

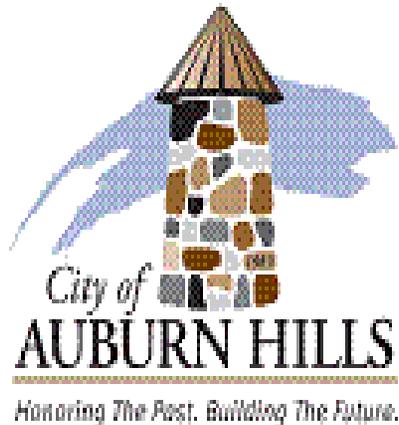
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Auburn Hills Senior Services Department  
248-370-9353

## THREE "R's" FOR FAMILY CAREGIVERS



**RIGHTS  
RESPONSIBILITIES  
RESOURCES**

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In our family it was apparent that I was going to be the family caregiver. Arrangements were made to move my mother within a few miles of my home. I eased into the role, and it has progressed ever since. Two years ago I decided to study Gerontology; I am now in my second year at Madonna University. I am passionate about Home and Community based care. My classes have focused on Care Management, which also consists of coordinating care and assisting people in keeping their loved ones home if that is their desire.

*Susan*

### **Oakland County Health Division**

Nurse On Call—1-800-848-5533

<http://www.noc@oakgov.com>

### **Benefits Check Up**

Get all the benefits you deserve.

<http://www.benefitscheckup.org>

### **State of Michigan**

Resources for Michigan seniors.

<http://www.michigan.gov>

### **Medex Direct**

Pre-packaged prescriptions medications according to time taken, identifiers for pills. Free shipping to your door, the pharmacy takes care of recurring refills by contacting your doctor. (877) 899-6337

<http://medexpack.com/>

### **NeedyMeds**

Connect directly to Assistant Programs, and drug Manufacturers-enter the drug name by brand or generic. Fill out the applications for each drug company, these are income based qualifications. There are also coupons available for a number of these drugs on line.

<http://www.needymeds.org/>

**AT&T –Lifeline** is a low cost land line for seniors, low income eligibility or participation in a government program. (800) 377-9450

## **You Are Not In This Alone**

There are 50 million caregivers in America and a wealth of resources to support them. Almost 60% of all caregivers either work or have worked while providing care. “Family caregivers play a major role in maximizing the health and quality of life of more than 30 million individuals with acute and chronic illness”(Mitnick, 2010). The family member depends on the caregivers for help with daily activities, managing their care, navigating the health care system, and communicating on their behalf with health care professionals.

The family caregiver experience is different for each family; although the issues seem to be similar. Some caregivers ease into the position slowly, while others may be thrust into the position due to an accident or a fall. Some people anticipate needs and take steps to position themselves for the possibility of future caregiving for a family member. They may move an aging parent closer to their home.

Caregiving is an awesome responsibility, whether you are taking care of a spouse, parent, relative or friend. Being a caregiver can be quite demanding, as well as rewarding. The purpose of this mini booklet is to be a general guide providing you with some direction as you navigate the system. It will help you understand your rights, responsibilities, resources, and also legal aspects of which you need awareness of.

## Stages of Caregiving

Everyone has a different starting point; the earlier you recognize where you are the better you can plan.

### What is your starting point?

1. I may help a relative soon
2. I am beginning to help
3. I am helping
4. I am still helping
5. My role is changing

### Assess your needs; realize they will change.

1. Anticipate your needs; this allows you to explore options, and you will feel better about the choices you make in the future.
2. Understand what you are dealing with; gather information on the disease or condition.
3. Involve others; family members, friends, support groups.
4. Be flexible; just when you think you have everything under control, something will change.
5. Try to involve the person needing care in making decisions.
6. Get advice from someone within the aging profession.

**Most people have no idea what type of home and community based care services are available in their community.**

## Resources

**Administration on Aging**, *Because We Care, A Guide for People Who Care*, 75 page guide discusses, services, housing options, day to day living, hiring an in-home worker, legal issues, and other topics. <http://www.aoa.gov/prof/aoaprogram/caregiver/carefam/>

**MMAP...Access to LTC...Know your options** is a brochure, issued by Michigan Medicare and Medicaid Assistance Program, outlines long term care alternatives and lists resources that can help in accessing long term care.

