

WashingtonJewishWeek





If you provide help to someone in need, you are a caregiver. Caregivers, quite simply, provide for the emotional and/or physical needs of another person. This could involve driving, cooking, bathing and making sure medications are taken properly. It might just mean being there to talk and hold hands. There are times when caregivers need to just listen. Other times they busily bathe and dress someone who may not even remember their name.

Caregiving is both an art and a skill, according to "Caregiving at a Glance by Insight Memory Center." The concept dates back generations and generations but more recently has spread to involving others outside of the close family network.

Observers call these often selfless and unpaid acts caregiving while caregivers are apt to say, "This is just what you do for a friend." They tend to downplay their importance though they often struggle to meet the needs of that special friend or loved one while sometimes holding down a job and dealing with the needs of other family members.

Caregivers need patience, nerves of steel, creativity, common sense, humor, compassion and strength. It is hard work. It consumes an incredible amount of time — sometimes even throughout the night — and, sadly, often those needing assistance are not grateful as they struggle to deal with their new reality of not being in charge of their own lives anymore.

This Senior Resources Guide, which is written by the Jewish Council for the Aging of Greater Washington, is all about caregiving, especially during a pandemic. Everyone is different, and there is no one correct way to respond to someone with a variety of illnesses and needs. Still, this guide is designed to offer some tips and to make sure you understand just how truly invaluable you are, and maybe even make your job a little easier.

More than 50 million people in the United States are unpaid caregivers. According to AARP's Caregiving in the U.S. 2020, its most recent edition, nearly one in five -19 percent - provide unpaid care to an adult with health or functional needs. About one-fourth of caregivers tend to more than one person. This is an increase from 18 percent to 24 percent from 2015 to 2020. Also increasing are the number of caregivers assisting someone with Alzheimer's

disease or other forms of dementia. That jumped from 22 percent in 2015 to 26 percent in 2020.

These angels of mercy are finding it harder and harder to handle the demands laid on their shoulders. Twenty-six percent say they have difficulty coordinating care, which is an increase of 6 percent since 2015. Twenty-three percent — almost one out of four caregivers — believe their own health has suffered as a result of their efforts.

They are all too often correct. The AARP study, which also was conducted by The National Alliance for Caregiving, showed that family caregivers are in worse health than they were five years ago. Their ailments include stress, depression and a lack of sleep to new or worsening serious medical conditions. Their immune systems become compromised as their stress increases.

These caregivers range in age from what many would consider too young to handle such a burden all the way up to those who are the same age as the elderly person they are assisting. A whopping 61 percent of them continue to work at their outside jobs as they see to the needs of their loved ones.

About 40 percent of family caregivers are men, and about 40 percent represent multicultural communities.

Caregivers often feel underappreciated, or not appreciated at all. The person they care for may resent them, mostly because they did not ever see themselves needing someone or are so depressed about their condition that they don't take time to think about others.

If you are a caregiver, thank you. If not, you may well be in the future, or you may be in need of one. As the number of older Americans continues to rise, so does the number of caregivers. As of 2019, there were 54.1 million Americans who already celebrated their 65th birthday. That is roughly one in every seven Americans.

The number of people 65 years and older is expected to double between 2000 and 2030. In another eight years, government predictions indicated there will be 71 million older adults. While currently there are about seven family members that could be caregivers, that number is expected to shrink to four per older adult by 2030, which is not that far off.

It would be ideal if everyone in need could afford to hire a professional to help with their daily needs. But the unfortunate fact is that is hardly the case. Not only are more and more caregivers unpaid, but they count on relief from a variety of friends and neighbors who have busy schedules of their own and often are not able or willing to come over and help on short notice.

Add all that to the complexity of care needed by people wishing to remain in their homes. It is one thing to make sure a loved one is well-fed, dressed and relatively comfortable. It is a whole other thing to change dressings, keep track of vital signs and deliver medicine in ways more complicated than handing someone a pill and a glass of water. They may be forced to deal with issues that would be better handled by a registered nurse, like giving injections and handling medical equipment. As if that weren't enough, they often are the patient's advocate with doctors and health insurance companies.

