



TOMPKINS COUNTY
OFFICE FOR THE AGING
Aging Better, Together



Spring 2019
Vol. 32 Number 1

In Support of Caregivers

A Publication of the Caregivers' Resource Center and Alzheimer's Support Unit at the Tompkins County Office for the Aging

In this issue:

- *Note from COFA**
- *Spring Powerful Tools Class**
- *News and Notes**

- *Spring Caregiver's Workshops**
- *Financial Questions to ask**
- *Tips on Organizing a Move**

Note from COFA:

We'd like to update you on a recent staff change. Caryn Bullis, who previously worked on the Project Care program has taken another position within COFA. Dawn Sprague will be taking her place and will be the new Coordinator for Project Care. Please reach out to Rodney or Dawn with any questions. Thank you!

Rodney, Caryn and Dawn

Local Caregiver Support Services

Caregiver's Resource Center & Project Care Services

Tompkins County Office for the Aging
Rodney Maine 274-5491
Dawn Sprague 274-5499

The Caregiver's Resource Center & Alzheimer's Support Unit offers family caregivers information, consultation services, workshops, this newsletter and a lending library of books on family caregiving topics. Stop by or call for an appointment.

Volunteers with Project CARE offer caregivers a needed break and helps in other ways as needed. We may also be able to arrange for paid home care services or short-term respite for stressed caregivers having difficulty paying for those services. Call Dawn to discuss your needs.

Caregiver Counseling *Family and Children's Services*

Ann Dolan 273-7494

A caregiver counselor will meet with family caregivers periodically in her office to help them work through complex caregiving issues or provide emotional support. Special circumstances may be considered for in-home service. No charge. Donations accepted.

Adult Day Program
Longview Adult Day Community
Monday through Friday, 9am-3pm
Pamela Nardi 375-6323

Adult day programs offer older adults companionship along with planned social and recreational activities. It often provides a break from caregiving and time for other matters. Fee: \$55/day includes lunch and snack.

Support Groups



Caregiver Support Group
3rd Tuesday of each month
6:30pm-8:00pm

Family & Children's Service
127 W. Martin Luther King Jr./State St., Ithaca

Facilitated by Ann Dolan, LCSW. Especially for caregivers of older adults. Call for information, 273-7494, before attending first time. Please ring buzzer located next to the front door for entry.

Cancer Caregiver Group
2nd Tuesday of each month
5:30pm-7:00pm

Cancer Resource Center
612 W. State St., Ithaca

For family, friends, and caregivers of individuals with Cancer. Call 277-0960 for information.

Parkinson's Caregivers Group
1st Monday of each month
11:00am-12:30pm
Office for the Aging

Call the Office for the Aging, 274-5491 for more information.

Alzheimer's Caregiver Groups

1st Wednesday of the month at 5:30pm

Lifelong, 119 W. Court St., Ithaca

For additional information call the Alzheimer's Association at 330-1647.

3rd Wednesday of the month at 12:30pm

Walden Place, Cortlandville

For additional information call 756-8101. Companion care for your loved one is available during the meeting.

Feeling Stretched?

Let's Face It...

Caring for someone with illnesses such as dementia, heart disease, Parkinson's disease, stroke, or chronic cancer can be stressful physically, emotionally, and financially.



Balance Your Life

Powerful
Tools
for **Caregivers**

Spring 2019

Powerful Tools for Caregivers Class

Powerful Tools for Caregivers is a six-week educational program designed to provide you with tools you need to take care of *yourself*.

You will learn to:

- Reduce stress
- Improve self-confidence
- Better communicate your feelings
- Balance your life
- Increase your ability to make tough decisions
- Locate helpful resources

The program consists of 90-minute class sessions offered weekly for six consecutive weeks.

This class is offered free of charge to those caring for spouses, parents or other adult relatives/friends. (*It is not intended for professional caregivers.*)

Thursdays, March 21—April 25
1:30 PM—3:00 PM
at Kendal at Ithaca
Staff Development Center
2230 N. Triphammer Rd., Ithaca

Register as early as possible as class size is limited.
To register or inquire about the program, call the
Tompkins County Office for the Aging:
607-274-5482

SPRING WORKSHOPS

Food and drink will be provided!

