Part 10

The last few years

After twenty eight years with IBM I was offered the option to retire early aged sixty-three with pension straight away and a significant lump sum. I calculated that we could live on the pension without needing to take another job, and so I retired in July 1996. Obviously there was a lot of time spent handing over my responsibilities to members of my small group. However I did expect hat my colleagues would find something regarding my previous work which required clarification, or for which my skills would be useful, so I got on with my life of leisure but awaited the call which I was sure would come.

The call did come, about five years after I had left. One of my previous managers called me from his office using the speaker phone, with several people I knew in the office with him. I had been the expert on a system with the mnemonic TSAB and they would like some advice. Sadly I couldn't remember the system, or what the mnemonic stood for, and I had to admit that loud an clear to them all. How embarrassing was that. Obviously I was of no help, and that was the only call I ever got.

I could have hot depressed at this ignominious episode. Maybe my work in IBM had been so insignificant that nothing else ever came up which needed my input? I preferred to take the alternative view that I must have briefed my colleagues thoroughly and all of my legacy systems were bug free and functioning perfectly.

When I retired Paula was still working at the school, so I was a kept man. We took my retirement seriosly - we started to take breakfast in bed which seemed to be evidence of proper relaxation. People would ask what do you do all day - well there seemed to be no problem finding things to do - Jobs round the house, DIY projects, gardening, walks, family visits, days out, travel, music in fact I began to wonder how did I ever have time to go to work!

There had been one or two health problems, the most serious was when Paul found she was losing sensitivity in her lower leg, for instance not feeling the heat of the bath-water. Walking became difficult, and she forced herself to go on long walks, trudging along in discomfort thinking she needed the exercise to improve her physical fitness. Thanks to her lovely thorough doctor, after two scans a meningioma was found in her upper back. This is a growth on the membrane (meninges) surrounding the spinal column and the brain, and in Paula's cas it was pressing on the nerves which run down the spinal column. The operation was performed by a charming young surgeon called Mr Sparrow and was very successful, losing only a small piece of bone from a vertebra and leaving only very slight nerve damage. Paula was soon back to her vigorous form in a few weeks. The quick response to the problem was due first that to avoid waiting we paid for the scans, and then the IBM health insurance paid for the operation privately.

The IBM health insurance also paid for me to have keyhole surgery to clean up torn cartilage in my rigt knee joint, but soon after that we had to drop the insurance because it became too expensive. With hindsight it might have been worth it because years later I paid twenty five grand in total for Paula's two artificial knee joints.

I think it was in 2017 that Paula had to be taken to hospital because her system got totally blocked - basically it was extreme constipation and she had become quite ill. She was only in two nights and she was cleared, but they had also discovered that she had the heart problem atrial fibrillation. From then on she was prescribed a blood thinner.

I had been encouraging her to take a supplement called Macushield which was recommended by doctors for AMD of the eye (Age-related Macular Degeneration) and according to the optician had actually been doing a good job. Until the heart condition was diagnosed that was the only pill she needed to take. Pretty good to have got to 89 without the need of some medication. She hated taking pills so I was putting her pills out for her every day to make sure she remembered.

During 2018 I noticed small changes in Paula's behaviour. She was sometimes having to add up the money taken in the charity shop, and she was having trouble with this. She had always been very good at looking after her own money and I had never noticed her being concerned before. There was a slight deterioration in the quality of her cooking though she still cheerfully did most of it. On one occasion when Wendy was staying with us I left to go to choir practice leaving the two of them to make an Italian chocolate trifle, a recipe Paula had made a number of times before. Wendy was trying to persuade her what the recipe should be but Paula couldn't follow the instructions making several basic errors, and th result was only just edible.

These things plus some other instances of vagueness or lack of appreciation of circumstances mad me wonder if dementia was starting. I knew she would not agree to see the doctor if I asked her to, so I wrote to her doctor expressing my concerns, and asked if she might invite Paula to visit her. She subsequently did this, and I sat and listened while the doctor tactfully worked Paula round to answering a few questions. There is a standard initial test for dementia with questions like what is the date, who is the prime minister, here are five colours to remember later, and various other trivia. Paula quite cheerfully attempted to give the answers, but although I was expecting it, I was immensely saddened to hear not one correct response to the whole string of questions.

A week or so later a young male nurse came from the memory unit and we went through a similar palaver, and as a result Paula was eventually diagnosed with both Alzheimer's and vascular dementia. Unfortunately the medication which can alleviate symptoms in some cases would not be suitable for her.