Unfortunately, caregivers tend to learn as they go and discover how to care for their loved one during a short conversation at a doctor's visit, when their emotions and stress levels are elevated. Meanwhile, they either continue to pay the family bills, keep the house clean and refrigerator filled or now find themselves stepping up to handle those tasks as well.

The AARP Public Policy Institute conducted a study in 2019 on the economic value of family caregiving, with a particular eye on those who need to step away from their careers or at least reduce their hours in order to be with their loved ones as much as possible. The study showed that family caregivers tend to lose money from the labor force at the same time their costs increase to pay for medical procedures, medical co-pays and other necessities. Most family caregivers incur serious out-of-pockets costs.

The federal government does offer support through its Medicare and Medicaid programs. Future plans include help due to RAISE — Recognize, Assist, Include, Support and Engage — Family Caregivers Act. That Act went into effect in January of 2018. It ordered the Secretary of Health and Human Services to develop a national caregiving strategy that includes communities, providers, governments and others.

According to Family Caregiver Alliance, the value of services provided by informal caregivers keeps increasing. The services they provided for a loved one had an economic value of \$470 billion in 2013, which was \$20 billion more than in 2009.

Care is expensive, whether it's in-home, in an assisted living facility, adult day center or nursing home. Even if your loved one has a nest egg, these expenses add up auickly.

"At first, many other adults pay for care in part with their own money. They may use personal savings, a pension or other retirement fund, income from stocks and bonds or proceeds from the sale of a home," according to the National Institute on Aging. Initial costs aren't as steep, because your loved one isn't as incapacitated as he or she may become down the road.

Meanwhile, families are either losing income or paying at least the federal minimum wage of \$7.25 an hour - and often quite a bit more - for help.

An AARP study revealed that nearly eight of 10 caregivers pay an annual total of \$7,242 for out-of-pocket expenses. On average, family caregivers spend one-quarter of their income on caregiving activities. The strain is greatest on Latinos, African Americans and young people. These expenses included covering rent or mortgage for the person they assist, health care, therapists, in-home care and medical equipment.

Included in President Joe Biden's Build Back Better Plan is money to expand homecare for older adults and people with disabilities. The plan provides funds to improve pay for in-home care professionals, thereby reducing the wait time for people to obtain assistance.

"For millions of families in America, this - this issue -

is the most important issue they're facing. It's personal," Biden said when introducing his proposal. "So here's what we're going to do. We're going to expand services for seniors so families can get help from well-trained, well-paid professionals to help them take care of their parents at home - to cook a meal for them, to get their groceries for them, to help them get around, to help them live in their own home with the dignity they deserve to

The AARP study noted that \$3,000 spent helping senior adults stay in their own homes saves the country more than \$20,000 a year in medical costs.

Then there is the cost of juggling work with caregiving. The study pointed out that one-third of respondents lose \$10,525 a year. Many are forced to go into their savings or cut back on retirement contributions.

There is help. Check Medicare insurance eligibility and determine if your state has PACE -Program for All-Inclusive Care for the Elderly. The U.S. Department of Veterans Affairs assists veterans Another place to turn for help is the National Council on Aging, a private organization that offers a free service known as Benefits Check Up (https://benefitscheckup.org/) Don't forget to ask your medical provider for less expensive medicines

You also might look into private payment options, like long-term health care insurance, reverse mortgages, life insurance policies, annuities and trusts. So many factors could influence your decision; take your time and do the due diligence necessary. Long-term care insurance may cover at least some of the costs of palliative and hospice care, nursing home stays and home care. Shop around for the best policy that fits your needs.

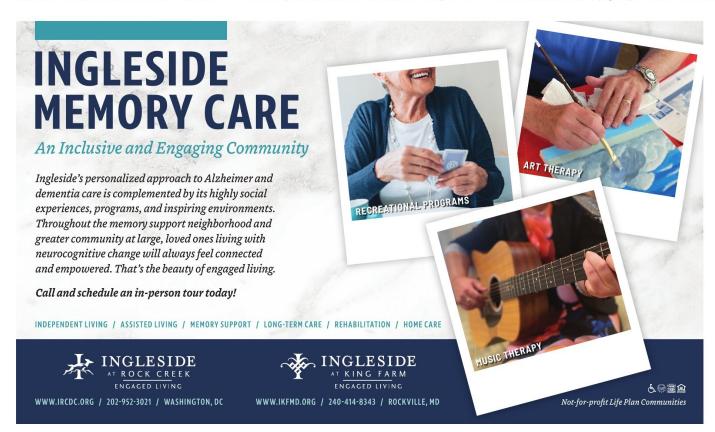
Buying long-term care insurance is best when you are young and healthy, but who thinks about this type of insurance when they are young and healthy?

