



# Lopez Island Hospice & Home Support

Winter 2013 Newsletter

## *The many facets of caregiving*

Caregiving, with all its challenges and rewards, is different for everyone. Whether you have a loved one who will need help in the future, or you're a long time caregiver who's just about burned out, each situation is unique. Our winter newsletter addresses caregiving roles and makes suggestions on how to make caregiving a valuable experience for everyone involved. We've also included a list of helpful resources. And feel free to contact us at 468-4446, [admin@lihhs.org](mailto:admin@lihhs.org). We're here to help.

### **Caregiving—What to Consider in the Beginning**

by Mary O'Bryant

You just realized that you may become responsible for caring for a loved one. What should you think of first? Below are some tips to consider for anyone at the initial stage of caregiving.

#### ***I May Help a Relative Soon***

You have a growing concern that in the near future your relative will need more and more of your assistance and time. You're concerned because of your relative's past and present medical condition, current living conditions, or age. Ask questions of your care recipient. Ask questions of health care professionals. Ask questions of lawyers, financial planners, and social workers.

You expect to become a caregiver; this is your time to prepare. Research options, gather information, and provide the opportunity for your care recipient to share his or her feelings and values.

#### ***Some Steps You Can Take During This Time:***

- Consult with a good lawyer familiar with disability or eldercare issues. Find out about durable powers of attorney for health care and living wills; start the process to ensure the necessary legal papers are in order.
- Determine financial situations. Knowing financial status can help determine future health care choices. Determine monthly income from pensions and social security; learn about annuities, stock investments, and bank accounts.
- Investigate community health care options. What home health care agencies in your area offer quality, affordable home care? What housing options are available: retirement communities, assisted living centers? Contact community organizations to request brochures and pamphlets. In addition consider your relative's current living

condition. Will she be able to reside safely in her home if she uses a wheelchair? Becomes bed-bound? What changes can you make today that will prevent future barriers to providing care in her home? Or are the necessary changes almost an impossibility? If so, what other options do you have: your home, an assisted living facility, a retirement community?

- Determine the current health care providers. Who are the physicians; what is the diagnosis? In addition, learn about medications and why the medications have been prescribed.
- Concentrate on the reality of the situation. Keep a realistic view of their situation. What's the worst that could happen? What's the best possible outcome? Then, determine what options are available for each of these outcomes.
- Begin discussions with your relative about his or her wishes. Asking questions now about your relative's care preferences will help you provide the care that your relative wants. Does your relative have a preference as to who in the family provides care? How does your relative feel about end of life care decisions? Where does your relative want to die? At home, in a care facility? What type of funeral would your relative want? Although you may not be able to meet all your relative's wishes, you can begin now to meet at least the most important.
- Start a journal. Chronicle your feelings, your concerns, and your actions. You may be surprised at your feelings of loss. Your preparation for the future allows you to see what your care recipient and you might lose. You both will experience changes in your relationship, your schedules, and your amount of freedom. Write down your thoughts about these potential losses and how you might be able to hang on to them, through minor adjustments and changes, for a while longer.

## On-line Caregiving Resources

There are seemingly endless online resources for caregivers. Here are a few:

**www.caregiverslibrary.org** From Family Care America. One of the largest sources of information and tools for caregivers and seniors. Hundreds of useful articles, forms, checklists and links. Examples: caregiving decisions questionnaire, needs assessment, organizing records, communication skills, managing difficult behavior, driving assessment, end-of-life issues, legal and insurance issues.

**www.caregiver.org** From Family Caregiver Alliance, National Center on Caregiving. Another huge resource, with links to public policy and research, caregiving information and advice, fact sheets, and publications, online groups, "Connections" newsletter, and information in other languages.

**www.nia.nih.gov** Division of National Institute of Health Research-based resources and information for the public, for researchers, and for health care providers. Links to books, pamphlets, documentaries, videos, and over 350 health and aging organizations. Latest studies in Alzheimer's, and links for help in care for Alzheimer's patients, including tips on dealing with behaviors, everyday care, safety, legal and financial issues, and relationships.

**www.nihseniorhelath.gov** Health and wellness information, health videos, tips on healthy aging, health topics by alphabet, tool kits for trainers, and help with using the internet.

**www.strengthforcaring.com** Help for caregivers,

with practical information from bathing and skin care to fall prevention, specific health conditions, coping tips for dementia, and articles on grief, diet, and stress management.

**www.agingcare.com** Online community connects people caring for elderly parents, with resources and practical advice.

## New Board Members for 2013

Three new members joined the Lopez Island Hospice and Home Support Board of Directors at the annual meeting held Monday, January 28.

**Rick Gadd** has been the treasurer of the Catherine Washburn Medical Association, treasurer of the San Juan County Park Board, and treasurer of the Lopez Animal Protection Society. He worked at the Bonneville Power Administration from 1967 to 1999; he graduated from San Francisco State University in 1966.

**Elizabeth Landrum, PhD**, will serve a two year term. She is a clinical psychologist and has had a 30-year private practice, specializing in grief and loss, life-threatening illness, and chronic illness. She was a volunteer with Hospice in Louisville, Kentucky and in Seattle. She has lived full time on Lopez since 2009.

**Fons Wynen** served in the Dutch navy, and moved to the United States permanently in 1972. He was the travel manager for Thomas Cook Travel and Ask Mr. Foster, making travel arrangements for large groups. He also directed air/sea departments for several cruise lines.

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### Asking for Volunteers

Lopez Island Hospice and Home Support is always looking for volunteers. Whether you want to be a direct caregiver or you just have a few hours to do some grocery shopping, your time, experience, and dedication are most welcome. Please contact Mary O'Bryant at 468-2421 for more information.

