

Reach Out

A publication of the Catholic Charities Caregivers Support Services

(518) 449-2001

Please call us!

From the Executive Director

The theme of this edition is communication.

Academic degrees earned after years of study are devoted to this topic, and even after one completes such a degree there is still much to be learned outside the classroom. This edition makes no attempt to take such an academic approach to communication. But as you read through this edition, it should give you many good ideas about how to communicate better with the loved ones in your care. It should help you also to express your concerns more clearly to the doctors and others in the medical field you must deal with. There is information in this edition as well about how to communicate your wishes legally and how to deal with many other aspects of communication that are relevant for caregivers.

We hope you will enjoy this edition and find it helpful. We would enjoy having you "communicate" with us and let us know your thoughts about receiving the Reach Out Newsletter. Our agency would also love to post some of your letters in an upcoming edition and be interested in using your suggestions for creating a new edition theme. Please send us your comments via email or the postal service. You can reach me at Reneeb@ccalbany.org or 100 Slingerland Street, Albany, NY 12204.

Peace,

Renée Goldsmith Benson
Executive Director

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Catholic Charities Caregivers Support Services *Reach Out* newsletter is produced 3 times a year. If you have any inquiries, please contact Renée G. Benson, MA, LMSW, Executive Director at (518) 449-2001.

Fall
2010

Catholic Charities Caregivers Support Services
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*Board of Directors***MEMBERSHIP LIST***Mark McCarthy, President**Carol Brinkman, Vice President**Nancy T. Daggett, Secretary**Steven Willard, Treasurer**Michael Seereiter**Deanna Fox**Jason Ellis**Meg Wallingford**National Family Caregivers
Month, 2010**By The President Of The United States Of America***A PROCLAMATION**

Every day, family members, friends, neighbors, and concerned individuals across America provide essential attention and assistance to their loved ones. Many individuals in need of care -- including children, elders, and persons with disabilities -- would have difficulty remaining safely in their homes and community without the support of their relatives and caregivers.

Caregivers often look after multiple generations of family members. Their efforts are vital to the quality of life of countless American seniors, bringing comfort and friendship to these treasured citizens. However, this labor of love can result in physical, psychological, and financial hardship for caregivers, and research suggests they often put their own health and well-being at risk while assisting loved ones. Through the National Family Caregiver Support Program, individuals can help their loved ones remain comfortably in the home and receive assistance with their caregiving responsibilities. This program provides information, assistance, counseling, training, support groups, and respite care for caregivers across our country.

My Administration's Middle Class Task Force, led by Vice President Joe Biden, has made supporting family caregivers a priority, and we are working to assist caregivers as they juggle work, filial, and financial responsibilities. We made important progress with this year's Affordable Care Act, and because of this landmark legislation, Americans will be able to take advantage of the Community Living Assistance Services and Supports (CLASS) Program. This voluntary insurance program will help individuals with long-term care needs to maintain independent living, as well as compensate family caregivers for their devoted work.

Our businesses and companies can also contribute to families' ability to care for their loved ones in need. By offering flexible work arrangements and paid leave when caregiving duties require employees to miss work, employers can enable workers with caregiver responsibilities to balance work and family obligations more easily. Such efforts impact countless lives across our Nation, easing concerns and contributing to the well-being of individuals and families as they go about their daily lives.

During National Family Caregivers Month, we honor the millions of Americans who give endlessly of themselves to provide for the health and well-being of a beloved family member. Through their countless hours of service to their families and communities, they are a shining example of our Nation's great capacity to care for each other.

NOW, THEREFORE, I, BARACK OBAMA, President of the United States of America, by virtue of the authority vested in me by the Constitution and the laws of the

Continued on page 3.



National Family Caregivers Month, 2010 (continued...)

United States, do hereby proclaim November 2010 as National Family Caregivers Month. I encourage all Americans to pay tribute to those who provide care for their family members, friends, and neighbors in need.

IN WITNESS WHEREOF, I have hereunto set my hand this twenty-ninth day of October, in the year of our Lord two thousand ten, and of the Independence of the United States of America the two hundred and thirty-fifth.

BARACK OBAMA

"The true strength of the American family finds its roots in an unwavering commitment to care for one another."