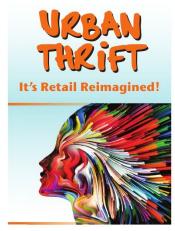
As a caregiver this research and paperwork often falls on your shoulders. According to Family Caregiver Alliance, the average caregiver spends 13 days a month on shopping, food preparation, housekeeping, laundry, transportation and medication dispensing. They spend another six days each month feeding, dressing, grooming, walking, bathing and helping with toileting.

Yet another 13 hours monthly is spent researching care services and information about medical issues and coordinating doctor visits and managing financial affairs.

There are so many other responsibilities, depending on the state of the loved one. Some must completely dress and undress the person daily while others need to help with zippers or buttons. Some are involved in getting a person in and out of bed and doing all the grooming while others just make sure their loved one doesn't fall or get confused. Some live with their loved ones. Some visit a few hours daily. Others stop by when they can. Yet, they are all caregivers.

The alliance's initial 141-page report that was released





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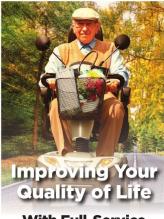
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in September of 2021 detailed 26 helpful recommendations that revolve around outreach and education, improving access to services, engaging caregivers as partners, ensuring financial and workplace security and generating data and evidence-based practices to help caregivers.

More and more states are offering paid family leave to take care of a sick loved one. Maryland approved its own version in April that offers 12 weeks of partially paid family leave each year to care for themselves or a loved one after a serious health issue.

As if financial setbacks are not bad enough, many caregivers report elevated rates of depression and anxiety, higher use of psychoactive medications, deteriorating health, compromised immune function and an increased risk of early death. Fifty-three percent of respondents say that their deteriorating health hurts their ability to be a good caregiver.

Yet other caregivers report feeling better about themselves and finding new meaning in life. America is a nation of caregivers. We take pride in caring for members of our family and friends. It's a tangible way of saying, "I love you." Should the person you are caring for die, you will have memories of a bond that otherwise might have been impossible to have. In the words of a caregiver whose beloved father passed on, "Over these last two years, dad taught me a final lesson about what being family means. I will always cherish that lesson and the memory of that qentle man."

Here are some suggestions to help lessen stress and health issues to be the best caregiver you can be. The big one is to take time for yourself, both your physical and mental needs. Remember to eat healthy, drink lots of water to stay hydrated, exercise, get enough sleep and take deep breaths or meditate when the stress begins to take over. Schedule regular checkups.

Take a walk, talk to friends about what interests you so you temporarily step away from caregiving and if you find that all the news about war, COVID-19 and politics in general are causing some of your stress, turn off the television and take breaks from social media.

Consider asking a friend or family member to relieve you. They may want to help but have no idea how to assist, especially if they live out of town or out of state. Suggest they virtually visit through Zoom or FaceTime. Maybe they could order the groceries for you online. Every little bit helps. Perhaps you could make a list of suggestions and ask friends and relatives who are able to take on at least one of the responsibilities.

Should these tips not be enough, consider joining a caregiver support group or bring in extra help, if you can. There are plenty of professionals who could help, don't be hesitant to reach out if life becomes overwhelming.

CAREGIVING DURING A PANDEMIC

At the time this guide was written, things are looking up. Social day programs and medical daycare centers are beginning to open their doors again, having been shuttered during the worst of COVID-19.

But during the past two years, COVID-19 turned caregiving upside down, creating additional stress triggers, a deepening sense of isolation and a decrease in places to turn. Professional caregivers were increasingly less available as they dealt with health care and caregiving issues of their own. When they were able to help, many families were understandably too nervous to welcome them into their homes as everyone could be a potential COVID spreader.