Through and after all this Paula would not discuss the D word and would get quite cross if I pursued it. Therefore there was no way what was to come could be prepared for because she would not co-operate. However one blessing was that her attitude to me remained the same - there were no outbreaks of bad humour or misunderstandings - she still loved me and frequently said so, and we continued to be happy in our day to day relationship.

Shortly after this on January 2019 I had the most terrifying experience of my life. It was late morning and I was sitting in the sitting room reading the paper. Paula who had ben pottering about in the kitchen cae into the room saying something to me - two things were shocking - ther were no recognisable words in heer speech, just garbled nonsense and her face looked grey and twisted. She flopped down on the sette and appeared to to slump sideways.

With a dreadful hollow feeling ib my chest I at once picked up the phone and dialled 999 and was talking to a young man within seconds. I told him I thought that Paula was having a stroke, and there followed a difficult few minutes while I tried to follow his instructions to get Paula lying horizontally - she was now a dead weight half lying half sitting. She was barely conscious and coughing. Eventually I managed it and went to open the door for when the ambulance would arrive. The young man was talking to me reassuringly all the time until the paramedics came and took over with admirable efficiency.

After the 15 minute ride to the hospital Paula was eventually sitting on a gurney in the corridor of A&E. I think we were waiting half-an-hour. Paula now fully conscious but not rational, was trying to get off the gurney and I was trying to stop her. Finally they started to process her with ECGs and scans etc and I can't remember what else, and at lasts we got to a ward and I began to feel less stressed.

There followed two weeks of travelling back and forth to the hospital every day. I became almost part of the ward staff who were very tolerant and let me visit any ti]me. Paula had reverted to a childlike clingy state when she couldn't bear me to be out of her sight. The stroke had left some brain damage and there had been a secondary bleed on the brain. As one might expect this event greatly advanced the dementia . When I finally got her home it became clear that I was now a 24 x7 carer.

I now had to come to terms with our new life. First of all although physically not much damaged Paula's mind had changed radically. She no longer knew me as a husband and sometimes still wanted to know where her previous husband Ron had gone. I think she thought of me as her live-in lover - at least her feelings for me had not changed. Or maybe she thought she was living with me in my house, because she would look round the room and say when can I go home, a phrase which left a hollow feeling of dread in the pit of my stomach. I would say you are at home, this is your house, it is full of your things. I would point out items like the little black horse statue I bought her 25 years ago as a surprise for her Birthday, or the figurines we bought in Italy on a visit to the glass factories of Murano. she seemed to recognise these memories though it would not convince her we were married. I put our wedding photos on the I-pad and we went through these most days. She would recognise everyone in the pictures, in f act she never forgot anyone in her family. After these sessions I would say do you remember now, and she would sy yes , but I am not sure she was never fully convinced.

From being house-proud cleaner of rooms, maker of meals and a gardening fanatic, over night Paula became a sort of lodger. The only housework she still did, and this with some enthusiasm, was washing up. She never showed any sign of wanting to prepare food or clean the bathroom, or spend time in her once beloved greenhouse, which once used to become a green oasis in the spring. She spent quite a lot of time sleeping in her favourite seat in the sitting-room enjoyed some documentary programs on television and I frequently used YouTube on the television to play Andrea Bocelli or Pavarotti and she would get lost in the music. She started wanting to go to bed at 5:30 in the afternoon which would I suppose have been ok except that she would not actually go to bed on her own, insisting I had to go too. I could not have coped with that, needing a maximum of 6 hours sleep. I would have been awake at one o'clock with seven hours to kill till Paula awoke in the morning. As it turned out I always managed to keep her going until 7:30 thanks to Senore Pavarott & co, which meant if I went to sleep at 9:00 I would be up at 4:0, when I would do jobs which were best done in her absence, or sometimes enjoy some personal entertainment from recorded videos.

I am not a much of a cook always having dislike the activity, but now I had to do it. Paula's favourite food for years has been curry, so to start with I made it one once or twice a week. She actually liked the Waitrose ready meal version better than mine so that became a regular item. Because I couldn't really safely leave Paula on her own in the house I started to use Waitrose delivery system. I can't remember what other meals I cooked but I think we were adequately nourished during the two years of my husbandry.