President Barack Obama, 2009's November's National Family Caregivers Month Proclamation



When talking is not enough

We know that along with joy and satisfaction caregiving may bring with it stress and sometimes family conflict. Some family relationships come with a certain amount of stress under normal conditions and caregiving can evoke an increase in conflict because families are so changed by the caregiving role. In cases where round-the-clock caregiving comes into play the physical, emotional, social, and monetary resources of a family are directly challenged.

What can a family do when talking is not enough? Mediation is an option that is often overlooked for this field. Mediation is not therapy or counseling. Typically it is a single meeting with the concerned parties

continued on the sidebar on page 5

Communicating a Need

With the continuing economic crisis, we are facing many challenges, in particular, an increase in requests for our services and a decrease in funding. How can an agency meet the growing demand for services when funding is diminishing? How can it cover the staffing hours for services? What will families do when they haven't got supports? Will more families lean on nursing homes or other institutions? Will more children who could have managed at a relative's home end up in foster care?

We risk a good deal when we cannot help the community keep loved ones at home. In working to meet the challenges in the economy, our office has started a partnership drive. Our goal is to establish a base of 150 partners in order to raise a total of \$10,000, that is, an average of \$66.66 from each partner. If we meet this goal, it would make a huge difference.

Using our own communication skills, we had drafted an article in the Fall 2009 issue of this very publication, and as a result we received generous gifts and built a partnership with six families. Today the situation is much more critical and the need much more immediate. We ask that you please be our partner now so that with our mutual cooperation and effort we can achieve our goal of being able to help the families in our community keep their loved ones at home for as long as possible.

Send your donations to 100 Slingerland St., Albany, NY 12202. Our office accepts checks and credit cards. Donations to Catholic Charities Caregivers Support Services are tax deductible to the full extent of the law.

Communication on Safety by Scouts

Neil Rosen is a 17-year-old man who resides in Albany and is part of Boy Scout Troop 78, in Loudonville, N.Y. Neil is working toward attaining his Eagle rank, the Boy Scouts' highest honor. For his Eagle Service Project, Neil coordinated a presentation on First Aid Education and Emergency Safety for the families in our Kinship Caregiving Program in each of our three counties: Albany, Rensselaer, and Schenectady. For his presentation, Neil secured the assistance of several boy scouts in his troop, their parents, and a local community EMT, Dave Plouff, who talked on the subject of First Aid. For his project, Neil obtained the support of the following businesses: St. Peter's Hospital, Albany Medical Center, Apple Pharmacy in Malta, Price Chopper Supermarket, Hanaford Supermarket, K-Mart, BJ's, Stewarts, Albany County Sheriff's Department, New York State Health Plan Association, and Town Total Health. These businesses provided either monetary support or supplies. The State Emergency Management Organization (SEMO) donated Emergency Preparedness Kits, which were distributed to the families in attendance, as well as first aid supplies that the families received at the close of the presentation. We wish to thank Neil and all those who contributed toward making his Eagle Project a great success. We wish him much more success in his future endeavors. Note one additional benefit accruing from Neil's project: his presentation sparked the interest of several families in scouting, with one of our program children having since enrolled in the cub scouts, and others expressing an interest in locating a troop. Thank you, Neil, for making a difference in the lives of Kinship Caregivers and helping them to "Always be prepared!"

Communicating wishes when the decision-making ability is lost

By Richard E. Rowlands, Esq

The Family Health Care Decisions Act allows family members or close friends to make medical-care decisions for loved ones who are no longer able to make their own decisions. This act replaces the old laws that used to force doctors to provide aggressive life-sustaining treatment to patients whose wishes were unknown because there wasn't a living will or health-care proxy in place. Many times, doctors would make decisions which resulted in an extraordinary amount of suffering for a patient even though the family objected to such treatment. This new law had been debated for 18 years and is intended to overcome the limitations of the court-developed "clear and convincing evidence" requirement. New York was one of the last two states in the country without such a law.

It is important to understand how this law will affect you and your family. In order for this law to be triggered, health care practitioners first need to determine whether or not a patient has a decision-making capacity. If the patient lacks that capacity, the legislation requires the selection of a surrogate from a list of individuals ranked in order of priority, including spouse, domestic partners, children, or close friends.