Dementia Conversations

Wednesday, April 17, Noon-1:30pm

at the Office for the Aging, 214 W. Martin Luther King Jr./State St.

Presenter: Alzheimer's Association of CNY

Dementia Conversations is not a traditional dementia education program. Rather than teach about the changes that come with an Alzheimer's or dementia diagnosis, this program focuses on how family members and friends can have effective conversations with someone who either has Alzheimer's or other form of dementia or show signs of cognitive decline. The program provides strategies to discuss obtaining a diagnosis, driving, and legal and financial matters. This interactive workshop features videos of people with Alzheimer's disease and leading experts sharing tips on how to have these chats. Register for this workshop by calling 274-5491 or email rmaine@tompkins-co.org

Legal and Financial Planning

Wednesday, May 15, Noon-1:30pm

at the Office for the Aging, 214 W. Martin Luther King Jr./State St.

Presenter: Alzheimer's Association of CNY

The diagnosis of Alzheimer's disease makes planning for the future more important than ever. Concerns about care provision and programs that can help offset costs mean that families need accurate information about legal and financial planning specific to the disease. Legal and Financial Planning for Alzheimer's disease is an interactive two-part program where you will have a chance to learn about important legal and financial issues to consider, how to put plans in place, and how to access legal and financial resources near you. Register for this workshop by calling 274-5491 or email rmaine@tompkins-co.org

6 Steps to Organizing Your Parent's Move (Without Getting Disowned) By Lisa Trottier

Step 1: Get the whole family on board

Moving an older relative from his family home to a new--and usually smaller--residence is labor intensive for you and emotionally disruptive for him. Tempting though it may be, it's not a good idea to "surprise" a family member by sorting through his stuff when he's not around. If you try to make an executive decision about his belongings, chances are, you're headed for a run-in with him or others in your family.

To help prevent emotional flare-ups and ensure a smooth process, schedule a meeting with the whole family, if possible, to discuss the plan of attack well ahead of the move-out date. (If you can't get together, do it by phone.) Hash out some guidelines: Under what circumstances will you call each other on "keep or discard" decisions? When will you consult the person who's moving? What key possessions would you and your other family members like to keep in the family?

Encourage the person who's moving to actively participate in decisions. For example, adult children often want to throw away old furniture and buy newer, more attractive pieces for their parent's new home. But the parent should be able to pick what comes with them, says Dollar. "Let them take their own furniture if they want to--they know what will make them most comfortable in their new home, and sentimental value often counts for more than aesthetics."

Step 2: Work slowly when packing up--think months, not days

Your relative's home is more than just a roof over his head: It's the place where he feels most comfortable, a museum of his memories and life stories. Complicating matters, if he lived through the lean Depression years, chances are he's spent a lifetime saving and collecting. Decades of squirreling away can add up to a house that's packed floorboard to rafter with stuff. As you begin organizing for a move, keep in mind that seemingly worthless belongings may have huge sentimental value for him, and he'll need time to sort through his things on his own terms. Try to resist the urge to execute the move as quickly as possible.

"It really needs to be a three-to four-month process. You need to give an older adult time to go through the love letters, the report cards, and the photographs from the Grand Canyon,"

says Jacqueline Dollar, a geriatric care manager in Des Moines, Iowa. “It’s a wonderful chance to go back and reaffirm the full, productive life that he’s had.”

Step 3: Get real about the size of your older relative’s new place

“In almost every case I’ve been involved with, people take more stuff than will fit in their new space,” says Gayle Grace, a moving coordinator in Oakland, California. “Many times, I’ve been called back in to help do more weeding out after the move.”

Avoid this situation by first getting a sense of how much square footage and storage your relative will have in his new home. What he can keep will depend on how much room you have to work with. Getting realistic about space constraints up front—even sitting down with him to sketch out what can go where—will help force some of the harder decisions about what to get rid of.

Step 4: Work room by room when organizing the move

Take on one room—even one drawer—at a time. Evaluate the items one by one and sort them into piles located in separate rooms in your relative’s house: one for items to move to his new home, one for those you and other family members might be interested in keeping, one for those to keep in storage, one for those to donate, one for those to sell, and one for those to throw away.