There were three major problems with looking after Paula - first she was a dreadful pill taker. Actually just before she had her stroke I had found some pill boxes with handfuls of pills which I had put out for her, and which she hadn't wanted to take. This was almost certainly why the stroke occurred in spite of having been prescribed a blood-thinning medication which would have prevented it. Since I found the discarded pills, I now always stood with her to make sure she took them, though there was often a fuss about it.

Another problem was avoiding dehydration leading to constipation. For some reason Paula hated water. To me water is the best a drink you can have, but she just would not drink it. However she would drink several cups of decaffeinated coffee a day, but I was worried that would still be too much Caffeine. So I found a coffee substitute in Holland and Barrat with no caffeine at all, and she happily drank this five or six times a day. She occasionally drank orange squash, but I tried all sorts of other cold drinks but never found anything she actually liked.

I an sorry to to say this but here attitude to personal hygiene changed from her previous fastidious standards. I had to persuade her to have showers, and tried tio get her to use the downstairs shower which is like a wet room and would be safe for her to do herself. Instead she insisted on using the bath which meant stepping over the side of the bath to get in and out - a risky procedure in her less steady state. Also her washing technique was now totally inadequate, so that was another duty which had to be performed by the carer.

The third major snag was that Paula would not accept anyone except family to sit with her when I had to go out. I had several attempts at using social services facilities who offered a sitter free, for two hours a week and I also tried using a commercial care company whose carers were I bit more acceptable. None of it was acceptable to Paula - there was always a fuss when I got back. At the fifth attempt I was in a shop when I got a call from this sweet 21 year-old carer who was concerned because Paula had gone up to her bedroom and she didn't know what she was doing.

When I got home Paula in a fury tore into me in a way I had never experienced from her before. She said how dare I go out and leave her with this stranger, she didn't need anyone, she couldn't believe I could do something so awful and she didn't know I could be such a horrible man. The poor young girl unwisely said "He's not horrible, he's lovely!". I said I appreciated the support but she needed to stay out of it.

Paula's outburst was really hurtful, in spite of knowing it was the dementia talking, and she would have forgotten it in an hour. But it was too worrying and I could not feel comfortable being away not knowing what treatment Paula was giving the poor sitter back at home. Also I could only do this by not telling Paula in advance as she would never agree, thus I had to present her with a fait accompli - and I felt guilty of deceiving her. So after this I abandoned any further attempts to use outside support, and relied solely on family members, and occasionally neighbours who were all very helpful.

I tried to take her out for a walk every day or so. This also had it's problems because However carefullyy I prepared for the event as soon as we were out if the house she would say I need a wee (or worse, a poo!) and I would have to decide if it was worth the risk to continue. If we were going out in the car, to the hairdresser for instance, I would have to plan our route to take in public toilets at appropriate intervals.

There were occasional trips to see family which Paula greatly enjoyed, though she usually wanted to leave again before I was ready. Family members and friends occasionally visited us and Paula could still be quite sociable with the right people. My daughter Wendy had become a favourite, and actually she very kindly travelled up from Exmouth just for the day to visit Paula when she had been in hospital. I used to look forward to weekends when Wendy could visit, partly because I knew her cheerful presence would raise spirits. Although Paula's short term memory was usually only a few hours, for a couple of days after Wendy left she would be saying "where's Wendy?".

Through all this I don't know what I would have done, If I could have stood it, if Paula had not remembered me and not loved me. In some ways she was still my darling and liked to be hugged and cuddled. She would frequently look up at me with an intense expression and say "I love you more than life!" This always lifted my aching heart and made everything more bearable. Sometimes I would stare at her profile as she wtched something, at that moment unaware of my presence, a profile barely changed from that of the young woman I met 50 years ago, and I would feel my love for her stronger and more poignant than ever, in this time of tragic changes in her life.

There were family visits and little oases of pleasure for us during 2019. My son Jay and his wife Audrey brought my grandson Andy and the two great grand children Eden and Isla to visit in August. Here we all are, plus Wendy, who has been digitally added to complete this group of the McInnes tribe. Paula was very happy this weekend and got on famously with the children, not having net Isla before.

Eden, Robin, Jay, Paula, Andy, Isla, Audrey, Wendy

During 2020, the second year of our new life style, was when the Covid 19 virus caused the world to retire indoors. As we were already largely confined to barracks it didn't make much difference to us. On the rare occasions when I had to leave the house the rules permitted someone to help from our family 'bubble' which in our case was Sandy. It just meant that family visits were forbidden.

