

CAREConnections

Information and Inspiration for Caregivers

A Publication of Boulder County Area Agency on Aging

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Dear Caregiver,

Words can be wonderful or wounding. They have the power to inspire, to bring people together, to heal. Or they can break our hearts and drive us apart. Most often, words are simply unclear: we usually don't have the skill to use the right words, to say exactly what we mean—or to listen deeply enough to someone else who's struggling to express what's on their mind or in their heart.

Human communication is a muddy business, and it's amazing that it works as well as it does. Confusing as it may be, there are some definite ways *not* to communicate if we want a productive conversation, and there are effective tools for increasing our chances of communication success. For caregivers, that's important, for there's so much we need to communicate that's essential to us, to our care recipients, and to the many other people involved.

This issue is all about communication. We hope it communicates something of value to you.

The Editors



Lessons Learned from Gardening

by Mary Lou May

Lessons learned from gardening may offer useful hints and strategies in “talking about the tough stuff” with an older loved one facing increased challenges. The analogy of the pleasant, rewarding hobby of gardening with those often difficult conversations may yield some reassuring, beneficial suggestions.

Gardening is a Process

Both the cultivation of a good garden and the establishment of a productive, ongoing dialogue with an older loved one require an investment of time and energy. Neither can be rushed. Both yield better results by starting early. With an older loved one, postponed discussions can mean a more limited range of choices. Early conversations around a kitchen table about an older loved one's preferences and options are much more productive than those hurried and worried decisions made from a hospital room.



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Care Connections

Boulder County Area Agency
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P. O. Box 471

Boulder, CO 80306

303-678-6116 (ph)

303-678-6285 (fax)

InfoCaregiver@bouldercounty.org

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Emily Cooper

Susan Damon

Phyllis Kaplan Guthrie

Lynn Malkinson

Jodi Patsiner

Mary Rose

Newsletter Design

StudioBlue West,

Newport, Oregon

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Step Back: Observe, Listen Respectfully, Assess What Is

A successful gardener first approaches the endeavor as a “labor of love” with care and respect—observing the setting of a planned garden, and initially assessing the terrain, the soil conditions, the sun exposure, the challenges. So, too, a concerned caregiver is encouraged to respectfully step back and listen well, over time, to what the older loved one is sharing and exhibiting.

What are the strengths of the older loved one? Internal strengths are those unique traits, skills, life experiences, and personal beliefs that have served the older adult well over the years. Examples include a commitment to self-sufficiency and a can-do/optimistic approach. It can be helpful to reframe what might initially be viewed as negative (“Mom is stubborn”) to a positive strength that has helped her manage over the years (“Mom is very independent-spirited”). It is important to remember that resilience (willingness to adapt and accept change) is a very beneficial strength that can be nurtured over time. Just as with a garden, we all have the capacity to grow and change. (At 89 years of age, “Ruth” stated, “I get it. If I want to go back home and leave this nursing rehab place, I need to work hard with my physical therapists and accept things like home care and Meals on Wheels. Well, it’s worth it to me to say ‘yes’ to what helps me with my goal.”)

External strengths include outside supports, such as a circle of family and friends, partnership with a medical team, connections with others through faith or socialization, and links with formal or informal community programs. Stepping back involves the initial identification of what seems to be working okay, what has worked in the past, and what are current and potential concerns.

Dream a Little: Hopes, Preferences, Possibilities

Just as gardeners envision the best possible outcomes of lovely flowers and delicious vegetables, so, too, cultivating beneficial dialogues with an older loved one should include the sharing of wishes and hopes.

