., CVA is director of volunteer and bereavement services.

The Dolls... “It was 1984, when Dad retired, and Mom decided she wanted to do something that would allow her to be at home with him,” explained Inez’s daughter Donna. “She always loved dolls, lace and material — she loved to sew. After prayer and much thought about what she would do with her time, Inez met a woman named Betty Thomson who lived in Owasso and made porcelain dolls. Mother took lessons from her and loved it”.

Inez went on to create her own dolls and mastered the precise art of painting French, German and English antique replica dolls. And after the lengthy process of crafting a doll, Inez insisted on letting it sit, undressed, for as long as it took until she received inspiration regarding how to dress that particular doll.

“All of her dolls’ clothes were hand-sewn by mother, without using dress patterns,” Donna said. “And mom’s special signature for her dolls was to include a parasol in their hand, or incorporate a unique antique pendant into their outfit.”

At the time of her death, Inez had created 208 porcelain dolls with an additional 59 in process. She enjoyed the ritual of pouring the creamy clay solution known as
At Hospice of Green Country we are on a mission. This mission has two objectives: to provide and ensure excellence in end-of-life care, and to maintain and foster hope.

Excellence means comprehensive care that:
- Is based on the realistic and carefully thought out goals and values determined by the patient and family.
- Includes prompt, consistent and effective treatment of physical and emotional symptoms by qualified and certified professionals.
- Includes support for families and caregivers.
- Ensures continuity in transition from one care setting to another.
- Facilitates good communication among all caregivers and between providers and care receivers.
- Helps ease financial and other burdens of life-limiting illness.
- Includes bereavement counseling as needed.
- Is always compassionate and patient centered (being patient advocates).
- Is always delivered in an ethical and professional manner.
- Is ultimately evaluated and judged by the reported experiences and overall satisfaction of our patients and families (i.e., establishing a good reputation).

These are important components of excellence not only to us, but also to the patient and families who will choose a hospice based on those criteria.

Hope is the desire for a future event or state of affairs that is possible but not certain. There is progression in hope. When a cure is no longer possible, there may be hope for a long-term remission. For most of our hospice patients this is no longer appropriate, but there can still be hope for a good quality of life; and finally, if suffering increases or the end draws near, there is hope for a peaceful death with dignity.

So we still are involved with managing and maintaining hope. This does not mean that we attempt to create false hope or inappropriate expectations, or even that we can or should prevent our patient from ever experiencing feelings of sadness or loss. We can and do tell patients that sometimes the best they can hope for and the most we can promise is minimal suffering and peace. It is possible to be realistic and accepting and still maintain hope.

So this is our task, our goal, our objective.

It is my belief that Hospice of Green Country has great success in carrying out our mission and meeting those objectives. This is largely a result of the quality of the dedicated individuals in our organization. It’s about people taking care of people. We have good people. We have the best!

William Smith, M.D., is medical director of Hospice of Green Country’s northeast office in Claremore.
When Lyamara De Almeida became our hospice patient, we soon learned about her great desire to journey to Brazil so she could spend her final days of life surrounded by her children. Lyamara had pancreatic cancer that also spread to her liver, and her life expectancy was very short. Her last wish was to return to her homeland of Brazil to be with her two children, whom she had not seen in eight years. Her oncologist recommended the pilgrimage be made as soon as possible because of Lyamara’s deteriorating condition.

Neither Lyamara nor her brother, Fabio, were able to afford the cost of airline tickets as odd jobs and temporary work were their only source of income. But by mid-October Lyamara’s rapidly declining health prevented her from working at all, and she was totally reliant upon her brother for her care.

Hospice of Green Country tried many different avenues to get Lyamara and her brother back to Brazil before finally contacting Ted Easton, vice president of human resources at The Bama Companies, Inc.

Before becoming ill, Lyamara had worked as a temporary employee in Bama’s dough department.

“Ted and other Bama leaders were very supportive of our efforts to help Lyamara realize her last wish,” said Tamra Moore, Hospice of Green Country executive director.

“Within 24 hours of receiving our request for help, Bama Companies delivered a check to cover the cost of airline tickets for Lyamara and her brother.”

“Very seldom do you have an opportunity to be part of something as significant as this,” Ted explained. “It was the single most important thing to her, yet a relatively simple thing for us to do.”

Ted later learned that Lyamara’s fellow Bama employees also took up a personal collection for Lyamara, and presented it to her the day before her journey. The generous response by Bama leaders and employees typifies their company’s mission of people helping people be successful.