Paula was becoming more physically disabled, as her knees we now quite painful and she was suffering some other unexplained pains possibly of sciatic origin. I bought a folding wheelchair which I usually kept ready for use in the boot of the car. It did get used once or twice when long walks were necessary. However Paula was totally resistant to it. I thought we could go for walks with the chair - my idea was that Paula could walk as much as she was able, then continue in the chair and walk again when rested. This would have allowed us to go significant distances on foot, but Paula would have none of it, so our walks were limited to about 500 metres at a time. Once when Wendy was visiting we managed to to use the chair to go to the Royal Oak at Langstone harbour, but I think that was the only time.

I remember one occasion when Sandy had suggested meeting for a coffee in Havant. Obviously we took the car and parked in Waitrose underground car park. When we came out of the coffee shop there was a massive traffic jam all through Havant down to Haylng. I ran and got permission to leave the car in Waitrose car park overnight and trotted home to get the wheelchair, which happened to be in the greenhouse instead of in the car. Sandy said she and Paula would walk slowly back and stop if Paula had problems. As I was halfway home my mobile rang and it was Tina our next-door neighbour - I can't remember why she called - but when I told her what was happening she offered to bring the chair to me. This saved me 500 metres and I raced back to rescue, as I thought, my poor crippled wife. Panting with exertion I offered Paula the chair. She refused point blank to consider it and obstinately and ungratefully plodded all the way home probably in pain. She was sometimes a very frustrating patient!

Nothing much stands out in my memories of 2020. By October our walks had become very short. There is a long foot an cycle path from Havant running behind out estate, going down almost to Langstone village and the harbour. This used to be a single track railway with a train service to Hayling Island until Mr Beeching scrapped it in 1966. It is still known as the Hayling Billy Line today. Trees and bushes and sometimes blackberries line both sides of the path and a stream runs alongside. The place is popu;ar with cylists and joggers, and walkers with or without dogs. From our house it is less than 500 metres to the nearest access point where there is a little bridge over the stream, and also a dilapidated old bench. This was as far as Paula could get before sitting down for a rest. It was still a pleasure to sit and listen to the birds in the foliage on both sides of the path. I tried to get Paula down to this point on as many days as possible, weather permitting.

In November Paula started showing a frustrating symptom of the brain damage. At bedtime she seemed to need to wee all the time. Having just used the toilet she would get back to the bed and then as soon as she sat down she would get up again and return for another wee, though I think after the first two or three there wasn't actually anything left. I would normally go with her all the time, so sometimes it was continual, and from eight o'clock till eleven we would be continually walking back and forth, back and forth. I would eventually persuade her to lie down and ignore the urge, which she would finally manage to do, and we might get two hours sleep till it started again.

On the 1st of December we had been following this tiresome procedure for about three and a half hours when she finally went to sleep. I was eventually woken at one o'clock by Paula calling "Tonsa, help me!". Tonsa was her pet name for her carer Antonia who looked after her between the ages of 3 and 12. I leapt out of bed and found her sitting on the floor in the bathroom beside a huge pool of blood. I later worked out that she must have fallen, hit her head and gone unconscious for a while. This would have explained the almost undisturbed pool of blood, yet very litttle blood on her clothing, and matted blood on the cut on her temple. There was no way I could get her up off the floor so I rushed for the phone to get the ambulance

on its way, and then I wiped up the blood which was a slip hazard, and tried to comfort her. She didn't seem to be cold as I was keeping the heating on all night at that time, so I just tried to comfort her. The poor little soul was still calling for Tonsa, which I found to be unbearably sad.

The ambulance was only about 15 minutes, and as before they were superbly efficient and comforting. They took me along in the ambulance although it was strictly against the Covid rules, and for the second time in two years I was in A&E with my favourite person in the world and worried sick about the outcome of it all.

I think it was about 3 hours before we finished up in a ward. I am very vague about what happened but I think I eventually managed to speak to a doctor. I know my presence was an embarrassment to ward staf and I was finally asked to leave. I don't think at that point it had registered with me that there would be no visiting so I said a miserable goodbye to Paula and said I would see her soon, at least thinking she was in the best place. I had left a bag with what I hoped she would need, thinking I would be able to bring more stuff when I saw her the next day.

The next few weeks were a nightmare - trying to find out how Paula was and what they were having to do and of course discovering that there was no visiting at all. Our grandson trainee doctor Luke was a huge help. He was able to bypass systems to some extent and was able to find out the status when I was struggling to do so. After a week or so I was getting the message that Paula would need professional care when she came out of hospital. I was told she could be released after two weeks, but at the last minute she was diagnosed with Covid, which meant she had to stay in for another two weeks although she was without symptoms.