Older adults typically express a strong desire to “age in place,” but some may surprise their caregivers with an honest expression of loneliness and openness to a possible future move to a different, more supportive setting. Caregivers can initiate conversations about how a neighbor or family member addressed a health challenge and how the older adult felt about the approaches that were taken. (“Mom, remember when Aunt Mary had her first stroke? How do you feel about what she chose to do? What would you have done differently?”) This sharing builds trust and

helps “prepare the soil conditions” as it is time “to plant seeds” regarding next step options to ensure safety and comfort. (“Dad, we know you have said that you want to stay in the family house, but now with these two scary falls you have had on the stairs, it seems time to consider what could help you stay safe.”) And just as gardeners jot down specifics about their efforts, it is wise for older adults and their caregivers to ensure that wishes are documented in a will and advance medical directives.

Gather Ideas and Information

Throughout the gardening process, it is always helpful to scoop up information and suggestions from a variety of sources: friends and other gardeners, County Extension offices that specialize in best practices, publications, on-line, and workshops at local nurseries. Likewise, caregivers have a wealth of resources for seeking guidance and consultations. Check out *Community Resources* (page 8) and *Information and Assistance in Boulder County* (back page) in this issue to learn more.

Acknowledge Limitations, Expand Supports

Although some master gardeners do indeed have amazingly well-honed, multi-faceted skills and are able to devote many hours daily to perfecting their gardens, others hire helpers for tasks like rototilling and invest significantly in helpful devices.

Both gardeners and caregivers need to be realistic and honest about their time and skill limitations. Many people juggle schedules full of daily obligations related to family, work, and self-care. Unrealistic expectations simply add to unproductive, unhealthy stress levels. For well-intentioned caregivers, it is critical for their staying power in the long run to have honest discussions with an older loved one about the caregiver’s desire to provide supports balanced with a need to honor other obligations. (“With the kids now on swim team and my needing to

be there for them and share in carpooling duties, let’s see what plan we can come up with so I can help you with what is most important to you. Since you want me to take you to your doctor appointments, how about trying to hire someone to help with your laundry and housekeeping?”)

Another limitation can be the cost of expanding supports. Fortunately, there are many volunteer and affordable options available for meals, grocery assistance, bill paying, transportation, and home care. Also, many older adults have been carefully saving for a rainy day. At times when a caregiver is unable to adequately provide all the supports needed and requested, it is appropriate to discuss the idea of paying for additional supports as a good investment in comfort and safety.

Prioritize, Step by Step

With both gardening and caregiving, best results come through step by step progress toward goals. It is wise to prioritize steps in expanding supports based upon a loved one’s stated wishes and responses to questions about what would be most helpful, along with any recommendations from the medical team and any consultants, as well as observations and concerns.

Encourage a loved one to “try out” for one or two months some easy-to-accept support, like a few days per week of Meals on Wheels or two times per month of homemaking assistance. Encourage the trial period in order for the option to “take root” and for the loved one to see its value. Older adults frequently admit that after trying out a support, “I just needed some time to get used to the idea. Now I really like it.” As with gardening, it is best to focus on incremental steps and continue to draw upon suggestions from others, gathering information about the next steps that might be most appropriate.

Trial and Error, Re-evaluation, Next Steps

Gardening teaches us that some things work out and some don’t. Best laid plans sometimes



fall short of our hopes and wishes. Just as Mother Nature brings setbacks like droughts and hailstorms to gardens, so, too, older adults and caregivers can face unexpected, significant challenges. Yet, by honoring the overall process of caregiving along with the listening and good faith efforts, caregivers can take comfort in their hearts that they have tried their best.

Lessons from gardening serve as reminders that tough conversations with older loved ones are indeed a process best approached with care and respect. As frail “Anna,” now living in a long-term care facility after extensive partnership with her family and a team of supports, shared, “It didn’t all work out as we had hoped or planned, but I am okay and safe here. And the best thing is that we all got so much closer in the long run.”

Mary Lou May is Project HOPE Coordinator for Boulder County Area Agency on Aging.