If your thrifty relative is uneasy about tossing anything, donation may be the way to go. Many organizations will arrange a pickup at his home; check your local charities (salvationarmyusa.org, redcross.org, goodwill.org) for pickup policies. Tip: Be sure to get a receipt so he can deduct the value of the donation on his next tax return.

Furniture and belongings that will go with your relative to his new home should be labeled with their specific new location (living room, kitchen, bedroom) and mapped out on a floor plan of the new home so that the movers know exactly where each item goes.

Step 5: Accept your relative’s choices about what to keep

“It can be difficult for a child to understand why her father wants to take a bowling ball with him when he’s not in any condition to bowl again,” says Dollar. “But clearly that bowling ball means something to him, and he should be able to take it with him.”

Obviously, you’ll have to make some hard choices about what will and won’t fit into his new home. If he insists upon keeping more than will fit, you can try to find storage in another relative’s home to ease his anxiety. However, there are limits. “If your mother wants to keep her antique spoon collection, she may have to relent on other nonessential items,” says gerontologist and home sale expert Cathie Ramey of Walnut Creek, California.

When push comes to shove and your relative is still unwilling to get rid of something, it can help to suggest an alternate route. Taking a photo of the item, keeping a few pieces of a large collection, or finding a good home for a beloved chessboard are some ways to do this. No one wants to see their belongings tossed into a dumpster.

The bottom line is that you'll need to be patient with your family member and allow him to adjust to the changes. If the tension between you has stalled the project, consider calling in a professional to assist you. Professional move managers specialize in assisting older adults and their families with the emotional, physical, and organizational aspects of relocation. You can find a professional in your area on the National Association of Senior Move Managers website.

Step 6: When all else fails, move first and purge later

For any aging person, moving is a loss, says Dollar. "It's a loss of familiarity and personal things—and it's really tough emotionally." If your family member is showing his anxiety by clinging to every last Tupperware lid, you may need to get him moved first and worry about purging the nonessential household items later. "After he's been in his new home for six to eight weeks and he's settled in and removed himself from the old environment, it's much easier to get rid of things."

Lisa Trottier is a journalist whose rich background includes writing or editing on topics such as family issues, lifestyles, travel, food, and health for San Francisco magazine, Via magazine, and other publications.

Article reprinted from www.caring.com and can be found at www.caring.com/articles/moving-older-relative-organized

Financial Questions to Ask your Aging Loved Ones



Managing your own money isn't easy under the best of circumstances, so it's not surprising that most people feel overwhelmed when it's time to step in and take over the management of their parents' finances. The first step is to accept that you won't know what kind of shape their finances are in until you ask. Money is always a sticky topic, especially for adults who are beginning to lose their independence, so it is best to approach the discussion fully prepared to ask the right questions.

Finding answers to the following questions will put you on the path to becoming a more confident, and more capable guardian of your loved ones' financial future.

1. "Do you have a durable power of attorney?"

The durable power of attorney (DPOA) is considered one of the most important personal legal documents for any older adult to have. Along with a healthcare proxy, it will give whomever your parent designates — whether it be you, one of your siblings or someone else — the

power to make financial and legal decisions (or, in the case of a healthcare proxy, to make medical decisions) if your parent is incapacitated.

Without a durable power of attorney in place, you'll have to go to court to get appointed as your parent's guardian. That's the last thing you'll want to have to think about in a time of crisis, and it's a notoriously complicated and messy legal process. With a durable power of attorney and healthcare proxy in place, you can seamlessly make decisions and access accounts on your parent's behalf without getting the courts involved.

2. "Have you updated your will, insurance and retirement account information recently?"

Many people never take another look at their insurance policies or investment account beneficiary designations after they sign the initial papers, but both should be reviewed every year. Beneficiary designations — of who will receive the proceeds from an account if the policy or account holder dies — can be affected by any change in family circumstance, like the birth of a new child, a death or a divorce.

A yearly financial and insurance review also provides a good moment for your parent to review his asset allocation and evaluate whether he has enough, or too much life insurance. If, for example, his children are grown and his spouse has other funds on which to live after he's gone, your parent could think about cutting back on the amount of life insurance he carries to save money on annual premiums.

3. "Do you have plans or insurance in place to pay for long-term care if it's needed?"

