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ELDERCARE RESOURCE SERVICES



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"HELPING YOU HELP YOUR LOVED ONES"

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MEDICATIONS

It is important that all medications are reviewed with the primary care physician in addition to all specialists. All medications include over the counter medications and herbal remedies. Certain herbal medications can effect prescription medications. Prescription medicines can loose also their effectiveness. Keep a list of all medicines that you take on your refrigerator and bring that list to all physician appointments. Return the list to the refrigerator. Give the same list to a family member who can then hand it to the emergency room physicians. Keep the list current. It is also important to have any and all allergies listed on

the medication list in red and bold lettering. Watch expiration dates of medications that are not used often.

Clean out the medicine cabinet once every six months, throwing out old or expired items.

Do not give medications to friends or family members, reducing the amount available that you take. Reductions in dosage can have negative affects even causing someone to go to the hospital.

If hospitalized it is not uncommon to see medications change. Once home, review the changes with the primary care physician.

WHAT IS NEW?

The JIMMO settlement is not new but there are still many people that are unaware that this settlement can allow a senior to be 'maintained' under Medicare benefits for 2-3 weeks, to observe that there is no relapse. Seniors living at home with chronic diseases can now have Medicare coverage for services to allow someone to return to their former baseline. In some situations a new baseline will be defined. The same requirements are still in place: in order for Medicare to cover for rehabilitation in a skilled facility, the three mid-night rule still applies. The hospital must 'admit' not 'observe' the senior at the hospital.

ABOUT US

ElderCare Resource Services is a geriatric 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 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'

THE SUMMER'S HEAT

Heat during the summer can cause anyone to become dehydrated. Seniors do not sweat or feel hot therefore they do not feel they need to consume more liquids. Seniors will wear sweaters and feel cold with air conditioning. If the appetite decreases and less

food and liquids are consumed, the risk increases for dehydration and a possible hospitalization. Foods such as watermelon, cantaloupe or other melons offer liquids without drinking from a glass. Popsicles or jello, are other ideas. Keep a glass filled with liquids

near a favorite seat. It is easier to take a drink if it's close by rather than walk to the kitchen to get one. If there are changes in memory loss, an increase in confusion, delusional or hallucinatory thoughts, contact the primary care immediately.



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

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FREQUENTLY ASKED QUESTIONS

Q: My mother becomes upset every afternoon looking for her mother. Her mother is deceased. I do not know what to do to redirect my mother?

A: Sometimes it is very difficult to redirect. This is where “fiblets” can be the key to your success. Tell your mother that her mother called and is out shopping and is not home. She called to say she is running late and will call when she is at home. If that does not work then think of something that will provide support and comfort to your mother. She will forget what you say and you will need to remind her again and again. Also, consider giving her a stuffed animal to hold, or a doll, or listen to music, etc. You may need to contact the physician to discuss the use of medications as well. The late afternoon escalation of behaviors is called sundowning. It is very common with sen-

iors who have a diagnosis of dementia.

Q: My father lives in an Assisted Living facility and we were told by the Assisted Living that we must hire private duty help for my father. If we do not hire help and if he has any negative behaviors they will send him to the hospital. Do they have the right to make us hire help?

A: In MA the Assisted Livings are able to make their rules and admit and keep residents that they choose. There are regulations for Assisted Livings on how to operate but the day to day operations are left up to the Administrative staff. Some Assisted Livings are more tolerant when a senior sundowns or has some agitated behaviors. Your father could be at risk of hurt-

ing himself or hurting another resident or staff and the safety of everyone is the primary concern of an Assisted Living. The Assisted Living does not want to have an incident.

Q: My two single aunts live together and they are in their 90’s. I worry about them. My aunts have not seen an elder law attorney and does not have a will or has expressed to us their wishes for end of life. They both refuse to discuss it when I bring it up. Any ideas on how I can bring up this tough subject?

A: In MA and MN there is a non-profit organization called Honoring Choices. If you google it you will find information and there are ideas on talking points. Consider talking with their doctor prior to the next appointment and maybe he/she can bring up some discussion points.