Communication Skills for Caregivers

by Emily Cooper

Good communication skills are important for everyone—and especially so for family caregivers. As caregivers, we need to clearly express our feelings, to communicate effectively with health care professionals, to calmly interact with others in challenging situations, and more. Thus, communication skills are a large part of the curriculum of the Powerful Tools for Caregivers course offered by Boulder County Area Agency on Aging. Let’s look at two of those skills.

We begin, in the course, by listening to how we communicate with *ourselves*. Our “self-talk” is the habitual things we say to ourselves, the running commentary of thoughts about everything we do. It can be positive, supporting and nurturing our efforts, or it can be negative, harshly critiquing our actions. Family caregivers, in

particular, often are victims of negative self-talk. Though we do everything we can to aid the loved one in our care, still the nagging voice in our head says, “You should have done *more*.” (After all, if our loved one is still sick, or unhappy, or complaining, it *must* mean that we haven’t done enough—*right?*) We generously give our time, energy, and love to our care recipient, but we may not let ourselves feel good about it.

In the Powerful Tools course, we practice turning negative thoughts into positive ones. For instance, when we’re caring for a loved one who is unappreciative, instead of telling ourselves that, “She would thank me if only I were a better caregiver,” we can affirm that, “I know I’m providing the best care I can. How she responds to it is up to her.” Or, instead of telling ourselves, “I can’t take time for myself. No one else can take care of Jim like I can,” we can turn it around and say, “Jim might enjoy seeing someone else for a change. They may not take care of him exactly like I do, but I know it will be okay. And I deserve to take a break!”

When we’re doing the hard work of caring for an older loved one, instead of undermining ourselves with negative self-talk, let’s tell ourselves the things that affirm our worthiness. Let’s be a good friend to ourselves—the kind of friend who encourages us, sees our fine qualities, and wouldn’t think of kicking us when we’re down.

Another communication tool we emphasize in the Powerful Tools course, one that is fundamental to effective communication in any setting, is the “I” message. When we’re dealing with a situation that’s fraught with strong emotions, feeling put upon and overwhelmed, or caring for someone who tests our patience, our first impulse may be to lash out with a “You” statement: “*You* never help out!” “*You* said you would ...!” “*You’re* driving me crazy!” It certainly lets the other person know we’re

angry, or frustrated, or annoyed, but that volatile “You” statement isn’t likely to inspire a calm conversation or lead to a positive outcome. The receiver of a blaming “You” statement will probably bristle up with defensiveness and lob a “You” statement back at us: “Oh yeah? Well, *you* said that you’d ...” And the volley of negative, accusatory messages begins, the result of which will be more hurt feelings and greater distance between the two parties.

The alternative to this is the “I” message. Instead of blaming the other person for our feelings and saying something that puts them on the defensive, we take ownership of how we feel and what we need to say: “I am concerned when Dad doesn’t get regular visits.” “I’d like to go to a support group. I’d appreciate your help to do that.” “I’m feeling exhausted and overwhelmed. I need to ask you for some help.” Just a calm, honest statement. (The Powerful Tools guide suggests making the “I” statement in the same tone of voice we’d use to say, “Please pass the salt.”) And if the other person answers with an accusatory “You” message, we can ease the tension by waiting a moment, taking a deep breath, and calmly responding with another “I” message. Eventually the person is likely to realize that we’re truly interested in communicating, not blaming.

When I and my very defensive brother took care of our mother, there were a few times when he called me and angrily began the conversation with an accusation: “*You* ...(fill in the blank)!!” I certainly felt like responding with “Well, *you* ...!” But I needed to keep working with him on our mother’s behalf, so I stopped myself and then replied, as calmly as I could, “I’m sorry ... I will do it differently next time,” or whatever seemed a fair and truthful response. When he heard that I wasn’t going to play the blame game, he’d calm down and we’d have a more positive conversation.

Changing self-talk from negative to positive and using “I” messages are communication tools that take a lot of practice, but a few early successes can show you just how powerful they are. If you’d like to learn more about tools for communication and self-care, consider taking our Powerful Tools for Caregivers course, offered twice again this year. Please call 303-678-6116 or email InfoCaregiver@bouldercounty.org for more information.

