

# A Caregiver's Guide for Changes & Aging

RESOURCE

COUNSELOR

ADVOCATE

FRIEND





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**Creative Care Management (CCM)** is a professional story and a **personal story**.

Charlotte Bishop started CCM more than 20 years ago. Soon after that Charlotte's husband was diagnosed with brain cancer. Charlotte became her own spouse's personal case manager until his untimely death three years later. This personal journey evolved into a professional journey and certification as a Geriatric Care Manager (GCM) and the part of **CCM** dedicated to "Serving Elders and Others."

**Creative Care Management** is a team of certificated professionals providing answers to older adults in Illinois and their families.

# Maximizing Everyone's Independence

## *This is Not a Road Map*

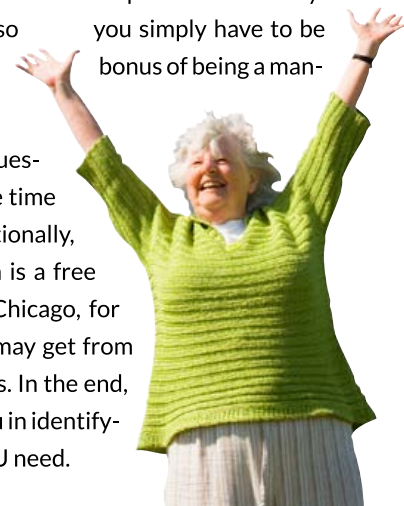
Independence is as much about the caregiver as it is the older adult or other individual who receives care. The goal of a Geriatric Care Manager is to optimize independence for seniors or others with special needs as safely as possible, for as long as possible and with the maximum quality of life for the whole family. In a previous white paper, I briefly discussed some ways to make home safer and more secure for the older adult. There are a host of other services available to help keep the house in order, food on the table and mom or dad living well. You can look to support in light and heavy housekeeping, sidewalk and grounds services or having meals delivered. If more personal care is needed, home health or companion care are available.

Yet there is another important factor to consider - your own needs as a caregiver. Being a caregiver to an older adult or someone with special needs can be a significant drain physically, financially and emotionally. Keep in mind what you need to relieve these stressors in order to best take care of mom, dad, or another loved one.

In my experience, I find it is important to make a connection with someone with whom you can talk about the work and stress of caregiving. Then, you need to find help to relieve some of the work duties. The "right" independent or private workers can be hard to find, because you want to make sure they aren't a scam or that they are indeed certified. You want to know that your loved one will actually feel secure and comfortable with the caregiver.

I've seen, over the past twenty-plus years, agencies offer a number of inherent advantages over freelance individuals. Home-care agencies versus the independent individual - as you may find on your own - have the responsibility of bonding the aide, paying the aide's wages, taxes as well as insurance if they become hurt on the job. They also know what kinds of people are well-suited to this kind of work so that you have an optimal chance of getting someone who is capable and has staying power. The agency, then, is also the manager, so you simply have to be attentive to your older parent without the added bonus of being a manager as well.

As you look to the agency, you should ask a lot of questions, including, "Will this added help allow me the time to care of myself, physically, emotionally?" Additionally, do your own research at your local library, which is a free resource. There is the Senior Citizens Guide to Chicago, for instance, and other similar publications that you may get from your city hall or even drug stores or grocery stores. In the end, just getting a sense of what is available will help you in identifying what your loved one may need ... and what YOU need.







# Planning for the UNEXPECTED

December may represent the season where we hear about “making a list... and checking it twice.” My kids think I get a little too carried away making lists, but having the right list at the right time can save the day when the unexpected occurs. Life has a habit of throwing the unexpected at us, but even then we can be prepared. As a geriatric care manager, I regularly coach families of an older loved one or someone with special needs in list-making, especially if that loved one lives alone. In an earlier blog entry, I started with a list of activities of daily living to use as a way to inventory the functional capacity of a loved one. Once we see the deficits it becomes easier to develop an action plan.

But think ahead to the phone call you may one day receive about your loved one having fallen or suffered a stroke or some other debilitating incident. The first responders or a neighbor may know enough to call you, but now you have to be the voice for the incapacitated loved one. Do you know their meds and daily doses? Do you know where they keep their medications? Do you know who their primary care physician is or if they have a cardiologist, neurologist, or other health care provider who should be called?

*Make copies of insurance cards, keys, electronic openers, combinations, and more. To avoid confusion, make sure to label keys, so that if access is needed immediately, you'll be prepared.*

Your responsibility is to plan ahead...hopefully for an event that will never happen. A vital step to this is creating a list of key telephone numbers and other information for your loved one. Write down a list for yourself to keep in your home and at work that includes emergency contacts as well as neighbors, relatives, clergy and others who will need to know. It can also be helpful to notify close friends so that if a hospitalization follows the incident, your loved one will have the benefit of visitors.

