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Care group aims to build hospice Stand-alone facility is the goal

By Sandy Coleman, Globe Staff | July 20, 2006

Hospice care is available in every community in Massachusetts, but it is usually delivered in the homes of patients, in nursing homes, and assisted-living facilities. Stand-alone residential facilities are relatively rare.

In this region, the nearest residential hospices are in Sandwich and Danvers, according to Rigney Cunningham, executive director of the Norwood-based Hospice and Palliative Care Federation of Massachusetts.

But that will soon change, if the efforts of Campus of Caring, a nonprofit organization, pay off.

Norwell residents Chris Teel Hall, Kathy King Tedeschi, and her husband, Ralph Tedeschi -- the founders of Campus of Caring -- are traveling Plymouth County, talking to church leaders, county officials, civic organizations, and anyone else who will listen, mustering support for what they say will be the region's first free-standing, round-the-clock hospice home.

Already officials at Jordan Hospital have signed a letter of intent to work with the Campus of Caring to develop a hospice program and help provide management services. The hospital is affiliated with Cranberry Hospice in Plymouth, which offers support in the homes of patients.

"There is an unmet need," said Andrea Holleran, Jordan's vice president of strategic planning and business development. Of the Campus of Caring proposal she says, "This hospice house is a tremendous opportunity to provide a setting for patients to be seen and get the kind of care they need in the last days of their life."

Hall said her research indicates that last year there were 565 patients who qualified for hospice care in Plymouth County.

There is a growing interest in hospice residences since a 2002 change in state law allows free-standing facilities to be owned and managed by hospice providers rather than requiring them to lease space from a hospital or nursing home or contract with a hospital or nursing home, said Cunningham.

"Tranquility, dignity, and comfort. That's our vision," said Hall, a marketing specialist, who began working on the idea for a hospice home last March after a walk with her friend Kathy Tedeschi, who has created and oversees three nonprofit support organizations. On their walk, Hall shared a story about her friend Mary who died of cancer two years ago in Florida.

In a hospital during her final days, Hall said her friend was in pain and still receiving radiation treatments for multiple cancers even though there was no way the treatments would save her. Her friends and family helped to get her transferred to a hospice.

``She got to the home and she was in a La-Z-Boy . She was comfortable. She was meeting all her friends. How much better could it be?" said Hall. ``The home does all the care -giving so the family is relieved of that."

That's exactly what Campus of Caring hopes to do for South Shore families. The facility they hope to build would provide around-the-clock end-of-life services in a home-style environment instead of an antiseptic medical setting. The freestanding hospice would feature scenic walking grounds, a nondenominational chapel, kitchens for families, a caregivers' center for education and support, and 12 suites to care for patients and accommodate overnight stays by family members.

"There is a growing need for places where people can go and be cared for if there is not a primary caregiver in the home who can manage it," said Cunningham. "Hospice residences fill in the gap. If there is no hospice residence, then some people who can't be at home do go into skilled nursing facilities and are cared for by hospice there."

Those are two of the points being made by Hall and the Tedeschis as they travel the county, looking for the 5 to 7 acres of buildable land at no cost or a reduced price. Once land is secured, they will hire an architect and begin a fund-raising campaign.

Partly driving the interest is that with today's aging population, there are husbands and wives who may be unable to care for the other around the clock. ``And, also, we're seeing younger patients who have children or whose spouse works and they don't feel

the fit in a nursing home is good for them and their family."

According to the National Hospice and Palliative Care Organization , the number of hospice programs nationwide continues to increase from one program in 1974 to 3,650 programs in 2004 , the organization's most up-to-date figures. The number of patients nationwide served by hospice programs in 2004 was 1,060,000 , which was an increase of 110,000 people in just one year's time, according to the data. In 2004 , Massachusetts hospice programs cared for 16,540 patients -- 55 percent of them died at home, 26 percent died in a skilled nursing facility.

Hospice care is provided to patients who have a life expectancy of six months.

To qualify for hospice care, a patient must have a coordinated referral for an interdisciplinary medically directed team. Hospice care focuses on making patients comfortable rather than trying to cure them. Those who are dying are comforted and receive medical care and symptom relief. Death is regarded as a normal process but is neither hastened nor postponed.

``End-of-life care -- if it is done property -- can be a nice goodbye for the family and the patient," said Kathy Tedeschi.

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