Lyamara’s flight to Brazil departed from Tulsa International Airport on Wednesday, October 20. Delta Airlines graciously allowed Lyamara to take along her beloved pet ferret, Baby Boy, which pleased Lyamara greatly.

Everyone associated with Hospice of Green Country is committed to helping people achieve the most rewarding experience possible from life’s closing moments. The generosity and quick response of the Bama Companies ensured that Lyamara’s last wish, to be with her children, came true.

People Helping People Be Successful: Bama Makes Lyamara’s Pilgrimage Possible

Tulsa Area United Way Day of Caring volunteers representing AAA and Target graciously donated their time and talents to Hospice of Green Country. Their approach to patient care, including palliative care, spiritual support and grief recovery services. “We are grateful to the employees and employers who chose to work with us and made the day a great success,” says Benelle Reeble, director of volunteer and bereavement services. “We also are fortunate to be a Tulsa Area United Way agency, and to be a recipient of this important community-wide day of caring.”
**A Word, A Smile, A Touch**

Touching Lives is the theme of this issue of Passages. Certainly, John Donne wrote simply and eloquently of how we are interconnected by virtue of our humanness and so touch one another:

“No man is an island entire of itself; every man is a piece of the continent, a part of the main; if a clod be washed away by the sea, Europe is the less, as well as if a promontory were, as well as if a manor of thy friends or of thine own were; any man’s death diminishes me, because I am involved in mankind; and therefore never send to know for whom the bell tolls; it tolls for thee.”

We are all as drops of water in the same pond, and so have the potential to have an impact on a countless number of lives. Our impact may be large or small, positive or negative, planned or unintentional.

With her permission, I will share with you what a patient’s relative told me recently about her Christmas gift from her son. The gift was a letter he wrote, in which he thanked her for her tender care of him over the years. She thought she had “just been doing what I had to do” and only with the letter did she see her actions from his point of view. “I knew he was important to me, but I didn’t imagine that I’d meant the world to him,” she said. She was deeply moved and humbled to see how profound an impact her actions had on his life.

It is easy to imagine that we have to champion a great cause or participate in an act of heroism in order to make a meaningful difference in the life of another. While not everyone is called to be a Mother Teresa, or rescue a person from a burning car, we all do have extraordinary power in our ordinary days to “mean the world” to someone else.

The wife of another patient keeps a card on the outside flap of her billfold to remind her that her simple actions can have powerful effects. The card reads: “A Smile, A Word, A Touch and each is easily given to rescue someone from despair or smooth the way to heaven.”

Mother Teresa wrote: “Stay where you are — find your own Calcutta. Find the sick, the suffering, the lonely, right there where you are — in your own homes and in your own families, in your workplaces and schools.”

Each week I have the privilege of seeing how Hospice of Green Country staff and volunteers touch the lives of our patients and families — and are touched by them as well. In doing so, we come to see deeper meaning for our lives and those of others and so grow in the joy and humility that these realizations bring us. ●

Katy Livingston, Ph.D., is a Hospice of Green Country chaplain.
Webster defines grief as “mental suffering as from loss, mishap, disaster. It is a normal reaction to dealing with feelings, behaviors and reaction to loss.” Practically speaking, our world has gotten smaller and we need some way to reorder it.

We grieve because we care. Grieving is a high sign of maturity dealing with care and concern. It is a natural, normal and necessary process. We can express our pain in a variety of ways physically, emotionally and spiritually. Crying is one form of expressing our grief and is a form of communication.

However, all of us grieve in our own unique way, and in our own time frame. It is important that we recognize and support everyone’s uniqueness and individuality as they deal with loss. After the tragedy of 9/11, our country grieved for the loss of lives and destruction. Now, in the wake of the recent tsunami, thousands of people are grieving for their suffering and loss of epidemic proportions.

Dr. Kenneth Doka, professor of gerontology at the Graduate School of the College of New Rochelle and senior consultant to Hospice Foundation of America, is a leading expert on grieving. His research shows that the way we grieve is not connected to whether we are male or female, but each of us has our own way of coping with grief and loss. Some of the ways we learn how to grieve depend on our family system, our values and beliefs.

“Simply put, there is one way to grieve and that way is to go through the emotional core of grief,” Doka says. “Only by exploring the necessary emotional effects of your loved one’s death can you eventually resolve grief.”

In the past, one way of looking at the grief process was based on Elizabeth Kübler-Ross’ work with the dying, which has been adapted to grief as well. These five stages include: denial, anger, bargaining, depression and acceptance. Doka’s research suggests that we also have important tasks to work through when dealing with grief. These include: acknowledge the loss, express one’s emotions, adjust to a changed life, relocate the loss, and reconstitute faith and philosophical systems changed by the loss.