To protect the incapacitated person, the law has numerous safeguards. These include procedures for a patient's family member or a physician to assert objections to the selection of a surrogate or to a decision made by the surrogate. Also, the Act states that a life-sustaining treatment can't be withdrawn or withheld from a patient, even if the patient has lost his or her decision-making capacity, unless there is clear evidence that can be produced to show that the individual would have declined treatment if competent. In nursing homes and hospitals, an ethics committee must review the surrogate's decision to remove life-sustaining treatment.

Nevertheless, it is still important to have a living will and a health care proxy in place to avoid any misunderstandings with your loved ones and to ensure that your wishes will be carried out. It is important to work with an experienced elder-law attorney, who will help create the proper documents for you before it is too late.

For more information regarding the Family Healthcare Decisions Act, please visit <http://www.aging.ny.gov>.

Richard E. Rowlands, Esq., is a Partner in the Trusts and Estates practice at Tully Rinckey PLLC, a full-service law firm located in Albany, NY. Richard has over 35 years of experience in trusts, estates, and elder law.

See <http://www.albanystatelawyer.com>.



Talking about Money Problems

By Patty Christensen, Fiscal Director CCCSS

Financial difficulties can cause a great deal of stress in a family. Many adults raising children wonder whether or not their children should be made aware of their financial problems. You already know that children are remarkably perceptive. Your attempts to shelter them from such problems may have the unintended consequence of their worrying silently about what is going to happen to their family as they sense the increased tension in the household.



Here are some suggestions to keep in mind when discussing money problems with your children.

- Take into consideration the child's age. Younger children do not need many details. You can acknowledge that there is a problem and assure them that the adults in their life are working to find a solution. Let them be part of small decisions. "We cannot have both. We can have this, or that. Which one would you like?" Unless they ask why, do not constantly tell them that lack of money is the issue.
- For older children, have the facts and have a plan. Children need to feel that the adults in their life are in control of the situation. They should be told that there are options and alternatives being considered in order to provide for the family's well-being. Involve them in appropriate decision-making processes.
- Listen to your child's concerns. He or she may be dealing with additional yet similar worries because of what a friend is going through. If certain worries that your child has, such as concerns about eviction or foreclosure, are not an issue for your family, put your child's mind at ease. If they are an issue, explain what your plans are or what alternatives you are exploring.
- Acknowledge that this is a stressful time. If you are cranky or short with a child, assure them that it is not because of them.
- Let the children know that everyone is making sacrifices at this time so that they understand they are not the only ones being asked to give something up.
- Keep in mind that the crisis will not last forever and communicate this to your children. Let them know that this is one of those times that your family has to act as a team to get through this hard time together.
- Keep the lines of communication open by having family meetings, by having one-on-one times, and by involving your child in appropriate decision-making.

When talking is not enough (continued)

to "help resolve conflict and facilitate important decision-making in families about the care of an elder person, and it may be the most effective way of solving the dispute that is causing so much concern to the family members at the moment." [Karen L. Rice, M.A., LNHA Gerontologist, Negotiator, Mediator writing in Carepathways.com]

We often see families struggle with decisions related to financial arrangements, living arrangements, and medical decision-making and more. This may be a way to help families come to agreement with fewer hard feelings.

"Family caregiving mediation, like general mediation, provides a cooperative, non-adversarial setting for families to discuss their concerns in privacy and with confidentiality. The mediator serves as a neutral facilitator who has no connection to the case or situation. The mediator does not decide the outcome or determine who is right or wrong; and there is no force on the disputing parties to reach agreement – it is a consensual process in which all parties must agree in order to have an agreement." [Karen L. Rice, M.A., LNHA Gerontologist, Negotiator, Mediator writing in Carepathways.com]

How do you find a mediator?

Start with the National Eldercare Mediation Network at <http://www.eldercaremediators.com/locate/locate.htm> or try the site, Mediate.com you can search by state on each of these sites.

New OCFS Guide - Know Your Options: Relatives Caring For Children

A new and very useful guide, created and published by the New York State Office of Children & Family Services and entitled Know Your Options: Relatives Caring For Children is now available as a resource to relatives where a child is or has recently been removed from the parent's home by the local Department of Social Services (DSS). This guide was created to complement the larger publication Having a Voice and Choice: A NYS Handbook for Relatives Raising Children, also created and published by OCFS and the New York State Office of Temporary and Disability Assistance.