Emily Cooper is Information & Assistance Specialist for Caregiver Programs and Editor of Care Connections for Boulder County Area Agency on Aging.



Listening

by Lynn Malkinson

Part 1. Slow down

Why is it so hard to be still and just listen? Is it too much coffee? Are our lives so busy, stressful, and future oriented that we get that coffee in a paper cup to go so we can go even faster? Or are we so lonely that we say everything that’s on our mind when we are confronted with another human being?

Or do we not like silence?

I remember walking into my mother’s apartment when she first moved to Boulder and feeling like I had entered another time zone or country. Very little was happening; conversation, although sometimes interesting and affectionate, was slow with long spaces or dull with long, often-heard stories. I rarely stayed long.

Then I learned to follow the advice to *slow down* when you’re with older people. That practice helped me enjoy visits with my mother in a way I hadn’t before. The quiet moments became comfortable, like the silence of an audience



between movements in a concerto: a rest, a waiting for what will happen next, an expectation. We gave each other time to talk; we listened to each other like we had all our lives. It was the back and forth of equals.

This was when she was quite her old self: out and about doing things, meeting new people, taking classes.

Part 2. Listen

As my mother started having medical problems and needed help from me, the balance of our relationship shifted. As I clearly became a caregiver, I needed to become skilled at both aspects of our conversations: listening carefully to what my mother needed as she became more dependent, and listening to myself to notice what I needed in this new chapter in our lives.

In the essay “The Art of Listening,” author Brenda Ueland writes, “When people listen, creative waters flow.” This idea is so poetic and practical that it became the reference point for thinking about this assignment’s topic: the importance of really slowing down and listening to your older loved one. And what this can mean to them—and to you as caregiver.

This skill is particularly useful in serious discussions about increasing care needs or emotions or any potential change in status or location. I had learned to slow down but as yet hadn’t needed to address difficult issues and deeper emotions. I had not learned how hard it is to hear someone you’ve loved and admired all your life, someone who was always strong and self-reliant, talk about what they are truly experiencing: their insecurities, their fear, their despair.

In the last year of my mother’s life, a visiting nurse suggested that she would be better off in a communal setting where she’d be less lonely and nearer medical help. Mom and I chose a place and put her on the waiting list, but when a room became available, she expressed emphatically

that she didn’t want to move. She was disappointed that her life had come to this. My mother, for the first time in my experience, became shaky, fragile, and frightened.

In retrospect, I see that this conversation marked my first realization that my mother had become almost totally dependent on me. I had become the alpha dog and she the submissive one. Again, in retrospect, I realize I only thought about myself and didn’t even try to imagine what it was like for her. I couldn’t stand hearing my mother’s pain, especially because I felt responsible for it. I was scared and angry. I was afraid I couldn’t care for my mother if she continued to live alone. And then I said the worst thing: “Mom, you’re sounding querulous.” I had never used that word before (or since), but I knew it meant something like whiney—not a trait I associated with my mother. That shut us both down. How could she talk to me if I couldn’t tolerate what she had to say?

We eventually were able to make practical plans allowing her to stay home until she died, but this brief but powerful failure to listen to my mother still haunts me today. I now wish I had said, “Mom, I hear how much this move isn’t what you want. What can we figure out together?”

The good news is that a “powerful failure to listen,” or most other communication glitches, can be corrected later in a quiet conversation where honest sharing of thoughts can lead to creative solutions.

Here are a few general things I’ve noticed about listening, and not just with elders:

Problem: It’s hard in an emotional conversation to listen to the other person when your own emotions are crowding out everything else.

Solution: Breathe, slow down, count to 10, and think—first about yourself, and then you can think about the other person.

