



ELDERCARE RESOURCE SERVICES



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"HELPING YOU HELP YOUR LOVED ONES"

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A FREE PUBLICATION ON ELDER ISSUES

PATTERNING/HABITATION

Most people with dementia have difficulty learning new tasks and remembering past events. As memory loss progresses even long term memory is lost. What helps anyone who has memory loss is a routine or a pattern. This means that the same routine occurs seven days per week. Waking at the same time, eating breakfast at the same time, etc. This reduces stress for the person with memory loss because they do not have to plan on what to do. It is difficult for anyone with memory loss to plan and execute the plan. With a daily routine every day decisions do not need to

be made. This pattern or habitation can allow someone with memory loss to stay at home longer. The senior with memory loss does not do well with changes. It can cause anxiety and stress because there lacks the ability to go along with changes. If services are brought into the home it is important to keep the routine the same. Inform the agency what the routine is on a daily basis for example showering after breakfast or before breakfast. The senior with memory loss is unable to adapt to change. When there are changes it takes about 4-6 weeks to establish new routine or patterns.

PAIN

Pain can cause mood changes, cause an increase in fatigue, affect memory loss, and affect appetite. Pain medications can cause constipation. If your relative states that they are experiencing pain it is important to contact the primary care physician to discuss the cause of the pain. Sometimes Physical Therapy can offer relief or over the counter medications. Other times more invasive treatment is needed. Depending upon the pain consider a pain clinic. The pain clinic is the expert on bone pain, muscle pain, nerve pain and can suggest treatments accordingly.

ABOUT US

ElderCare Resource Services is a geriatric care management company co-owned by Linda Sullivan RN, CMC, and Debbie Gitner LCSW, C-SWCM. Our unique Nurse/Social Worker team is able to provide both psychosocial and medical consultation to our clients. Linda and Debbie work together on each case. Families can consult with either of us. We are strong advocates for our clients giving them information to make them better consumers; getting their relative the best care. Together we are able to assist our clients and their families with information on Community Services, Home Care, Assisted Living, and Nursing Homes. Linda and Debbie have over 35 years working with the geriatric population. Now is the time to plan for the future. Call us today if you have a question about our services. We'll be happy to chat. Look for our monthly column in the Metro West News "Senior Q & A"

ROOM CHANGE IN NURSING HOMES

At one time if your relative resided in a Nursing Home and was offered a room change the facility had to put everything in writing including how to process an appeal. The facility had to give the senior 30 days notice. The senior could decline a room change and stay

in their room. There has been some legislative changes whereby a facility can move your relative with very little notice. Now the only appeal is to the Medical Director in the facility. Some facilities have moved residents from one room to another without notice to

families and this is now allowed. This often happens when a senior is admitted to a rehabilitation unit and does not return home. Many times the facility will move the resident to the long term care unit in order to keep beds open on the short term rehabilitation unit.



Certified Members of:
National and New England Associations of Professional Geriatric Care Managers

**“Helping you help your loved ones”  
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## FREQUENTLY ASKED QUESTIONS

**Q: My father was in the hospital and then transferred to a rehabilitation facility. It is unlikely my father will be able to return home. My father was the caretaker of my mother who has short term memory loss. He cooked, organized, and kept order in the house. My siblings and I have taken over in the short term but we can not keep up this role. Should I move my mother to Assisted Living, should I hire help? I do not know what to do. Do you have any advice?**

A: This is not an easy answer. First of all it is important to realize when caring and making decisions you need to make decisions for what will work now but also plan for the future. Often times when caring for someone with memory loss a system will work now but as the disease progresses you will need to modify the

plan. Also, consider hiring a Geriatric Care Manager. The Geriatric Care Manager can complete a home assessment and put together a plan of care for your mother. The Geriatric Care Manager is available as your mother's care needs change. The Geriatric Care Manager is able to coordinate services in the home or liaison with facilities.

**Q: My mother just got diagnosed with Parkinson's disease. She is still able to take care of the house but I see her slowing down. My mother is fiercely independent and has always had strong opinions about her care. When do I step in to help as I do not want to take away her independence?**

A: This is a good time to sit down

with your mother and talk with her about her wishes. Ask your mother how she is coping with the diagnosis, let her know you are there, and then ask her if she has thought about what she would want if she can not take care of the house. Would she want help in the home, would she want to move to an Assisted Living, (and if yes which one) or if she needed rehabilitation what are her choices? If your mother does not have ideas then ask her to think about it because you want to do what she wants as her health fails. Also consider seeking legal advice from an Elder Law Attorney who can review important paperwork such as Health Care Proxy, Power of Attorney and who can review the finances. It is important to have a financial plan which will help; you and your mother need to know what cash is available is spend on services and options.