**The MI Choice Medicaid Waiver** can provide alternatives to nursing home care. This site provides information on whom to contact to begin eligibility determination. [http://www.michigan.gov/mdch/0,1607,7-132-2943\\_4857\\_5045-16263--,00.html](http://www.michigan.gov/mdch/0,1607,7-132-2943_4857_5045-16263--,00.html)

**Veterans Aid & Attendance Pension** (A&A) provides for veterans and surviving spouses who require the regular attendance of another person to assist in eating, bathing, dressing and undressing or taking care of the needs of nature. It also includes individuals in nursing homes and in assisted living facilities.  
(800) 442-4551

### **Senior Companion Program**

Administered through Catholic Social Services of Oakland County, the program criteria is for persons of special needs over the age of 21. A Senior Companion can do as little as keeping a home bound senior company, to running errands, household chores or anything in between. This is a program with volunteers that help; if there is availability in your area. Contact Nicole at (248) 559-1147 extension3434.

## Types Of Abuse

**Neglect**—Failure of the responsible person to provide basic needs such as food, water, personal care, shelter, and medical care.

**Psychological Abuse**—Verbal assaults, threats, or harassment; subjecting a person to fear or serious emotional distress; withholding emotional support; isolation and loss of companionship.

**Material/Financial Abuse**—Theft or misuse of money, credit cards, or property; extortion or fraud; telephone, mail, home repair, and other scams; forced signature of documents.

**Physical Abuse**— Infliction of personal pain or injury; physical coercion; confinement; slapping, bruising, cutting, lacerating, burning, restraining, pushing shoving, etc.

**Sexual Abuse** — Unwanted sexual advances, including assaultive behavior accomplished through coercion, intimidation, force, or fear.

**Abandonment**—Desertion by a person who has assumed responsibility for providing care for an individual.

**Misuse Of Restraints**—A consumer may not be locked in rooms, tied down or over-medicated. Only a physician can write a prescription for restraints.

## Definitions and Acronyms

### Long Term Care (LTC)

Typically has been associated with nursing homes, the term actually includes a whole range of health and social services. Services may include home meal delivery, nursing, personal care services at home, adult day care, alternative living arrangements, and institutional care.

### Activities of daily living (ADLs)

Refers to self-care activities within an individual's place of residence. Defined as "things we normally do such as personal hygiene (grooming), bathing, dressing, feeding, transfers, elimination, ambulation."

### Instrumental activities of daily living (IADLs)

Refers to activities that are not necessary for fundamental functioning, but let an individual live independently in a community. Activities would include: light housework, preparing meals, taking medications, shopping, telephone use, and managing money.

### Home Health Care Agencies –Medical Help

Home health care agencies assist with medical care: physical/occupational therapy, skilled nursing care, and various medical services.

### Home Care Agencies-Non-Medical Help

Home care agencies assist with ADLs and some IADLs;

### Durable Medical Equipment (DME)

Any medical equipment that can be used repeatedly in the home to aid in a better quality of living. It is a benefit included in most insurances. If the equipment is a covered benefit by the insurance company be sure to check the ownership details.

### Care/Case Managers/Service Coordinators

Coordinate the various kinds of health and social services in the Community-In home, community based or institutional-to deliver the needed package to the individual. Individuals may qualify for publicly or community funded programs through the Area Agencies on Aging.

# Respite and Caregivers Rights

## Respite Care

Short-term temporary relief to those who are caring for family members who might otherwise require permanent placement in a facility outside the home. Respite can also be obtained through a home care agency, adult day care, assisted living facilities, and many other options. This is crucial for caregivers.

## **Caregivers Rights**

- You have a right to take care of yourself; it will allow you to take better care of your loved one.
- Seek help from others; even if your loved one objects.
- Recognize your limits of endurance and strength.
- Maintain some aspects of your life; as if your loved one was healthy.
- You have a right to do things for yourself; you do everything you can for your loved one.
- Get angry, be depressed and express emotions occasionally.
- Do not be manipulated through guilt, anger or depression.
- Receive consideration, affection, forgiveness, and acceptance from your loved one as long as you offer those qualities in return.
- Take pride in what you accomplish and the courage it takes to meet your loved ones needs.
- Protect your individuality and the right to make a life for yourself when your loved one no longer needs your full time help.