(continued on page 7)



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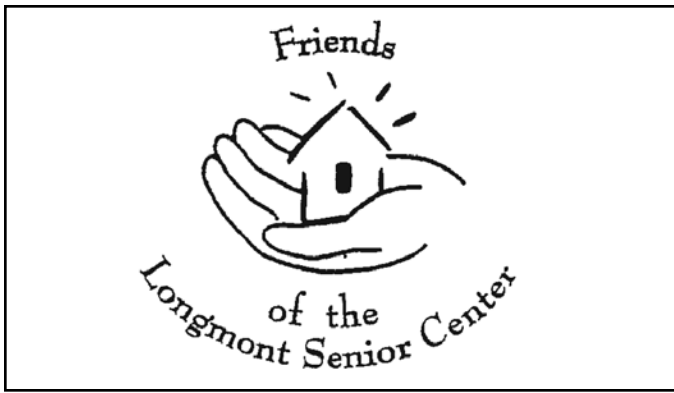
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Listening

(continued from page 6)

Problem: It's hard not to interrupt when the perfect comment comes to mind—or the perfect relevant story from your life must be told.

Solution: Practice consciously letting someone else finish a paragraph before you introject yourself. I remember learning how to breathe during labor, short pants to stop from pushing. I might try that. An interruption can be seen as enthusiasm and high spirits—but for those who are interrupted, it feels like a squelch.

Problem: Composing your own comment as the other person is speaking. This can happen when the other person is saying something threatening to me or something I so disagree with that I can't possibly let it be articulated. As though if it's said it will be true or it will happen. Kind of like magical thinking.

Solution: Self-awareness. Notice what you're doing and how it feels just before you do it. Then you have a better chance of waiting until the other person finishes their thought.

If you'd like to learn more about the power of listening, I encourage you to read "The Art of Listening," by Brenda Ueland, easily found via an online search. It's wonderful.

Lynn Malkinson is a social worker and a member of the Care Connections Editorial Advisory Committee.

"Being heard is so close

to being loved

that for the average person,

they are almost indistinguishable."

— *David Augsburger*

Keeping Your Own Medical Notes

by *Susan Damon*

"Do you have the notebook?" Joan asked as she and her son headed out the door to her appointment with a neurologist.

"Yes, and I also have the list of questions you want to ask Dr. Morgan," her son replied.

Joan was scheduled for an appointment with another new doctor as she continued to seek relief for the severe headaches she had been suffering for the past several months. At this point, she and her sons could have been confused about whom she had seen and what the results had been of so many different tests and treatments. Fortunately, they had all quickly learned that grabbing something to write on was invaluable during each visit with medical professionals, as those personal notes helped them keep track of their complicated journey through the medical system.

When Joan first became ill and had to go to the emergency room, her son Max started taking notes immediately on the back of a page of information they had received when they were admitted to the unit. Max recorded test results and made notes as the doctors came in and examined his mom. At first, Max just wanted something to do, but he quickly realized it was helping him keep track of what was being said, what tests were being run, and the purpose for each test. His mother became angry and confused about one procedure and when Max showed her the notes to explain why the painful test was necessary, she was able to relax and cooperate with the staff. When his brother Sam came to the hospital later that afternoon, Sam was able to quietly read the notes to understand all that had happened before his arrival.

After Joan was moved upstairs to a regular bed, the brothers found a notebook and began to keep a detailed log, with dates and times, of doctor visits,

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COMMUNITY RESOURCES

This column provides information about coming events and classes, services, and other resources that may be of interest to family caregivers in Boulder County. Please remember that it is your right and responsibility to research a service provider or event before taking action. See “Information and Assistance in Boulder County” on the back page for ways to learn more about these and other resources.