Caregivers are the ones who sit by a bedside and are always on the alert for a normal or — potentially scary — summons. Yet during the pandemic, they couldn't visit loved ones living in a senior residence or during a hospital stay. They couldn't always rush out to procure what was requested as stores were closed and certain items became more difficult to find — including even toilet paper and cleaning supplies.

Those doctors still willing to see patients often asked that they come alone, leaving a caregiver to question whether they were getting the full picture and all necessary instructions.

The pandemic created additional hardships on family caregivers at the same time they were losing some of their stress relievers. They could no longer visit a friend, go to a movie or restaurant. Even shopping for food and medical necessities became more challenging as caregivers wondered if they went to stores would they then bring COVID-19 back to their loved ones. Getting them sick could be devastating, even fatal. If they needed to be hospitalized, new rules wouldn't even allow you to visit. And getting sick yourself could leave them without any support.

These are primary stressors caregivers deal with daily. Then there are the secondary stressors that may affect some. These include family conflict and financial issues. It is way more easily said than done to have all members of a family be on board as to the best way to help an aging parent or ill sibling. Often, one person lives far away. There could be disagreements about when it is time to relocate someone to a small apartment or assisted living facility.

Festering resentments only increase conflicts, and new ones often arise as each person believes they are doing the best they can while others feel they are contributing more than their fair share. Does spending the day dealing with the needs of a sick person count the same as someone who rarely visits but pays for most expenses? Is it fair to expect the same thing from someone who has young children as opposed to empty nesters?

These are issues best worked out in individual family discussions. Hopefully this will be a smooth process, but for far too many, sensitive topics never get resolved and relationships further shatter. And you thought you were stressed out before.

FINDING CARE

While you may now feel more open about bringing caregivers into your home, unfortunately far too many have turned to other professions. According to ValuePenguin, which conducts research on many financial matters, 40 percent of employees left their jobs to care for themselves and their own family members during the pandemic. Many are not returning to their former jobs. Some stayed home as their children's schools closed or they were in quarantine. Others lost their jobs or chose to step away. Those that remained requested reduced hours or number of days.

According to an article in The Washington Post by Abha Bhattarm, caregiving is the second-largest factor when understanding why people took themselves out of the workforce. Only retirement beats it. In a time where business owners are crying out for workers, caregivers left the job market, either by choice or necessity, to care for a loved one.

An American Health Care Association survey from 2021 showed that the vast majority of nursing homes and assisted living facilities had trouble staffing all their positions. The study noted that the

percentage of understaffed long-term care facilities in America doubled during COVID-19. In Maryland, things are not quite as bad, with 12 percent of the places understaffed. In 2020, Maryland reported about 5.6 percent of its facilities were understaffed.

While hiring shortages have hit so many industries, the lack of staffing at senior facilities comes at a time when residents there suffered greater losses during the pandemic than just about anywhere else. It also comes at a time when the number of Americans older than 65 years continues to rise as Baby Boomers reach retirement age.

According to data from the Centers for Medicare and Medicaid Services, between May 2020 through February 2022, staffing at senior facilities was the lowest in Minnesota and Washington State. The least affected states were California and Connecticut.

The most job vacancies occurred in such very important positions as registered nurses, licensed practical nurses, vocational nurses, nursing assistants and aides, medication aides and medication technicians.

Better pay would help fill these positions, but that is not always possible. According to an article by Grace Whiting, president and CEO of the National Alliance for Caregiving, the needs of these caregivers in terms of mental, physical and financial health must be faced. One of every five caregivers reported feeling isolated. Nearly 40 percent stress the need for their own respite care. Half pointed out that they are working without paid family leave benefits. Whiting noted that many caregivers do find meaning and purpose in life through their efforts. But helping with bathroom duties, giving injections, changing bandages or spending hours with those who cannot always respond often creates stress, anxiety and depression. It is especially difficult for those who also are dealing with a job and other family members.

Does this sound familiar? You have a deadline looming at work, yet your father has awakened you several times a night for the past week. The in-home aide has been late almost every day, and your supervisor keeps asking why you are not getting to work on time. Now, your mother needs to get to her doctor appointment, yet has no one but you to drive her. She is not aware you have used up all your sick and vacation days.