It seemed the best thing was to get her into a nursing home and then assess whether she needed to stay there or perhaps come home with external care arranged. I spent hours on the phone researching and I found a nursing home at Bosham only 6 miles away. This place specialised in dementia patients and I had heard that they looked after the wife of a friend of mine very well. I also had a long discussion with a care organisation on Hayling and discovered what would be involved if care had to be arranged at home. I had a word with a company specialising in stair-lifts, and I was relieved to find that one could be fitted in our house in spite of a rather non-standard configuration at the bottom of the stairs. However meanwhile I managed to reserve a room for Paula in the care home that she could move into from the middle of December, and signed a a contract for her care. I did a lot of calculations and believed I could afford to keep Paula in the nursing home if I really had to for at least 5 years. I set up a bank account in Nationwide in her name administered by me and transferred her pension and savings into it so that I would have a dedicated system for her finances separate from our joint account.

This was all very well to give me something to do, but I desperately wanted to see or at least speak to my darling. I made several calls to the hospital and I did managed to speak to her once, and heard her recognise me and I told her I I loved her. But none of the other calls were satisfactory - the background noise in the ward was horrific - there were obviously some patients much more affected by dementia than Paula who were shouting and yelling - it must have been an awful environment to have to live in. After about two weeks I did speak to a friendly doctor who told me Paula was doing very well - the external wound had healed and although she had a small bleed on the brain the doctor thought her dementia had not got any worse. She said her behaviour was that of a model patient. It seemed that they had fixed the continual weeing problem according to the doctor, but because of the Covid infection she had to stay for two more weeks..

I was at the hospital every two days or so delivering clean clothing and collecting washing. Ther was no proper system for this and there were many calls to the ward asking for soiled clothing and what else Paula needed. I think the Covid environment had completely crippled the usual hospital ward system. All wards were treated as isolation rooms and anyone who went in them had to get suited up in complete PEP kit head to toe, and disrobe cleanly on exit. The phones were outside isolation areas, so if a request came in it was a no longer a simple natter of popping in the room to check something.

As poor little Paula would be in I hospital over Christmas I mad up a Christmas parcel full of goodies to nibble to try an encourage her appe-tite, which we had heard was poor. This is the box I made which could be easily opened without untying the ribbon. You can probably see that there are pictures of all her close family in the lid. Whether she appreciated it I have no idea, but we thought if she was reminded of us all it might help.

Eventually after many delays due to the Christmas holidays Paula was moved into the nursing home in late December. I had hoped there might be possibility of seeing her now she was in private care, and maybe it would be easier to talk to her on the phone. As Paula was going to be in a new home (hopefully temporarily) it was necessary to send her in with a complete set of clothing for every condition of life. Once I knew Paula would be admitted for certain, Sandy had been helping me to do a review of her wardrobe and we went shopping for various things to make sure she had an adequate number of everything. The shopping list included nightwear, jumpers, underwear and dresses. Some of these required alterations for Paola's siz, and also everything (including teddy bears) had to be labelled. You can imagine what with alterations, getting labels printed, ironing on labels , washing and ironing and making an inventory of everything I had quite a busy December.

I had retrieved some stuff from the hospital, including the Christmas box, from which not much had been eaten. I decided to send it in again to the care home this time as a New Year present. Paula would almost certainly not remember it and maybe the carers there would have more luck getting her to eat something from it. The children and Sandy prepared some framed pictures of us all to hopefully cheer up Paula's room and keep our images in her poor failing mind.

I found telephone calls were hardly any better in the care home than in the hospital. Only two or three times did I manage to speak to her , but on all occasions it was doubtful if she knew what was going on or who I was. Once I managed to get a nurse with an I-phone and we tried Face-Time. Due to the nurse's handling of the phone I never got to see Paula, and I doubt if she saw me as her glasses could not be found, From what I could hear the nurse could not get Paula to take any interest in the small screen.

I had several conversations with the manageress about Paula's diet. She was reluctant to eat and they were trying to find things which would tempt her. I think they were trying quite hard but not having much success. Aso sadly I discovered that she was doubly incontinent. I now suspect that the hospital's solution to her constant weeing problem had been to put her in nappies. Much easier for the nurses but in her demented state Paula may have finally giving up caring whether she needed the toilet or not.