Even if your parent is in good health today, eventually, he'll likely need some type of long-term care — and the costs are staggering. A year in a nursing home costs more than \$50,000 on average, and much more in some states. Usually, neither health insurance nor Medicare cover any of these expenses, so your parent should have some type of plan in place to pay for such care should it be needed. Long-term care insurance is a good option and can be added to existing life insurance policies, possibly at a discounted rate.

Medicaid also covers some nursing home costs, but your parent should consult an elder-law attorney now to find out if he qualifies for Medicaid. If not, the attorney may advise spending down assets — literally, the process of spending money without gifting or transferring assets until your parent meets the strict income requirements necessary to qualify for Medicaid. Without a plan in place to pay for long-term care, you and your siblings will be on the hook to pick up the cost unless your parent has very deep pockets.

4. "Who's advising you?"

Although most adults are fiercely private about their finances and want to maintain their independence, it's important in case of an emergency that you know how to contact your

parent's attorney, financial advisor, accountant and insurance agent. At the same time, as your parent ages, you can keep an eye on whether his financial and legal advisers are scrupulous, objective and well-versed in elder financial issues, with no vested interest in selling specific products. Getting the details on exactly who is advising your parent is a good way to protect him from scams, as well as to ensure that he has funds in case of an emergency.

5. "Where is all this stuff?"

If your parent has a stroke or heart attack, the last thing you're going to want to worry about is what his Social Security number is, what health insurance he has or whether the mortgage has been paid. That's why it's important to sit down with him before a crisis hits and find out what kind of bill-paying system he has in place, what insurance he has and where all his important papers are located.

Although some may balk at sharing this kind of personal information, reassure him that you don't have to see any of his private papers now; you only need to know where they are to ensure his financial well-being in the event that he's not able to take care of it himself.

Reprinted from Caring.com and can be found on their website www.caring.com

What Every Dementia Caregiver Must Know

With over five million people in the US with Alzheimer's/ dementia today and this number expected to grow exponentially every year, it is of vital importance to empower the family and professional caregivers with support and dementia care skills. Providing care that yields positive outcomes for both the person living with Alzheimer's/dementia and the caregiver is very important and challenging. To help, I provide a few things every Alzheimer's/dementia caregiver must know.

1. Obtain the necessary help and support

Whether a family or a professional caregiver such as a nurse, aide, or therapist, it is important to establish a dementia management team for expertise and emotional support. For example, the family caregiver should never feel or be alone. An important first step is to join a support group. The Alzheimer's Association usually has a local list available and if needed, many of these groups make it easy to attend with your loved one with Alzheimer's/dementia. They may offer an early stage group that is held at the same time as the family support group or they may have an activity for those with Alzheimer's/dementia during the family support meeting. Also, the family caregiver should use the many professional resources available to

receive critical advice and guidance throughout the journey. For example, there are Alzheimer's diagnostic centers available to make a diagnosis and to provide medical treatment. In addition, that physician or a primary doctor may be able to refer an Occupational Therapist (OT) who specializes in dementia care. The OT can perform an assessment of the person with Alzheimer's/dementia, analyze the caregiving and living environment situation, and provide ideas and education to improve safety, functional independence and quality of life. These are two examples of valuable resources that family caregivers must tap into early and often.

Similarly, professional caregivers and other healthcare workers shouldn't provide dementia care in isolation, but instead, must use each other as a resource of knowledge, problem solving assistance, and emotional support. For example, the nursing aide should never be left alone to problem solve how to manage resistance to care or aggressive behavior expressed by a client with Alzheimer's during a shower. Instead, the aide should have a method to communicate with his/her team members about the challenge in order to obtain support and to discover a solution. The dementia management team should include the Occupational, Speech and/or Physical Therapist, the physician, the nurse and others involved in the care of the resident/client.

Family and professional caregivers often experience stress and feelings of being overwhelmed or uncertain. Therefore, creating dementia management care teams in a facility or in the community is essential for all who are involved in providing care for those with Alzheimer's/dementia. The emotional support, advice, and knowledge derived from a team are critical for all caregivers to be as successful and stress-free as possible.

2. Learn how to deliver dementia capable care

The 1997 Alzheimer's Association publication "Key Elements of Dementia Care" identifies developing staff to become dementia capable as one of the key factors for quality dementia care and calls this a human resource guiding principle stating:

"Staff members are appropriately trained in the various components of Alzheimer's/dementia care, and have ongoing opportunities for education and support. Staff should also demonstrate dementia-capable skills and knowledge before caring for residents with dementia."