The Know Your Options guide describes the variety of options that kinship caregivers have when a child has been or is in the process of being removed from the parent's home by the local DSS and discusses in detail what rights a kinship caregiver may have and what services and subsidies are available for each option.

OCFS will not be printing this document. To date, there is no mandate from OCFS that DSS workers must provide this guide to relatives at or near the time of removal. However, service providers and those in the kinship-care community are able to and are in fact encouraged to print the guide and disseminate it widely. The guide is available in English and in Spanish.

continued on the sidebar on page 7

Talking beyond politics and religion

By Renée Goldsmith Benson, MA, LMSW Executive Director CCCSS

Often, in support groups and in other interactions, people ask us questions like "How should I talk with my mom about her driving?" Or "How should I approach my dad about his being unstable on his feet? I worry he might fall." Clearly, it is not just politics and religion that our culture has taboos about discussing.

Even in my own life, these communication situations arise. My mother, who is independent and in her 80's, just called and told me she would like to list me as an emergency contact at the hospital she is entering for some outpatient surgery this week. I said, "Sure," but after we hung up I realized that I had no idea what she would want me to do if something went wrong.

All sorts of potentially difficult situations arise as we age. And many of these situations involve some societal boundary that makes us reluctant to speak of certain things. The boundaries we are talking about are partly self-imposed. Certainly none of us enjoy being reminded of poor vision, hearing, or balance, and no one likes to admit to a decrease in our abilities. Additionally our society has made it "impolite" to discuss our impending death, estate planning, and basically any other topic that qualifies as unpleasant. So how does a family address the difficult stuff? I have seen this become a large communication issue even when in other areas a family welcomes open communication.

Perhaps it's all a matter of permission. If you need it, I give you permission to talk about all these matters with your family. Tell them you have read this article, that it talked about how important having open communication is, and that it told you that, if you are 40 years of age or older and have a parent or loved one 70 years of age or older, it is now time for you to begin some necessary conversations. Take with you the idea that these conversations are your opportunity to change or eliminate boundaries. Make a point of talking about important age-related situations you read about or hear about, and open a discussion with that parent or loved one about how they feel about those situations and what they think should be done or how they wish such situations would be handled if they pertained to them.

Remember to treat the subjects of these conversations with the respect and privacy they deserve. Be not only honest in sharing your thoughts but willing to accept how the other person sees things, especially when that view is different from yours. And remember too that, given the chance, both of you would want to talk about such situations now rather than later when they have turned into crises.



About the exchange of pleasantries

By Theresa Anderson, CCCSS, Kinship Caregiver Family Case Worker

As a young child, my dad seemed to know everyone. He waved, smiled, nodded his head, and had short exchanges with people everywhere we went. I was impressed by that. As I grew older, I realized he didn't really know everyone. In fact, my siblings and I started to tease him about his conversations with strangers. We tried to coax him back in the car quickly to avoid these interactions. At the time, I had no idea how important these interactions are in our society.

At the market today, it hit me. When I looked around, I saw that people were busy and consumed with their world. Many people were on their cell phones. They were rushing to fill their carts and check out. There were no smiles or pleasantries exchanged. I thought, thank goodness at least common courtesies are still intact.

While digesting this scene and thinking how things were when I was growing up, I decided that I am going to a change going forward. I plan to do more smiling and waving to my neighbors. My exchanges with the bank teller and the cashier at the grocery store will be more genuine. Today, when I pick up my son from school, I will introduce myself to one of his classmates' parents. I want to do my part to make our society more livable and pleasant.

Let me mention a couple of examples I personally have witnessed of interchanges that have made big differences. Last year my grandmother fell in the backyard. It was her mailman who found her and called 911. She knew the time he usually came, and he expected her to be out to greet him, and when she wasn't, he found her and made the call for help.