During the first week in January I got the good news that visits were going to start again, but because of Covid they would be behind glass with microphones and speakers to allow conversation. The patient would be brought downstairs by a nurse to the meeting room and the family would be outside under-cover for a 30 minute chat through the glass. Obviously it was a labour intensive operation for the care home, and with 120 inmates it was taking two weeks to get through everyone who wanted contact. We thought, fantastic! At last we are going to see our loved one, and more importantly she is going to see us and see that we have not willingly abandoned her.

Then we got the bad news - up to now the care home had been Covid free, but they had just had two positive diagnoses. All visiting was cancelled , and the poor inmates were all shut in their rooms until the epidemic cleared which was going to take at least three weeks, that is if they were lucky and not many staff succumbed.

January dragged on and every day or so I tried phoning but never got proper contact. On the 24th I got a call from a nurse saying that Paula was very weak and not well. I said could I come in and see her but was told wait till tomorrow. I phoned the next day and was told she was still unwell. I said could I come in and they said I should wait and they would call me if necessary. I was on tenterhooks all afternoon. I spoke to someone at about six and they said she was comfortable and going to bed. I could come in the morning.

The phone rang at 11:15 tjat night and the Romanian nurse said I had better come now. I was there within 15 minutes, and was ushered up to the little office. He led me to Paula's room, where I stood by the bed and looked down at my darling for the first time in two months, to see her sleeping peacefully. The nurse stood on the other side checking her pulse. I said has she gone, and he shook his head - there was still a pulse, but now I am not sure I believed him. I felt her hand and it was still warm but I could see no movement of the chest - no sign of life.

They had called me too late, or more to the point I had not been pushy enough to drive over and demand to see her that morning. I regret many things in my life but that will be the one that hurts the most whenever I think about it.

After a few minutes the nurse said that she had passed away. He said to go and see him in the office when I was ready. I stared round the room which was like a typical hotel room - clean and simple - the neat toilet and shower room near the door, the pictures we had sent on the table with the television conveniently placed to watch from the bed - everything in order - even the last remnant of my lover and best friend neatly tucked up in the bed. I stood peering down at her wondering if my fifty years of happiness could have continued if I had done something different.

What was the point - of anything now. I kissed her - told her I loved her and left her for the last time.

The next half hour is a blur - sitting in the nurses station office talking to Grady's the undertaker - only remembered because they did Martin's funeral 13 years before. I went home to bed in a daze asking myself what would I do with my life now, and not finding any answers.

We now know how Paula came to the end of her lif. First of all in hospital tended every day by people she did not know , isolated from everyone she still knew and loved. Although her body was healed her demented mind had no focus on reality. In hospital they said that she was difficult to feed. This continued when in the nursing home, and she went on refusing food and later on drink as well. She died from lack of nourishment and mental stimulation. if she had been able to spend time with me or her family would it have been different? Who knows, but it should be a lesson to the care systems not to just care for the body - dementia sufferers must not be kept totally isolated whatever the rules for mentally fit people. During two years of Covid isolation rules sadly I imagine this scenario will have been repeated many times.

I am writing this two years after the events I have just described, and it seems like they happened yesterday. I have tried not to spend much time over "what if" thinking but it is quite hard to stop the mind churning.

Most of 2021 was spent on all the arrangements necessary after a death and I hope I have not forgotten anything. Most of what I accomplished in Paula's memory can be gathered from Paula's tribute page which you can access by putting this in your browser:

https://www.singingpractice.uk/personal/base.html

The funeral had very limited numbers because of Covid rules so we had party at the house in July for friends and family to remember Paula. I have managed to get the council to install a bench in her memory on the Hayling Billy line at the furthest point of our short walks. We had a family ceremony to celebrate this and here we all are. On my walks now I always sit on Paula's bench for a while and derive some comfort from it.

Matt Remy, Anna, Sandy, Nyla, Luke. Bella, Robin, Molly, Natalie, Wendy Coco Monty

I won't be so dramatic as to say my life has ended, but I do have difficulty motivating myself to do things, because just for me there seems no urgency to anything, or even no point. I console myself with friends and rare glimpses of my lovely extended family when it is possible to do so, and I am now planning my 90th birthday when I hope all the family will be there. I don't really want a party, but I am sure if I didn't arrange one someone else would do it, and I hate surprises.

If you have reached this point, you have my admiration for sticking with it, and thank you for taking an interest, thus hopefully making my effort worthwhile.

Robin