Make copies of

insurance cards, keys, electronic openers, combinations, and more. To avoid confusion, make sure to label keys, so that if access is needed immediately, you'll be prepared. You also should have access to any legal documents like the advance directives I mentioned in an earlier blog. And if your loved one has been living alone, you may need to know the telephone contact information to stop newspaper and mail deliveries as well as when the rent/mortgage and other bills are scheduled to be paid.

Having gone through just this short list may now give you a headache as well as a sense of why I think it is important to keep lists. Write it down!





## A CASE IN POINT:

# The 'Talk' about Giving up the Keys

There are numerous transitions that challenge older adults and their children. High on the list are refitting a home to accommodate the diminishing capabilities of an older adult who still can live independently. Previously, I have talked about how to make the decision to move to a senior residential facility and leave home altogether. Now, I would like to share with you some suggested steps you might consider as you have "the talk" about your older adult's driving.

**1** The first step for you as a caregiver anticipating this conversation is to simply think concretely about how you would like to be approached with the subject. This is a real role reversal in the parent-child relationship, and it requires sensitivity. Considering this, it may be helpful to think about how you would want to be approached if you were in your parent's shoes. You may also recognize that this is not just a conversation you can have with your parent, may be with the aide of your siblings who may step in or you fall back on "Plan B."

**2** If you are going to go down this path, step two could be to introduce your elder into the role of not being their own driver all the time. Invite them to go shopping with you or out for a lunch where you pick them up. You can enlist others who are in their orbit to similarly help ease them into riding along on outings instead of being the one who always drives. It helps to make it more natural for your parent to see themselves in something other than the driver's seat.

**3** Help your older parent to automate their lives more with automatic bank deposits or bill payments. There also are home delivery options available for everything from cleaning to groceries to pharmaceuticals. It is even easier if the computer and access to the web are part of this picture. Check out and make available public transportation or taxi services in their area.

**4** Now comes "the talk." You can weave in questions along the way about how they feel everything has been working, and it also is important to appreciate that this will take more than one installment. Be patient and gently encourage them to recognize the physical or cognitive limitations that have encouraged you to bring up the topic as well as the risk to themselves as well as others should there be an accident. Appreciate that in the end it has to be their decision. Help them to set a date, but don't force the issue. If they fail to keep a commitment to deadlines more than once, you may have to enlist the help of their physician or clergy member if they have one (This is Plan B).



# BECOMING EDUCATED ABOUT ELDER RESOURCES



Making decisions on behalf of a loved one is not always easy. Yet the challenge can be eased with information. The most common questions I get as a geriatric care manager revolve around:

1. WHAT SHOULD A CAREGIVER DO TO ADDRESS A LOVED ONE'S NEED?
2. HOW DOES ONE MAKE CHOICES AMONG ALTERNATIVES TO HELP A LOVED ONE?

To help with both of these decisions there are a good many free resources available to everyone. Your loved one may be in Chicago and you may live in Nashville, but you can get good information from all your own nearby healthcare providers, legal advisers, financial consultants, or other experts. These individuals should be able to direct you to their own national member organizations or associates they know in another city. You can also do in-home research at the click of your mouse. I have found a web site called senior citizen's guide (<http://www.seniorcitizensguide.com/>) to be really helpful. It has city by city listings of health, housing, services, and activities by most major metropolitan areas. Even if your loved one is in a smaller community miles away, one of these metropolitan centers can be very helpful starting places in directing you to allied services within your target geography. Just contact them. Or contact a local public library and ask for the reference librarian.

Local hospital discharge planners can be very helpful, because it is their job to get at least medical help for individuals who are preparing to return to their homes after a hospital stay. Just remember that their job ends at the hospital door for discharged patients, so they do have limitations. Here are some \*WEB resources to start:

National Association  
of Professional Geriatric  
Care Managers  
[www.caremanager.org](http://www.caremanager.org)

AARP  
[www.aarp.org](http://www.aarp.org)  
Senior Options  
[www.senioroptions.com](http://www.senioroptions.com)

Eldercare Web  
[elderweb.com](http://elderweb.com)



## CCM, Inc. can be there when you can't

We are the professionals who help families who are caring for older adults (geriatric care management) or others with special needs. Our professional geriatric care managers and special needs case managers can be your eyes and ears when you simply cannot. You can count on us to help you manage both your care-giving responsibilities, and those of your family and your work that cannot be ignored...or postponed. Some of our clients refer to us as their Sister in Chicago<sup>SM</sup>.

We serve Chicago's North side and the North, Northwest and West suburbs as well as Central Illinois.

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