Medicare Counselors with Boulder County Area Agency on Aging offer **Medicare Basics Classes**, for anyone wanting to learn more about enrollment, benefits, costs, and choices under Medicare, on May 2 or June 6, 2:00 – 4:00 p.m., at West Boulder Senior Center, 909 Arapahoe (call 303-441-1546 to register); on May 20 or June 17, 10:00 a.m. – noon, at Longmont Senior Center, 910 Longs Peak Avenue (call 303-651-8411 to register); on May 17, 1:30 – 3:30 p.m., at Lafayette Senior Center, 103 S. Iowa (call 303-665-9052 to register); and on June 20, 10:00 a.m. – noon, at Louisville Senior Center, 900 W. Via Appia (call 303-666-7400) to register. There is no charge, but donations are appreciated.

PrestigePLUS offers **Advance Directives**, a class about considering and clarifying one’s wishes for medical treatment in the event of incapacitation, with Peggy Arnold, on Friday, May 10, 9:30 – 10:30 a.m. (\$5.00 fee for Longmont residents, \$6.00 for non-residents); and **Accessing Health Care in the Hospital** (part of its series on “Navigating the Health Care Maze ... and Making the System Work for You”), about being empowered as a patient (or caregiver of a patient) during a hospitalization, with Longmont United Hospital staff, on Monday, May 13, 9:30 – 11:00 a.m. (free). Both presentations are at Longmont Senior Center,

910 Longs Peak Avenue. Pre-registration is required, at 303-651-8411.

The **8th Annual Caregiving Symposium**, a countywide educational event about family caregiving, is on Tuesday, May 21, 12:00 – 5:00 p.m., in Boulder. See page 11 for more information.

Balfour Senior Living completes its Alzheimer’s Spring Lecture Series with **Alzheimer’s Care: The Voices of Family Caregivers**, a panel of family members sharing their experiences and challenges dealing with Alzheimer’s disease, on Thursday, May 23, 6:30 – 8:00 p.m., at Balfour Cherrywood Village, 282 McCaslin Blvd., in Louisville. The lecture is free, but seating is limited; pre-register at 303-604-2700.

Boulder County Area Agency on Aging offers **Be Well**, Stanford University’s Chronic Disease Self-Management Program that teaches techniques to help change one’s perspective and manage—rather than be controlled by—a chronic health condition, on Wednesdays, June 5 – July 10, 1:30 – 4:00 p.m., at Josephine Commons, in Lafayette. The course is free to Boulder County residents age 60 and over; donations are appreciated. Registration is required, at 303-441-3599 or mp Pruitt@bouldercounty.org. BCAA also offers **Matter of Balance**, a course about fall prevention, throughout the year. Call or email (same as above) for more information.

The Alzheimer’s Association Colorado Chapter presents **The Basics: Memory Loss, Dementia, and Alzheimer’s Disease**, an overview that looks at memory changes that are typical of aging and those that are not, at the different types of dementia, at leading research on Alzheimer’s and possible treatments, and at planning for dementia care, on Wednesday, June 18, 1:00 – 3:00



p.m., at West Boulder Senior Center, 909 Arapahoe. There is no charge, but pre-registration is requested; call 303-813-1669 or register online at www.alz.org/co (under Classes).

Adult Day Programs offer participants the opportunity to socialize, enjoy peer support, and receive nutritional, health, and social services in a well-supervised, safe, and familiar environment up to five days a week. To learn about the adult day programs offered in Boulder County, go to www.BoulderCountyHelp.org, select Seniors & People with Disabilities, then Service Directory, then Adult Day Care Programs.

A new **caregiver support group** meets on the third Wednesday of each month, 6:30 – 8:30 p.m., at Long’s Peak United Methodist Church, 1421 Elmhurst Drive, in Longmont. For more information, call facilitator Ginny Walker, at 303-775-1629.