Let's examine what I have found to be some of the key components of dementia capable care and describe how each should be applied by the professional or family caregiver to facilitate the best outcomes.

Component 1: Stage Appropriate Compensatory Care

To enhance functional independence and emotional well-being, the caregiver must understand the dementia stages and how to provide compensatory care, meaning: Change the approach to gain the trust, agreement, and understanding of the person with Alzheimer's/dementia, change the environment so it is supportive and not a hindrance or distraction and simplify the activity to the just right challenge level. At each stage, there is a certain amount of compensation that needs to occur. At the more advanced dementia stages, there is more compensation and assist needed. This is similar to the fact that a parent needs to provide more care and adaptation for a younger child.

Component 2: Dementia Capable Communication

The caregiver must understand how to communicate with the person with Alzheimer's/dementia. Simple communication modifications are necessary to increase understanding such as:

- Wait for a response
- Take a complex situation and make it simple by breaking it into one step directions
- Use visual or hand over hand cues with words

Component 3: Dementia Capable Behavior Management.

The caregiver must know how to reduce the prevalence of negative behaviors. This begins with knowing that the vast majority of negative behaviors expressed by a person with Alzheimer's/dementia have a reason or trigger and that behavior is most often simply a communication of an unmet need. Typical reasons for a negative behavior may be unmanaged pain, loss of control, fear, or boredom. The caregiver must have the ability to observe the situation and behavior to try to discover the trigger.

A good approach to behavior analysis is the use of the "w" questions. Ask, "who" is present during the behavior, "what" is occurring, and "where" and "when" is the behavior occurring? This may show a pattern that leads to identification of the behavior trigger. For example, a young child may always have a behavior meltdown during a stressful day in which there was more than the usual activity that led to missing a nap. The parent observed that every time the morning nap was missed, the child had a tantrum or was very resistive and cranky in the afternoon.

Similarly, I have found that those with moderate/severe dementia "sundown" more often or more severely when the stress of the day was higher than usual. Once the causes of the stress were addressed, the sundowning ceased or was greatly reduced. Therefore, if the behavior is not causing an emergency situation, it is important for caregivers to take time and look for patterns that lead to identification of the likely reasons behind the behavior. When the trigger is addressed, it can reduce or completely eliminate the negative behavior.

As mentioned above, dementia capable care is not unlike child care as many of the basic principles of child care apply to care for elders with Alzheimer's/dementia. For example, for children (and for those with Alzheimer's/dementia), it is the caregiver that must change the world for the child to feel and be successful. In child care, the guide as to what and how much to adapt is the child's age. In the case of Alzheimer's/dementia care, the guide is the stage of dementia the person is functioning within.

Of course, there are many differences because we would never treat an adult like a child. Also, an elder has a history that deserves respect and an elder may feel shame in a way a child would not. While honoring these differences, it is very helpful to think about the many similarities. For example, a child at the age of two could participate in washing their face and brushing their teeth with much support and guidance from Mom or Dad. Mom or Dad will innately "adapt the activity to the just right challenge level" to facilitate a successful functional and emotional experience for that young child.

The following lists some of the adaptations the parent might make:

- Only have the items on the counter that are needed to brush their teeth or wash their face as anything else may become a distraction
- Simplify communication by giving a simple one step direction such as "put the brush under the water" while simultaneously guiding the child's hand through the motion
- Praise no matter how messy the activity
- Help complete brushing the child's teeth, reaching those areas that are particularly difficult or taking over if the child becomes overwhelmed or cranky

This is the same care approach and adaptations the caregiver would implement to enable a person in the moderate/severe stages of Alzheimer's/dementia brush their teeth successfully. In summary, while acknowledging and honoring differences between adults/elders and children, we can apply many child care strategies to Alzheimer's/dementia care.

3. Accept what is, celebrate the moments, and know that you are making a difference

Often, caregivers struggle to find the value and meaning of their interactions, care, and relationship. I believe this is so often the case because caregivers focus too much on what has been lost to the disease instead of what remains. In other words, if the person with Alzheimer's/dementia is not able to communicate "normally," can't remember what happened an hour ago, or can't engage in activity as they once could, then the caregivers struggle to find the purpose and value of the interaction or activity.