Grief is manifested in many ways and anticipatory grief begins at the time of the terminal diagnosis. The staff and volunteers at Hospice of Green Country work with families in all stages of grief. We follow them for 13 months after the death of a loved one to help them walk through their stages and tasks. The more we learn about the grieving process and what it involves helps us to appropriately touch the lives of others.

One avenue for learning more about grief is through the upcoming Hospice Foundation of America’s annual Living With Grief Teleconference. This year’s topic will be Living With Grief: Ethical Dilemmas At The End of Life. The teleconference is scheduled for Wednesday, April 20, from 1:30-4 p.m. Dr. Kenneth Doka will be a panel member and well-known news reporter Cokie Roberts will be the moderator. For more information about the teleconference, contact our bereavement department at 747-2273.

Benelle Reeble, Ph.D., CVA is director of volunteer and bereavement services.
My interest in hospice care was prompted in the 1970s when I began to learn, thanks to a college psychology class, about palliative care and how a person can assist oneself or others in need of medical, spiritual and emotional care during a terminal illness. Later, I relied on that limited knowledge to help my mother battle cancer in an environment where hospice care was not available or certainly not voluntarily discussed. My mother's wish was to go home for her final days, but that wish was not granted. I tell you this story as a preface to express my commitment to Hospice of Green Country as its proud new board president.

At Hospice of Green Country, we celebrated the start of a new year with many admirable accomplishments, including:

• Fulfillment of our mission on a daily basis
• Financial stability
• Strength during a time of tremendous competition
• Caring, cooperative, generous hospice care team
• Substantial volunteer base that provides a plethora of services within the organization, throughout the community and directly with hospice patients
• Proficient leadership team to guide the organization

At the start of 2005, our hearts first go to those friends and families who have been affected by the earthquakes and tsunamis in the Asia-Pacific. Their stories remind us how alike we truly are, how small the world is and how interconnected we are on the planet. As this eventually draws our attention home, I am reminded of the needs we have at our own doorstep in order to provide care to people in need of hospice care “regardless of one’s ability to pay.” And, I congratulate the hospice team for being able to continually fulfill that mission.

For 2005, as our Tulsa economy strengthens, I would like to propose to each of our readers to select (or elect) themselves as ambassadors for Hospice of Green Country. Your role as an ambassador will reflect your unique potential to assist with the growth of the organization in 2005. You may choose to reflect on increasing your financial contributions to our truly independent non-profit organization. Your ambassadorship may include adding some hospice volunteer time at the office, with a patient or at a fundraiser.

Alternatively, you may simply take on a role of representing the organization in our community in an effort to increase our client base and overall public recognition. The way you choose to contribute is a personal decision. We have hope, however, that with your new title of ambassador you will renew and reinforce your commitment to Hospice of Green Country in 2005.

Jane Mudgett
President, Board of Directors

I receive many cards each month from families and friends of patients and they all carry the same message: the volunteers and staff of Hospice of Green Country touch lives and make a difference in our community. If present at our weekly meetings, you will hear the Hospice of Green Country staff say how the patients touch their lives and you will see the effort they put into seeing that each patient ends his or her journey with dignity.

The volunteers and staff are dedicated to the mission of our organization: providing compassionate and quality end-of-life care to patients and families — regardless of the ability to pay.

As we move into the spring season and contemplate the benefits of touching others’ lives, perhaps we should consider Elisabeth Kübler-Ross’ words: “If we make our goal to live a life of compassion and unconditional love, then the world will indeed become a garden where all kinds of flowers can bloom and grow.”

Tamra Moore, RN
Executive Director

When I think about the opportunities each of us has to make a difference in someone’s life, the events that led to my own grandmother’s death come to mind. Her illness hit quickly and the news that she would not recover was devastating.

Although educated as a registered nurse, I had no experience with end-of-life care, nor did anyone offer hospice as an option. So, I set out on the journey of caring for my grandmother during the last days of her life, without the benefit and support of hospice care. I did not realize the loss my family incurred those 13 years ago, because we lacked the support we needed during a death, until I began working with Hospice of Green Country.

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Tamra Moore, RN
Executive Director
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April
National Palliative Care Month

April 22
Annual Volunteer Banquet
All Souls Unitarian Church
6:30 - 8:30 p.m.

Please call for May/June dates
Volunteer Training Sessions

September 9
United Way Day of Caring