

# How can we help?



Bishop Gainer and the Diocese want our churches to be places where everyone can meet and worship. That means doing everything possible so folks with disabilities can get into and participate in our churches.

**Roy Wainwright** has been appointed as the Disability Advocate here at IHM. Please contact him (ph **792-3408** or email:[roywainwright3@gmail.com](mailto:roywainwright3@gmail.com)) if there is any way we can help you or the person you are caretaker for.

Beyond the church access issues, the community of IHM wants to be able to help even at home if you need assistance. The Parish Caring Committee can provide transportation, and other home services to help. Contact **Jan Gentile 225-5059** email: [gentile@comcast.net](mailto:gentile@comcast.net)

Until you have had to care for a partially or totally disabled person, you don't realize the issues which come up. Below is a list of suggestions for your home which others have found useful. Please let us (Roy) know of additional suggestions.

## **CURRENT MEDICATION LIST—this is CRITICAL!**

- Is it: Readily available in the home –bedside or kitchen?
- Does it include changes made during last hospital or dr visit?
- Is there a current copy in the car (in case of accident)?
- Does a relative have a copy in case you are not around?

**CALL BUTTON** is there a way for your person to call you when they are done or need assistance? Get a wireless, battery powered doorbell chime. The button is usually waterproof.

## **CERTIFICATE OF MEDICAL NECESSITY**

The Dr prescribes a medicine to be taken once a day. Rx is filled by pharmacist, processed through Medicare, and you note you have 3 refills available. Month or two later, the Dr decides that med should be taken 2 or 3 times daily. You call in your refill. When you go to pick up the Rx you are told "refill was too early" The pharmacist understands, but his hands are tied. He can give you a "Certificate of Medical Necessity" This must then go to your Dr. to document when the increased dosage began (not the current date). Then back to the Pharmacist, and you finally can get your meds.

Suggestion: Whenever there is a dosage change, get a new prescription, even if you have refills available on the prior one.

Plan ahead when dealing with Medicare!

## **MY BAD DAY!**

It happens to the best of us... we are running late; the dog got out; one of the children spilled milk in the kitchen; and so on.... Then it's time to help the person we are caregiver for (can I invent the term "Caree"?). How do we react when helping them?

The old saying was "WWJD" [What Would Jesus Do?] Think about it.

Your problems or annoyances are nothing compared to the life your **Caree** is living... being dependent on another pserson's kindness and sharing their time. They are depending on you to fill in the blanks in their life, the freedoms they don't have.

So, count your blessings, and make their day!

(more over)

## WHEELCHAIR CHALLENGES

A few helpful tips when caring for someone in a wheelchair:

- In the kitchen, get a low table (check out consignment/thrift stores for a child's play table—21" high) to provide a wheelchair-accessible work space instead of the counter top.
- Switches/outlets at the back of counters can be difficult to reach. Run a **heavy-duty** extension cord from the outlet to the workspace for toaster, coffee-maker, etc.
- Hardware stores sell 'remote' wireless light switches for less than \$20. Plug into wall, connect lights to it, then place the switch in a convenient location. If you buy more than one wireless switch, make sure the channel numbers are different.
- Install large screw-on drawer handles to door frames, where your caree transfers to/from the wheelchair.
- If the patient can fit comfortably, use a 16" wheelchair instead of the standard 18" size. The 16" will fit through most home doorframes.
- Medical Alert Services (Great Call, ADT and others) are available through Wal-Mart and other stores as well as online. Use them.
- Be sure to leave the front door **unlocked** so medics can get in without destruction.
- Talk with 911 services (and your alarm service). Make sure they know a wheel-chair bound person is in the home.
- Have an up-to-date list of doctors & neighbors posted in the house, attached to the wheelchair and with you at all times.

Go to [www.aarp.org/caregiverhelp](http://www.aarp.org/caregiverhelp) for lots of ideas and links

### "SMART 9-1-1"

In our area, and hundreds of communities across the country, this service lets you create a profile, in advance of vital information for emergency responders. The service is free. You just have to create a secure profile with password protection. Then enter information about the location (type of home, special access information); each individual (age, medical conditions, special needs), emergency contact people, and even home animals! All of this is available to the 9-1-1 systems, even if you are away from your home (in another 911 that uses this).

What could be better? Simple and free, just go to [www.smart911.com](http://www.smart911.com) or click on the link.

**MEDICATION MANAGEMENT** As a CareGiver, you have utmost responsibility for the health and well-being of your "patient" [spouse, parent, child or friend]. Given the number of medications most patients take, and the interactions and side-effects, it is very important that medications be dispensed correctly and the patient takes them on a proper schedule.

In many cases, the patient cannot reliably dispense their own medications:

Poor eyesight makes reading the pill bottle label difficult.

The patient is interrupted or distracted when going through the bottles.

The patient is drowsy for fatigued due to illness or medication side effects (including not taking meds correctly).

One or more of the pill bottles gets knocked on the floor or away from the rest.

The prescribing physician changes the pattern for one or more meds (from 2x a day to 1x) but the bottle is not changed.

I have had to intervene with the medications of a number of my friends after some kind of medical crisis.

My steps are:

- Collect all the med bottles. Sort and group them. Are there two bottles for the same medication? Different doses or older Rx fill dates?
- Number the tops of the pill bottles with a permanent marker.
- On your computer or a clean sheet of paper, list each bottle - medication name(s), dose (mg), dosage pattern and the Rx doctor.
- If it is not completely clear about the dosage of the med, contact the physician office to clarify.
- Buy one or two pill trays.
- Fill the pill trays each week. If it is not empty at the end of the week, ask yourself why not?
- Take the list to Doctor appointments, or send in advance. Adjust the list for changes.
- Put the pills out of reach, except for "as needed" meds like pain killers.

Thank you for caring enough to be a CareGiver!