Again, we should take a page out of the child care playbook. Even though an infant or toddler has very poor memory and communication ability, and is very dependent, we view these children in a positive light and find the moments with them very meaningful and important.

Even though a young child is filled with infinite potential and an elder with dementia is in the midst of decline, it shouldn't diminish the immense importance of the activity and interaction with the elder. The situation is essentially the same, but it is our belief and perspective that is the real difference.

Of course, we must always remember that a family member bears a burden of having a history with their loved one with Alzheimer's/dementia and is likely in a process of grieving "the loss" and change. Therefore, even with the help of a dementia capable care team, it may take some time before a family caregiver can move through the stages of grief to acceptance. But, the professional caregiver has the unique advantage of "lack of history" and therefore enters the person's life completely in the moment, free of emotional baggage, and therefore is very capable of creating and celebrating meaningful moments, without harking back on what used to be.

A positive, in-the-moment perspective must envelop every care situation. Examples:

- It is true a person with Alzheimer's/dementia may reach a dementia stage in which they don't remember visitors, but it doesn't mean the moments spent during the visit weren't special and therefore valuable to creating quality of life.
- It is true that at some point a person with Alzheimer's/dementia may not be able to play a dice game with the same skill and expertise they once had, but it doesn't mean they wouldn't enjoy sitting at a table hearing the familiar sound of the dice rolling, or throwing the dice while others clap and encourage. It is the social and activity experience that matters, not winning the game.
- It is true a person with Alzheimer's/dementia may not be able to plan and tend to the garden in the expert way of days gone by; it doesn't mean they wouldn't enjoy planting one plant with caregiver assist, while feeling the sunshine on their face and hearing the birds sing.

Whether a professional caregiver meeting the person for the first time, or a family caregiver in a progression towards acceptance, we must never assume a life or a relationship has less value simply because it has changed. Instead, we must believe those with Alzheimer's/dementia have the potential to lead a meaningful life at every dementia stage if we help to create feelings of purpose and success through loving and supportive interactions and moments.

Summary

There is a fulfilling, rich relationship that can occur and be maintained between a person living with Alzheimer's/ dementia and their caregivers. The secret to achieving this has been shared above. Let's summarize:

- Caregivers can't care for their loved ones or their clients at the expense of themselves, but must instead seek out help, support and guidance so they never go it alone. The key is to create and be a member of a dementia management team.
- There is much a caregiver needs to know about how to care for those with Alzheimer's/dementia at each stage and it is called dementia capable care. It is not unlike the basic premises of good child care. Therefore, a person can quickly learn how to be a dementia capable caregiver by applying what is already known from child care, while always being mindful to never treat an adult like a child.
- Finally, all caregivers must learn to enjoy the precious moments spent with those with Alzheimer's/dementia. The disease should not be allowed to define life or relationships. With a positive perspective, there will be many special moments along the journey if the caregiver stops to see, hear and feel them.

By Kim Warchol, OTR/L, DCCT

Reprinted from www.caregiver.com

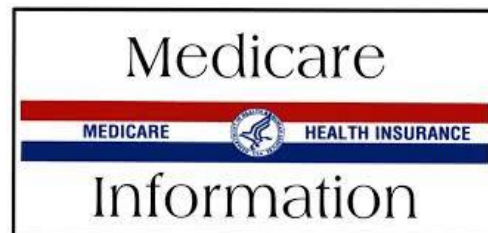
The Registry at FLIC

The Registry is a compiled list of private pay aides who have been screened through a face to face interview with the Registry Coordinator at FLIC. References are provided and verified to make sure the aide has the necessary skills and compassion that are important for someone to have when taking care of people in their homes. The Registry also contains a list of skilled nurses varying from pediatrics to palliative care.

For more information **contact Teri Reinemann at 272-2433.**

The Registry program is made possible through funding from the Tompkins County Office for the Aging and the New York State Office for the Aging.

NEWS AND NOTES



Mark your calendars! The Annual Senior Living Expo will be held on Saturday, April 13, 2019 from 1:00-3:30pm at the Clarion Inn (formerly the Ramada Inn). This event is free and sponsored by the Office for the Aging and the Ithaca College Gerontology Institute. More information on this event to come!