Adult children who work while caring for their parents face these situations every day as they try to balance their at-work and at-home lives. The two jobs - and each one is a job - often conflict with one another, and the result can lead to distractions and errors at both jobs. Couple that with your exhaustion, both physically and mentally.

There is good news. An increasing number of employers realize their employees are dealing with elder caregiving, and often child care at the same time. Some bosses are creating policies that support working caregivers. It is becoming okay to mention at the workplace your home responsibilities, especially considering the millions of baby boomers who are either becoming caregivers to their aging parents or coming to realize that the caregiving challenge is around the corner.

No one is immune. Your CEO probably has older parents, too. So might the vice president of human resources and director of benefits, whether you realize it or not. Hopefully, they understand your anxiety and your sense of familial duty. Moreover, many successful employers recognize that if they help their valued workers tackle eldercare responsibilities, the company's bottom line may improve.

Studies have shown that employers lose both money and productivity when their employees are dealing with caregiving issues. Therefore, many have been able to ensure that their employee assistance programs, mental health benefits and other benefits provide help in this arena. Check with your personnel or benefits office to see what help, if any, is available to you. Ask members of your caregiving team to also ask what is available.

While family caregiving is hardly new, the number of people involved spiked during the pandemic. Some brought their loved ones into their own homes when the world shut down and continue to do so even though their options for care are not nearly as limited as they were during COVID-19. While it might have seemed temporary at the time, more and more family care givers are choosing to continue in their role.

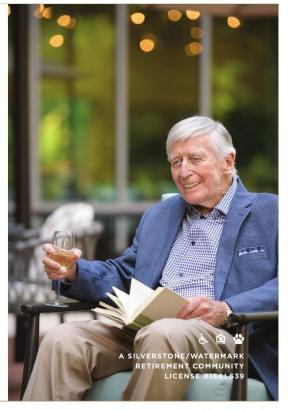
Take one Philadelphia-area resident who paid to have a caregiver stay with his wife, because she could not be left alone due to dementia. He did this so he could continue working and build up savings that he realized would be needed in the not-too-distant future when his

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wife would be better served in a memory care living facility.

While many people seek out caregivers on their own, he chose to use an agency, which screens its caregivers. It made sense to do it that way, he said, because he really didn't know the proper questions to ask or traits to seek. This worked well for a while, but soon the agency began sending a different person each time. They explained to him that people were quitting or calling out sick or in quarantine, and they didn't have much of a choice.

For him, that meant showing each new caregiver around his home, detailing his wife's needs over and over again and even explaining how to fix lunch and work the television remote control. Instead of greeting the caregiver and then going quickly off to work, he found himself spending an extra hour or so showing yet another caregiver around. While it was true his wife didn't necessarily remember who spent the day with her, he also knew that it took time for her to become comfortable with vet another person.

This all happened after the social day program she was attending closed due

to the pandemic. He kept checking to see if and when the program would reopen. When it finally did recently, it welcomed less than two-thirds of its former members so there would be adequate space for social distancing. He found himself on a waiting list with another door slammed shut on his plans.

He participated in a support group and gained from shared knowledge and experiences, but listening to the concerns of spouses whose loved ones have struggled with dementia longer than his wife has painted a scary picture of his future.

He hesitated to turn to his daughters for help as they both had young children at home while continuing to work full time. Meanwhile his wife's dementia worsened. as it did for so many others, during isolation. Caregiving, which already was difficult, reached new peaks.

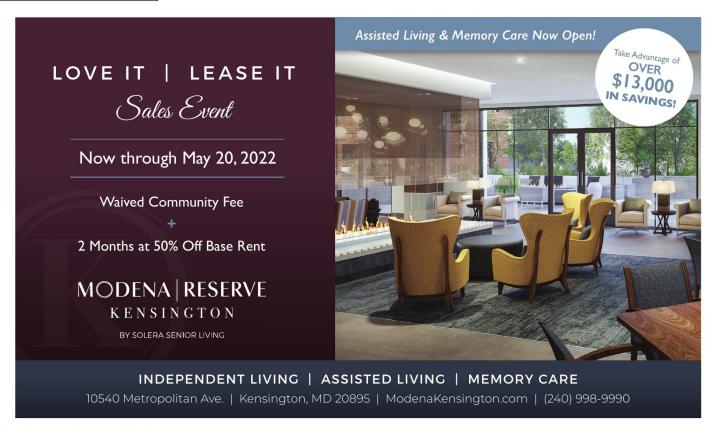
Experts agree it is best when possible to reach out for help. It gives those in need someone to talk with and offers new ideas and suggestions on how to best handle various issues. It also is important for caregivers to have a chance to step out of that role from time to time, even if it is just an hour. Going for a walk, reading a book, visiting with someone or talking to them by phone changes their focus.

