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ELDERCARE RESOURCE SERVICES



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"HELPING YOU HELP YOUR LOVED ONES"

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## WHEN IS IT TIME TO THINK ABOUT PALLIATIVE CARE?

When is it time to think about palliative care and not focus on healing? This is a question that there is no one answer for and everyone can see it differently.

Often times palliative care is suggested when there is a chronic on-going medical issue that has been treated and treated and treated without getting better, or a disease such as cancer that the physicians can not provide any more curative measures.

Palliative care can be provided for end stage dementia, failure to thrive, cancer, and other diagnoses.

Palliative care can be provided at home, at a long

term care setting such as a Nursing Home, Assisted Living or Rest Home. There is a team of people involved; Nurse, Social Worker, Physician, Nutritionist, Religious and others as needed.

Palliative care services contacts the primary care physician and they work collaboratively. Palliative care focuses on quality of life.

In some situations palliative provides curative treatment.

Palliative care often but not always leads to Hospice care. Hospice care is often involved when best guess is there are only months to live, with the goal being quality of life. With hospice there are no curative treat-

ments—comfort is number one and if there is pain the goal is to keep the pain at the lowest level possible.

Hospice provides a team of people to monitor the client, make visits to the client on a regular basis and increase visits as health changes, and provide support to family members.

In MA there are a few hospice only facilities. These facilities offer private rooms, allow families to visit at any hour, stay as long as they want, and allow the person to have their wishes honored as much as possible.

## ABOUT US

**ElderCare Resource Services** is a certified aging care management company co-owned by Linda Sullivan RN, CMC, and Debbie Gitter 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 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 Questions and Answers](#)'

## TRAVELING WITH FAMILY

Traveling with a Senior can be a challenge, but the more planning involved the easier the traveling experience will be for everyone. By car make sure there are frequent breaks. Before the trip know the location of the rest stops along the route. Plan when to stop. It often makes sense to stop every two hours to stretch out and use the bathroom.

Consider bringing headphones and a CD player with someone's favorite music. That can be relaxing and comforting.

If traveling by plane call the airline ahead of time and often times there is a special check in for people requiring extra care. This avoids standing in the long lines at the check in counter. Request a wheelchair to the gate.

If someone is anxious talk with the primary care physician about anti-anxiety medications.

Pack a favorite pillow and blanket if possible as seniors are often cold or dress in layers. Consider shipping clothing and toiletries in advance — it is always much easier to travel with one bag than many.



Certified Members:

Aging Life Care Association

## PREPARING FOR WINTER

As you think about the winter and having your relative stay in their home as they wish, consider getting the house winter ready.

A generator is important. If there is a power failure for even a short period of time. The lights will stay on and food will not go bad and the house will stay warm. Without lights there is a high risk of a fall, without heat there is a high risk of hyperthermia?

This is also a good time to start using a home food service delivery service such as Pea Pod, or to sign up for a service to be ready to put into place immediately. If the primary person cannot bring in food (they get sick) there is a back-up plan.

Consider stocking up on food items that are non-perishable. Make sure there is a hand held can opener in the house.

This is also a good time of year to go through the cabinets, both food and medicine chest, to look at dates on all bottles and cans. Throw out old outdated food items.

It is easy to reach into a cabinet and grab something without looking at a date.

Check all windows to make sure they are locked as this reduces cold air into the house.

Get a furnace check in the fall and have repairs done before the winter. Alert the heating system company; EverSource or an oil company that a senior lives in the home and if something fails they need immediate response.

Purchase battery operated lights and place them in the house.

Check the water heater looking at the last date of installation. Get the water heater replaced if it is over 10 years old.

Put a carbon monoxide detector near where people sleep.

Add handrails on steps outside.

Check out these websites: [www.ready.gov/seniors](http://www.ready.gov/seniors), [www.noaa.gov](http://www.noaa.gov) or [www.redcross.org](http://www.redcross.org) for more information about cold weather.

Apply weather strip around the windows to keep the cold air out.

Place blankets in a favorite chair which will be easy for your relative to reach when he/she is cold.

If there is a fireplace in the house seal it off to keep out cool air out and heated air in and to remind family members not to use it. If someone has memory loss they may not properly use the fireplace and it can become quite smoky.

## FREQUENTLY ASKED QUESTIONS

**Q: My father and I have always been close. Now that my father has dementia his personality has changed and he argues with me and has said some mean things to me. How should I handle this?**

**A:** Dementia can change personalities. We recommend not being confrontational or argumentative. It is best to go along with the conversation rather than correct. This is not an easy task to complete. One always loses these battles and most likely you walk away sad.

**Q: My mother has always been depressed my whole life. She is now in a Nursing Home and was evaluated by the psychiatrist. The psychiatrist discussed with me my mother's depression. She has moments when she is very happy and moments when she is low. With her depression is my mother com-**

**petent?**

**A:** That is a question for the psychiatrist to determine. Some people are competent even with depression and other people have such a severe depression—during that period of time when they are most depressed the doctor may determine that they are not competent.

**Q: Can my father change his health care proxy?**

**A:** If your father is competent then he is able to change his health care proxy at anytime. If the health care proxy has been invoked then your father is unable to change it.

**Q: My sister is older and should not be driving. I drove with her last week and it was scary. She will not give up driving, is there**

**anything I can do to stop her from driving?**

**A:** In MA you can call your sister's doctor and ask them to call the Department of Motor Vehicles. The other idea is to have your sister take a driving test through a driving program that is specific to seniors. This program tests reflexes, memory, and other skills related to driving. If your sister takes the test and does not pass she will need to surrender her license at that time. It is important to gingerly bring up the subject but the driving test is an objective way to know if your sister should be driving. This is a delicate subject that is very emotional. If your sister loses her license then a substitute driver or local transportation needs to be arranged instead of your sister driving herself.