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### //////////////////////////////////// Lopez Island Hospice & Home Support Winter 2013 //////////////////////////////////////

Enclosed is my gift of: \$50 \$100 \$250 \$500 Other \$\_\_\_\_\_

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I would like to volunteer. Please send me information.

I would like information on planned giving.

Lopez Island Hospice & Home Support is a 501(c)(3) non-profit organization. Your contribution is fully tax deductible as provided by law.

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# When Caregiving is Ongoing

by Elizabeth Landrum, Ph.D.

“In this life we cannot do great things. We can only do small things with great love.” (Mother Theresa)

Perhaps no one better understands the personal benefits and challenges of doing small things for another than someone who has been providing care for a loved one for some time. While providing care for a loved one can be one of the most meaningful and intimate times in one’s life, an illness or disability is like an unwanted visitor in the home. What happens when the visitor stays and stays? Exhaustion, worry, and continuous demands often lead to caregiver depression, burnout, resentment, and loss of energy or interest. Providing care becomes more difficult when there is no end in sight, when change seems to mean increasing demands, or even when change is invisible. Often people who offered help in the beginning drop back, and the tasks of caregiving become more burdensome, even though they may still seem routine in one’s “new normal” life.

Family caregivers are providing a huge amount of care in this country, and while there may be many resources available, they are often struggling to keep things going. Family caregivers are less likely than non-caregivers to practice preventative health care and self-care, despite continual reminders of their importance. What are some of the things a person might do to try to prevent burnout and depression when the sprint becomes a marathon?

**Take time to step back to gain perspective.** Re-assess, review, and recognize the changing roles of family and friends; discuss alternatives. List specific needs and let other helpers know and choose how to provide assistance. Because caregiving is an ever-evolving process, anticipating likely changes can help avert crises.

**Examine your lifestyle.** Recognize that there is no perfect balance, but take stock of what is out of balance in your life and take action. Making just one decision for something to change can make a big difference. And even a brief change of atmosphere can help you as well as provide new energy or experiences to bring back home. When you need a break, respite care is available through Lopez Island Hospice & Home Support.

**Make daily plans for keeping activities fresh in the home.** There are a number of internet and printed resources for activity ideas. Simple changes like new music or aromas in the home, a few exercises or games, small ways for the person to participate in everyday life activities, creative activities, or ways to engage in stories can make a difference for both caregiver and loved one.

**Allow yourself to grieve.** There are losses experienced in having a loved one change through illness, accident, aging, or disability...loss of dreams, of a sense of the future you

anticipated for yourself and for them, loss of freedoms, loss of family roles, loss of assumptions and beliefs you held about the world. It is normal to feel cheated. One needs to grieve in order to begin again and to establish new visions of the future. In the letting go, you will need to find something to look forward to, something to hope for.

**Check for areas of guilt or resentment.** Find your own barriers to change. Your biggest enemies might be beliefs you hold about yourself or your loved one, such as thinking you (or they) should be able to do more. Talk it over with someone and find at least one thing to change in the lens through which you are looking. Try on a new mental script for a week and wear it like you would a new pair of shoes (perhaps ill-fitting at first but soon formed and comfortable?) When you need help dealing with your loved one’s difficult behaviors or memory loss, ask. When you need relief from the emotional or physical burdens, remember there is no shame in your own limitations, and you are not the only person who can do certain things, even if you are the chosen person. LIHHS is here to help.

**Evaluate your personal strengths and coping strategies.** Relaxation and stress-management are essential for caregivers, and there are many ways to achieve these goals. Maybe you need to bolster your usual coping strategies or perhaps you need some fresh ideas. Remember it is ongoing stress, more than acute stress, which puts a person at risk for illness and depression. Physical activity is a proven way to improve sleep, decrease depression and tension, as well as to increase energy. Even a 20 minute walk three days a week can help.

**Keep talking.** Isolation and excessive self-reliance are pitfalls for the long term caregiver. Talking with friends, family, therapist, and/or other caregivers can be immensely helpful as you continue through the maze of caregiving. A support group can help you to take a break, share experiences, receive emotional support, and get tips from others. The Lopez Island Hospice & Home Support Caregivers’ group meets every other Thursday, 1:00-2:30. Please call 468-4446 for more information.

## New Office Hours

The Hospice and Home Support office is now open 10 a.m. to noon and 1 to 3 p.m., Monday through Thursday. Stop by, have a cup of tea, and see the newly decorated office. Photos and paintings by local artists and a quilt display are just part of the new look. Great thanks to Ron Hall for all his help in sprucing up the space.

## 4<sup>th</sup> Annual Jingle Bell Dinner a Great Success

Sparkling centerpieces by Debbie Collins, the Bryant family's decorating skills, and a meal to remember by The Bay guaranteed the 2012 Jingle Bell Dinner would be a great success. And it was—we were proud to welcome a sell-out, Lopez-festive crowd, marking the beginning of the holiday season.

A wonderful array of antiques, art, and experiences was donated to the silent auction; spirited bidding ensued. Robert Herrmann was once again our master of ceremonies; Jan Sundquist brought the house down with her reading of the invocation (with thanks to Home Instead Senior Care and Mary Maxwell); Dr. Bob Wilson spoke of the importance of hospice and home support to our island. The Lopez Tap Company and Gary Alexander and Ginni Keith provided holiday entertainment.

Our guests and sponsors were extremely generous—we netted more than \$12,000 for the evening.

Special thanks to Jamie Olson, who managed the event, and of course to all the volunteers who worked so hard to make the evening a success.

Mark your calendars for Saturday, November 30th, for the 5<sup>th</sup> Annual Jingle Bell Dinner.

### Lopez Island Hospice & Home Support

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10-noon & 1-3 pm M-Th

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*Hospice for the end of life, Home Support for the rest of life*