## **Elder And Child Abuse**

Report elder and child abuse if you observe it, suspect it, or it is reported to you. Elder and child abuse and neglect are serious and growing problems. The growing number of elderly people requiring in-home care has exposed more families to stresses that can result in abuse and neglect when support is not available. It is important to remember that abuse can exist in any situation where a person is dependent on someone else for care. People of any age who are ill or disabled may be at risk of abuse by a caregiver, family member, friend or neighbor.

**IF YOU SUSPECT ABUSE OR  
NEGLECT CALL  
OAKLAND COUNTY ADULT  
PROTECTIVE SERVICES AT  
(866) 975-5010**

## Tips continued..

- If you ever have difficulty with a government agency, for example The Department of Human Services, request a hearing in writing and submit it. This will freeze the action until they respond. Always keep a copy of important documents for reference.
- Question what Medicare pays with Medicare, not someone else. (800 633-4227)
- Medicaid is income based: check to see if your loved one qualifies for additional help.

## If You Need Help Now

Call your local Area Agency on Aging; in Oakland County it is Area Agency on Aging 1-B. (800) 852-7795 the website is <http://www.aaa1b.com> you will find a lot of information.

Call your local Senior Services Center; speak to the director. This person will have a wealth of knowledge. Auburn Hills Senior Services website has a caregivers resource section it is located at <http://auburnhills.org> departments/senior.

## Home Care Safety

- Eliminate throw rugs; tripping hazard
- Eliminate clutter; wide open traffic areas
- Improper fitting of shoes; too loose
- Use hard sole slippers and shoes; to prevent falls
- Downsize furniture if necessary
- Add grab bars in the bathroom
- Bedside commode (raises height over toilet)
- Tub bench or transfer bench for bath tubs; can reduce falls
- Walkers-some have wheels, brakes and seats
- Lever handles in place of knobs
- Assistive equipment

There is a home safety checklist at:  
<http://www.ces.ncsu.edu/depts/fcs/pdfs/FCS-461.pdf>

## Start a Caregiver's Journal

- You will need a notebook, and a 3 ring binder; this will be a blueprint in case of emergencies, you will be able to photo-copy this.
- A list of informal support networks; a neighbor, snow removal help.
- Informal draft of your care plan; or discussion of a family meeting.
- The care persons wants, likes, dislikes.
- A list of your needs as the caregiver; so when someone asks what can I do—your ready.
- Your caregiving goals; what you want to accomplish.
- A list of things you want to improve or change.
- A detailed plan of what you are going to do to maintain your health.
- Start a resource/contact section. Keep a record of: who you spoke with, what you spoke about, and when you spoke to them, where they were from or location if applicable. Take notes on criteria or eligibility for the service or resource.
- This is especially important if you are working with government agency.

## Useful Tips

- Some hospital emergency rooms now have opened Acute care areas for seniors. Staff are trained on the needs of seniors.
- If the hospital/or nursing home discharge planner wants to send your loved one home and you are not capable of providing the care they need or do not agree with the decision; you can say no. Call the Michigan Peer Review Organization. It is a non-profit organization that oversees medical and utilization. Contact them at (248) 465-7300 (this will automatically give you a minimum of 3 days to make other arrangements; or explore all your options).
- Medicare coverage requires a 3 day hospital stay prior to admittance to a rehabilitation facility for physical therapy. If the senior is not able to care for themselves or if they are not mobile due to a fall, refuse discharge and call your family doctor if necessary.
- Medicare pays for 100 days of rehabilitation therapy in a facility. Use only what you need to use of the 100 days. After you have used 100 days —it will not be covered again for 60 more consecutive days.
- Medicare requires documentation by the medical staff to prove that the patient is making sufficient progress with the physical therapy in order to continue paying for the treatment.

Continued..