Another example took place years ago when I was waitressing. We had one couple who came in regularly. They ordered the same thing, sat in the same booth, and requested the same waitress each time they came in. One week, all the waitresses realized we hadn't seen this couple. The waitress who waited on them regularly knew where they lived from conversations. She went to check on them and found out from a neighbor that the husband had suffered a stroke. In that instance, nobody needed to be saved, but what a difference it made to his wife to know that we had noticed and that the waitress had cared enough to check on them.

So as you go about your day today, don't forget to smile, wave, and maybe even make small talk. You never know whose day you'll brighten or whose life might be saved by these small acts of kindness.

New OCFS Guide – Know Your Options: Relatives Caring For Children (continued from page 6 sidebar)

This document would not have been created without the support and dedication of members of the New York State Kinship Care Coalition, who recognized the need for an alternative, shorter document specifically addressing options of kinship caregivers when the children are being removed from their parents. Jerry Wallace and Amy Roehl aided in the drafting of this document and hope that you find it useful in working with kinship caregivers. The links to the guide are listed below; or see the NYS Kinship Navigator for a copy of the brochure and an informational letter (www.nysnavigator.org or call at 877-454-6463).



Did you know?

That a majority of the kinship families served by the Office of Children and Family Services' kinship programs had contact with CPS. It is likely that many of their children would become foster children "but for" the placement with kin.

Did you know?

Many caregivers served by the Kinship programs declare unequivocally that they could not continue to care for children without the assistance of the OCFS kinship program.

Did you know?

Public assistance and kinship services provide a cost effective alternative to foster care. But without kinship services, many children would very soon exit informal care and enter foster care.

Did you know?

There are numerous studies showing children raised by family members live in safer and more stable homes than children in the care of non-relatives. In fact, a recent study, published in the June 2008, "Archives of Pediatric and Adolescent Medicine" found that children living in kinship families have better outcomes than children in foster care.

Did you know?

The funding to sustain these programs and help these families is at great risk with the next budget? If funding is not restored, many of the programs will not be able to operate. Without these programs it is estimated that at least 475 children in NYS who would have been living with a relative would likely enter the state's foster care system causing a significant increase in child welfare costs in the next fiscal year and less optimistic outcomes for the youth.

Please communicate your thoughts about this issue to your representatives in the legislature.

The RX for talking with doctors

We all want to use a primary physician who provides good care, pays attention to your medical history, and asks all the right questions. But we cannot place all of the responsibility for your care on the physician. Our agency suggests that patients and caregivers need to take an active role in dealing with health professionals. The role of patient and caregiver includes understanding the nature of an existing health problem, understanding the potential side-effects of proposed treatment, and being prepared with information when discussing an ailment or illness with the doctor. While we know that at times you may feel intimidated, it is nevertheless your responsibility to ask questions about anything you don't understand, whether the questions deal with a treatment that is unclear, are about fees, or even involve requesting consultations for complicated problems.



To help you in presenting a clear history or in asking questions, you might try writing up a detailed and well-organized account of your present symptoms and any relevant past history. If you have more than one problem, start with the most important one. If you have a particular concern, bring it up at the beginning of your visit. If you are taking medications, either write down their names and dosages or bring the original bottles with you to the appointment.

Your offering information to the doctor is half of the scenario, and receiving his or her response is the other half. All of us forget certain information, and this is true even for the doctor's office, so take notes, use a tape recorder (with the doctor's permission), or bring someone with you who could help you capture all of the information.

Last but not least, if you are taking your responsibility seriously, so should the doctor take their responsibility seriously. If they are not communicating in a way that you find comfortable or informative, you have the right to talk with them about your concern. Simply saying in a friendly way that you want to be able to follow the physician's advice properly usually establishes the desired relationship.

It is important that feelings of fear, embarrassment, or even resentment not be permitted to create a barrier between you and your physician. Put these feelings to good use by sharing them with the physician. If you fear an examination or are shy about your body parts, you should say so. Discomfort during an examination is something else the physician wants to know about. If the physician makes a sound or comment that causes concern, ask what it means. Don't let fear or embarrassment stop you from mentioning a symptom or a problem that is bothering you. If you wish to discuss something that you do not want to have appear in your medical record, ask the doctor not to write it down.

Remember, good medical care should be a partnership between patient and physician.



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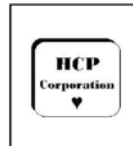
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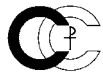
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