Project Visibility is an award-winning training program developed by Boulder County Area Agency on Aging with the goal of co-creating an aging services community that is informed, sensitive to, and supportive of LGBT (lesbian, gay, bisexual, transgender) elders. A **Project Visibility General Training**, designed for administrators and staff of long-term care facilities, home care agencies, and other senior service providers, as well as for friends and families of LGBT elders, is on Thursday, June 20, 9:00 a.m. – noon (8:45 a.m. registration), at the Houston Room, Boulder County Clerk and Recorder, 1750 33rd Street, Boulder. Register, no later than June 19, at 303-441-3583 or elewis@bouldercounty.org. There is no fee.

Boulder County Area Agency on Aging offers each of its two **caregiver training courses** twice more this year. **Powerful Tools for Caregivers**, a 15-hour course that gives family caregivers

the skills to ensure they take care of themselves while caring for older loved ones, will be held Tuesdays, July 9 – August 13, 1:30 – 4:00 p.m., in Boulder; and Thursdays, October 3 – November 7, 1:30 – 4:00 p.m., in Louisville. The **National Caregiver Training Program**, a 21-hour course, taught by a registered nurse, that helps family caregivers acquire the skills needed to provide safe, confident home care for frail older loved ones, will be held Thursdays, July 11 – August 22, 1:30 – 4:30 p.m., in Lafayette; and Wednesdays, September 25 – November 6, 1:30 – 4:30 p.m., in Boulder. There is no charge, but donations are appreciated. Financial assistance for respite care (substitute elder care) during class periods is available. For more information or to register, call 303-678-6116 or email InfoCaregiver@bouldercounty.org.

Colorado Talking Book Library (CTBL) in Denver provides free delivery of Braille or large print books, or audio books and digital playback machine, to Colorado residents unable to read standard print because of blindness or low vision, physical disability, or learning disability. Applications, available online at www.myctbl.org (click on “Getting Started”), must be signed by a doctor or other certifying authority. For more information, contact CTBL at 303-727-9277 or go to <http://www.myctbl.org>.

For a list of **Caregiver Support Groups** that meet in Boulder County, email InfoCaregiver@bouldercounty.org or call 303-678-6116.

To share information about a resource for family caregivers, email InfoCaregiver@bouldercounty.org or call 303-678-6116. The deadline for the July/August 2013 issue is May 27.





Keeping Your Own Medical Notes

(continued from page 7)

tests, and results. When Joan was given copies of test results, the family stuck them in the back of the notebook where they could be easily found if needed. As other family members came by to visit or to sit with Joan while her sons took a break, trusted parties were able to follow her progress and add to the log as necessary.

Once Joan was released, a family member accompanied her to each of her physician visits and continued to use the log to keep track of all the details of Joan's treatment. When Joan tried to argue that she could do something that a son or grandchild thought was prohibited, they would all sit down and go through the notebook to resolve the issue. At times, Joan was relieved to have questions answered but sometimes she was frustrated when she wanted to ignore medical advice and go about life as usual. When she became angry at not being allowed to drive herself to the doctor's office for a follow-up visit, Sam sat down with her and they came up with a detailed list of questions she wanted to ask her primary care physician about when she could safely drive again. Sam drove her to the visit and kept more notes about the discussion.

These personal records helped Joan in the coming days to remember what she needed to do to regain her health and independence. She swore she was going to shred all those darn notes once the medical restrictions were lifted, but when that time came and she looked at all the information that she and her family had accumulated, she just sighed and stuck the dog-eared notebook in the back of her file drawer. "You never know when some of this might come in handy again," Joan thought as she closed the drawer. But she was also secretly pleased to know how involved her family had been—the notebook was evidence of the love and efforts they had all made on her behalf.

Keeping even simple notes during a medical appointment or more complicated medical procedure can help a patient and their companions keep track of details that easily can be forgotten or confused as large amounts of unfamiliar information overwhelm the patient in a stressful situation. If possible, ask a trusted family member or friend to accompany you to an appointment and to take notes for you—as a patient, you can struggle just to answer a medical professional's questions without also trying to take your own notes. Also, make a list of the questions you want to ask during the appointment, then be sure to get them all answered. Many physicians are beginning to give patients detailed notes of issues discussed during a visit and recommendations to follow, but having your own notes may include information important to you that isn't included in the doctor's summary.