New in 2019, the Medicare Advantage Open Enrollment Period goes from January 1st -March 31st and replaces the Medicare Advantage Disenrollment Period (January 1st –February 14th). During this enrollment period you may switch from a Medicare Advantage Plan to another Medicare Advantage Plan or Original Medicare.



Free Tax Prep at Lifelong. All seniors age 60+, all individuals with disabilities, and individuals with incomes below \$33,000 and families with incomes below \$55,000. Returns are prepared by IRS trained and certified volunteers. Call 262-4136 Monday through Friday to schedule an appointment and talk to a tax screener.

Oral Health Tips for Caregivers

Do you take care of an elderly parent or other older adult? If so, remember that a healthy mouth can help them enjoy food, chew better, eat well, and avoid pain and tooth loss.

Plaque puts a healthy mouth at risk. It can collect on teeth that aren't brushed well. The buildup can cause bad breath, tooth decay, and gum disease.

Some older adults need to be reminded to brush and floss teeth. Others may need help actually getting it done.

You can take steps to help make brushing easier. For example, try a power or multiple-sided toothbrush. You can also modify the toothbrush handle to make it easier to hold.

If older adults need help, remember to wash your hands and wear disposable

gloves before you begin. Use the “tell-show-do” approach. Tell them what you are going to do, show them, and then do what you’ve described.

Regular dental visits are important too. At a dental visit, you can ask for ways to help the person you care for.

NIH has a series of facts sheets to help caregivers learn more about protecting oral health in older adults. To download, visit www.nidcr.nih.gov/caregivers.

How to Have “The Talk” About Medical Alert Systems with Your Loved One

We know how stressful it can be when your parent or loved one gets older. Often, they are reluctant to make small lifestyle changes, like using a medical alert service—even if it could save their life. Getting acceptance of a medical alert, or Personal Emergency Response System (PERS), can be tough—but it’s not impossible if done with understanding and focus on the bigger picture. These tips will help you have a conversation with your loved ones about using a medical alert system and creating a safety plan that everybody is happy and comfortable with.

1. LISTEN: Overcome objections by listening to understand what they are really saying. Present facts, figures and evidence that are harder to dispute than personal opinions. Like 1 in 4 Americans aged 65+ fall each year, of which 20% results in a serious injury. *

2. **FOCUS ON SAFETY:** Being prepared is key. Whether it's an emergency or not, a lot can happen when they're alone. Help buttons are for anyone and can be used for a variety of circumstances-not just emergencies.
3. **EMPOWER INDEPENDENCE:** Tech that connects family and aging adults gives everyone the freedom to be independent and do what they want to do without worry-go & know that

help is always available, and just one button away.

4. **INSPIRE CONFIDENCE:** When there's a plan, everyone feels good and is able to do the things that make them happy.

*U.S. Centers for Disease Control and Prevention

Reprinted from Greatcall.com

Reminder!!! You can always contact the Office for the Aging for information and referral on Caregiver and Long Term Care services at 274-5482.

If you would like to be taken off our mailing list and/or added to our Email list, please contact Rodney at 274-5491 or rmaine@tompkins-co.org.

Thank you!!!

The Caregivers' Resource Center and Alzheimer's Support Unit

Please call or visit us at the
Tompkins County Office for the Aging
214 W. Martin Luther King, Jr./State Street, Ithaca

Rodney Maine, CRC Coordinator and Newsletter Editor

Telephone: 607-274-5491

Email: rmaine@tompkins-co.org

Dawn Sprague, Project CARE Coordinator and Newsletter Editor

Telephone: 607-274-5499

Email: dsprague@tompkins-co.org



Websites of Interest to Family Caregivers:

Tompkins County Office for the Aging: www.tompkinscountyny.gov/cofa

- Click on "Local Resources for Older Adults" to access our Tompkins County Resource guides.

Family Caregiver Alliance: www.caregiver.org

CaringBridge: www.caringbridge.org

Caregiver Action Network: www.caregiveraction.org

AARP Caregiver Resource Center: www.aarp.org/home-family/caregiving

Next Step in Care: www.nextstepincare.org

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This newsletter is made possible in part by a grant from the NYS Office for the Aging