Of course, it is great if someone is available to step in for a few hours, a few days. This provides time for caregivers to care for themselves.

Take Judy, who cares for her parents and her mother-in-law. She juggles their medical care and appointments, financial issues, shopping, personal care and neverending paperwork. She calls herself the "tour director," noting that her days are always different and never come with a how-to-manual.

Concerned that she was leading herself down a path where she soon would need her own caregiver, Judy turned to AARP's Caregiver Quiz (https://assets.aarp.org/www. aarp.org /articles/learn/sidebars/4-quiz.htm). By answering truthfully how often she felt resentful, trapped, tired and depressed, she was able to better understand the toll caregiving has on her.

The quiz asks caregivers to rate themselves on a variety of emotions, scoring one for never up to seven for always. If your score goes above 60, it is



time to think about yourself first and come up with ways to lessen your stress.

AARP suggests people dealing with stress eat nutritious meals and not give in to stress-driven urges of rich desserts and too much alcohol. Get ample sleep. If your caretaking role requires you to get up during the night, make sure you find time to nap during the day. Get regular medical checkups and don't forget to exercise.

It is also important to maintain social contacts as isolation increases stress. Just think about how much better you will feel and how much better a caregiver you will be if you take time regularly to laugh and have coffee with a friend. Don't forget that it is okay to lean on that friend from time to time for support or help.

Learn the provisions of the Family and Medical Leave Act, a federal law that helps protect the jobs and benefits of caregivers. According to the U.S. Department of Labor, eligible employees whose employers are covered may take unpaid, job-protected leave for specified family and medical reasons while continuing group health coverage under the same terms and conditions of an employee who has not taken leave.

These employees are entitled to 12 workweeks of leave per year for the birth of a child and to care for the newborn during its first year and also to care for the spouse, child or parent with a serious health condition that would make the employee unable to perform his or her job.

Be sure to also check what your home state offers. Many local and state government departments and nonprofit institutions provide support. Some offer financial assistance. Others contribute through social services and programs. Still others provide information and referrals.

At Jewish Council for the Aging, we have a Senior Helpline that assists in finding the right services for those in the D.C. area, Our Connect-A-Ride and Escorted Transportation programs direct those with transportation needs to the right companies in the Montgomery County area. Our Gorlitz Social Day Care programs in Montgomery County offer stimulating programs and socialization for people in the early stages of memory loss as well as providing much-needed respite time for caregivers. These programs are offered both virtually and in person.

For information on all of JCA's services, call 301-255-4200 or call 240-290-3311 to reach JCA Senior HelpLine.

Sometimes, besides money and programming, caregivers and their loved ones need someone to talk to. A family member or friend who will listen is vital. If you don't have anyone to fill that need, join a support group or see what your church, synagogue, mosque or other religious institution has to offer. You might well be pleasantly surprised with the choices and support offered.

Remember to unwind. Pursue a hobby. Get outdoors, Listen to music, Meditate, Do a puzzle. Breathe deeply. Once you find that special thing that makes you happy, turn to

Decide the most important things you must do and set priorities. Make sure taking time for yourself is on the list. Do the "musts" first and work your way through the list. Don't feel had when you don't get everything done, at least you tackled the main ones.

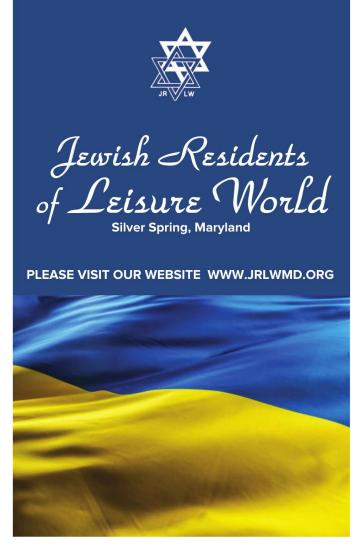
Another list that should be created concerns a Caring Plan. This form details a person's health conditions, medications, names of health care providers, emergency contacts and caregiver resources. This also could include advance care and end of life options that the patient requests.