Several websites offer forms to print and complete as you prepare for a medical visit. One good place to start your search is www.caregiverslibrary.org, which has many useful forms for caregivers, especially a simple but thorough appointment preparation form at http://www.caregiverslibrary.org/Portals/0/Checklists_andForms_AppointmentInformation.pdf. An equally useful form titled "Doctor's Office Visit Record" can be found at http://www.agis.com/SqlFile_Resource.axd?id=32&resource=pdf. If you don't have access to the forms or don't have the time to download and complete the forms, just do as Max did and grab something to write on as the appointment begins. Those simple notes can help take some of the stress out of a difficult situation.

Susan Damon is a volunteer long-term care ombudsman for Boulder County Area Agency on Aging and a member of the Care Connections Editorial Advisory Committee.

2013 Caregiving Symposium

*A countywide educational event for families and friends of elders
or for anyone interested in caregiving issues*

Tuesday, May 21

12:00 – 5:00 p.m. (come for all or part)

**Calvary Bible Church
3245 Kalmia Avenue, Boulder**

Resource Fair (12:00 – 4:00) • Assistive Technology Display
Caregiving Films • Educational Materials • Lunch

WORKSHOPS

1:00 – 2:00 p.m.

Government Programs and Financial Assistance for Older Adults
Caring for Yourself While Caring for Another
Companioning Your Loved One Through the Memory Loss Journey

2:30 – 3:30 p.m.

Advance Directives: Protecting Wishes for End-of-Life Care
Comforting and Communicating with Touch
Difficult Conversations: Talking About the Tough Stuff with Older Loved Ones

4:00 – 5:00 p.m.

A Spirituality of Caregiving: Finding the Meaning
The Basics of Memory Loss, Dementia, and Alzheimer's Disease
Financial Exploitation: Reducing Risks to the Care Recipient and the Caregiver

General Admission is free. Register at:

www.caregivingsymposium2013.eventbrite.com, 303-441-1585, or the door.

(To reserve free on-site elder care, call 303-441-1543.)

For more information, go to the website above or call 303-678-6116.

Sponsored by Boulder County Area Agency on Aging

Thanks to Our Co-Sponsors:

Aging Services Foundation of Boulder County, AltaVita Memory Care Centre, Frasier Meadows Retirement Community, Golden West Communities, Homewatch Caregivers, Hover Community, Juniper Village at Louisville, The Kapsak Law Firm, Life Care Center of Longmont, Mesa Vista of Boulder, Plan B Home Care Services, TRU Community Care, Vincent, Romeo & Rodriguez, and Windhorse Family and Elder Care. Thanks also to the City Senior Services of Boulder, Lafayette, Longmont, and Louisville, and to Calvary Bible Church.

CARE Connections
Boulder County Area Agency on Aging
P. O. Box 471
Boulder, CO 80306



INFORMATION AND ASSISTANCE IN BOULDER COUNTY

Within Boulder County, there are several key ways to access information and assistance about resources and services for older adults and their family caregivers:

- Check out **Network of Care for Seniors and People with Disabilities**, a comprehensive online service directory, at www.BoulderCountyHelp.org.
- Call the **ARCH Information and Assistance Line**, at 303-441-1617, and Boulder County Area Agency on Aging staff will respond to your message.
- Call the **Resource Specialist** in your community (numbers below). Services vary by community but include identifying needs, finding solutions, exploring options, and providing in-depth assistance.

Allenspark area	303-747-2592
City of Boulder	303-441-4388 (bilingüe: 303-441-3918)
City of Lafayette	303-665-9052, ext. 3
City of Longmont	303-651-8716 (bilingüe)
City of Louisville	303-335-4919
Lyons area	303-823-9016
Nederland area	303-258-3068
Niwot area	303-652-3850

