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ELDERCARE RESOURCE SERVICES



INFO@ELDERCARESERVICES.COM
WWW.ELDERCARESERVICES.COM
"HELPING YOU HELP YOUR LOVED ONES"

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ACTIVITIES FOR THE PERSON WITH DEMENTIA

For people who have dementia who are at home as the disease progresses, it becomes more difficult for them to occupy their day. The caregiver often takes over that role.

Studies have shown that a daily routine is important and that can include an activity. For other people with dementia their routine can consist of listening to music or watching the television. But for people who want to bring in an activity, here are a few suggestions. Depending upon where someone is with their dementia affects what activities will work or not work.

Cards: Play crazy 8's or a matching game.

Poker chips: Ask someone to put like colors together. This can be done on other days.

Crossword puzzles: Maybe large print and one that is very easy. Sometimes doing these puzzles together is a time to reminisce and spend quality time with the person.

Baking: Buy a prepared mix such as a cake or brownies. Depending upon the memory loss they can put everything together and someone would add the egg and only the mixing spoon to the person with dementia. Consider purchasing prepared dough, cutting the dough, and placing the pieces on the cookie sheet. Have the person lay out the cut up dough. The house always smells so nice when there is a cake in the oven and eating the treats is great.

Beading: Beads come in different shapes. Bracelets and necklaces can be made with help or some-

times without help.

Games: Some board games can be fun, such as games for young kids. Decide on the board game depending upon the memory loss.

If the person likes to garden purchase some clay pots and paint them. Put plants in them and put them around the house, or give as gifts to family members.

The idea is that activities need to achieve something that someone can do and feel accomplished and proud of. It should also be fun. Sometimes sitting together and doing any project is a good time to reminisce about the good old days, children, family, etc. Keep the topics light with good memories.

ABOUT US

ElderCare Resource Services is a certified aging 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 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'

SAVE THE DATE

On Saturday October 27th at the Callahan Senior Center in Framingham, Greg O'Brien will be the speaker. This is being presented by The Metro-West Alzheimer's Partnership.

There is no charge to attend.

Greg has Alzheimer's and has written a book called On Pluto: Inside the Mind of Alzheimer's. Greg was diagnosed with Alzheimer's disease in 2009. Prior to his diagnosis Greg was an

author writing for The Cape Cod Times, Huffington Post, Providence Journal, and The Boston Globe. He began by first videotaping his daily life and then decided to write a book about his journey.

Listening to Greg he is able to talk about what it is like to wake up and not know what to do and where to go.

He finds humor in his stories and shares them with his audience.

The presentation will be uplifting and sad at the same time. Greg openly talks about the struggles. He is aware of the progression of the disease and has thought about his ending.

"It's not a book to proselytize; it's a book to awaken people to the journey we all take."

Contact the Alzheimer's Association at 617-868-6718 to find out more about this event.



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Aging Life Care Association

UPDATES AND INFORMATION

It is possible that next year there will be a new fee structure for doctor's who accept Medicare. What is being proposed is called a flat fee system. This would mean if a doctor spent 15 minutes with a relatively healthy patient and someone else spent 30 minutes with a more complex patient they would both be paid the same amount. With this plan a primary care physician or a specialist will receive the same fee for seeing a patient.

Physicians could withdraw from the Medicare program or limit the number of patients they see who have Medicare.

Often times HMO's follow what Medicare is doing and this could also affect younger people. CMS is accepting public comment through September 30th. If approved this would go into effect January 2019. Read more at:

<https://www.npr.org/sections/health-shots/2018/07/27/632473673/some-doctors-patients-balk-at-medicare-flat-fee-payment-proposal>

The new Medicare cards have started to be mailed. Many people are receiving them in this area. This new number needs to be given to all doctors, labs, etc. Your Social Security number stays with you; your Medicare number is now no longer connected to your Social Security number. The new number was a result of potential fraud.

Physician Compare is one way that you can look up your doctor and find other physicians.
<https://www.medicare.gov/physiciancompare>

The MA state budget was signed by Governor Baker. There is a cap of 20 days out of the Nursing Home on a medical leave. If out of the Nursing Home on a non-medical leave the cap is 10 days per calendar year for anyone on Mass Health.

On Nursing Home funding—it is being maintained at \$7.5 million and there is an additional \$12.8 million is SFY 2019—\$2.8 million added to the \$35.5 million direct care add on, and \$10 million in reimbursement for quality nursing care.

Governor Baker signed H4116/S.2612 bill on Aug 9th. This bill creates a state plan to address and assist in the treatment of Alzheimer's disease. Advisory councils will be developed including 2 people with Alzheimer's disease, 2 health care providers, 2 people in research, 2 voluntary reps including 1 from a state Alzheimer's disease organization and one rep from a state-based advocacy organization that provides service to families and professionals.

FREQUENTLY ASKED QUESTIONS

Q: My mother had hip surgery after a fall. The surgery went well but she has had one medical issue after another. She is now experiencing cardiac problems. First it was too much fluid in her body after the surgery maybe due to the IV's and now she is in cardiac failure. My mother was fine before the surgery. Is this related to the surgery or just a problem that was never noticed before?

A: That is a very good question. You could consider calling your mother's primary care physician and talking with the doctor asking if there were any signs of cardiac problems. Many people do well during surgery but afterwards have medical issues. There are many studies that have concluded that there is a high mortality rate within one year of a fall and hip surgery. The studies look at health prior to surgery and health

after surgery. Whether it is the stress of the surgery or the medical issues were not uncovered prior to surgery, what you are describing is very normal. Another unknown, did the fall occur because of a cardiac problem?

Q: My father and mother never got along well as a married couple. They argued and did not support each other. Now as they age it has become more challenging. Each of my parents want attention and if one of them is sick the other one feels neglected. My siblings and I think we should just move them from their house into an Assisted Living with two different rooms, or sometimes we talk about two different locations. Any ideas?

A: This is challenging for every-

one. As people age it is normal to become self focused on themselves. Many seniors worry about their health, who will be there for them, and what if this is the one thing that will cause my death. With two people living under the same roof the atmosphere intensifies. However, part of what you describe is your parents norm. Are they complaining about each other and do they want to move out of their home to two different rooms or two different facilities? Consider bringing a clinical social worker into the house to address and talk with your parents. If possible you need to talk with a social worker and find ways to halt a conversation that you know is heading downward. You also need help to find ways to change the subject. It is not easy to make a change.