This information saves time, especially when you are not available to be an advocate, and is helpful to a new doctor, an emergency care worker or a pharmacist and even other caregivers. These carefully written out plans have been found to reduce emergency room visits.

Update the lists yearly and whenever big changes are made and medicines changed. It is also smart to have your own care plan. The Centers for Disease Control and Prevention has a fillable care plan form and other pertinent information on its website.

While you are making lists, consider writing down the names of trusted people whom you count on for support. Together with them, assign them practical tasks that may seem minor but could really help an overworked caregiver. One person could agree to phone the person regularly just to chat. Another would be responsible for groceries. Yet another would help with paying bills and making repairs. Depending on what you as a caregiver prefer, have someone agree to set up medical appointments. Assign someone as a driver.

Another important idea is to keep at least a one-month supply of medications and some extra food on hand. This will reduce the number of shopping trips needed and save time.



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SHOULD YOUR LOVED ONE MOVE INTO YOUR HOME?

From the book, "Caring for Your Parents: The Complete Family Guide" by Huh Delehanty and Elinor Ginzler, a former JCA director and board member, here are some issues to consider when trying to decide if it would be best to have your parents come live with you.

- How will the move affect your spouse, your children and other family members? Do unresolved tensions exist between your spouse and your parents? Will any of your siblings be resentful? Will they be able to chip in to help with care? If they live in the area, how will you feel about them having free and easy access to your home? How will you feel if they don't offer help?
- Should part of your parents' income be paid to you as rent or go toward groceries and other monthly expenses? Should siblings contribute to cover these expenses?
- Is your lifestyle compatible with that of your parents? If you and your family like to take vacations, participate in local sporting events or go to movies and museums, how will the presence of your parents in your home affect your ability to do these things as a family? Will you need to arrange for care if you are away for extended periods or even a few hours?
- How will your parents feel about the move? Consider what will be difficult and what will be relatively easy.

- Is smoking or drinking alcohol an issue? If it is, address it so everyone understands.
- Are pets involved? Will there be allergy issues or fearbased problems?
- Will you need to cut back on work to provide care? Can your family afford that?
- How will everyone in the family find time and privacy for themselves? If your mother moves into your daughter's bedroom with her, how will you remedy the loss of privacy for each of them? Will there be hard feelings?

There are others issues to be resolved, and you know your family best to come up with others. Just remember communication among family members is vital and goes a long way toward avoiding future problems.

Should anyone in the family not be in a position to caregive, think about seeking the professional assistance of a geriatric care manager. A geriatric care manager is a licensed nurse or social worker who specializes in geriatrics. They know what support is out there and

Generally, geriatric care managers are there to discuss difficult topics and complex issues that may seem overwhelming, make home visits, suggest what services are needed, address emotional concerns, make both short- and long-term plans, show what is needed to make the home safe, help select care personnel, coordinate the

many medical services needed, evaluate various living choices and offer caregiver stress relief.

However, these evaluations and services often are expensive and not covered by insurance. Nor will Medicare cover this service.

Various support groups and government departments can help you locate a geriatric care manager. Some good questions to ask when seeking their services include:

- Are you a licensed geriatric care manager?
- How long have you been providing care management services?
- Are you available for emergencies around the clock?
- Does your company also provide home care services?
- How will you communicate information to me?
- What are your fees? Will you provide information on fees in writing prior to starting services?
- Can you provide references?

Hopefully this Senior Resources Guide has helped, whether you are a caregiver, about to be one or have decided to get outside help. While your world will feel overwhelming at times, remember you are helping care for someone's emotional and physical needs. And, don't forget to take care of yourself as well. WJW

This guide was written by Suzanne Pollak, senior editor/ writer at the Jewish Council for the Aging of Greater Washington. Learn more about JCA at www.accessJCA.





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