



Our caregivers are highly qualified and carefully selected individuals who are personally and thoroughly screened, bonded and insured. Most importantly our caregivers are totally committed, dependable and extremely caring of others. In addition to their previous experience, our caregivers receive continuous training that includes a specialized curriculum exclusive to Comforting Hands Senior Care that results in them becoming Certified Companion Aides™. These highly qualified and trained caregivers are ready to help you and your loved ones with a variety of daily activities such as:

- Warm and caring companionship
- Light meal preparation
- Incidental transportation
- Light housekeeping
- Medication reminders
- Bathing assistance
- Respite for family caregivers
- Information and referral services

Our personalized and affordable services are available 7 days a week and can range from a few hours a day to 24 hour care.

Caregiver Profile

Comforting Hands Senior Care Connection Summer 2015

Welcome to our Summer 2015 Comforting Hands Senior Care Connection!

In our Finance and Consumer Resources section read about “Selling a Home if Your Parent has Alzheimer’s.” Elder law attorneys get inquiries about this issue on a regular basis. Read about rights caregivers have to sell their parent’s home. Selling a parent’s home may be complicated and caregivers who are awarded guardianship can expect extra steps to sell the house. The court has to approve each step of the process.

Senior travel is booming and the travel industry is increasingly catering to this segment of the market. In our Rotating Topic section we have tips for safe senior travel. A good tip for safe senior travel is to seek out hotel rooms designed for people with limited mobility and other special needs, and ask for rooms close to the elevator to limit the need for walking. Another tip is bring original prescription bottles to answer any questions that might arise about them, especially if there’s a medical emergency. Since each airline has its own policy for on-board oxygen transport and in-flight oxygen usage. Contact the individual airline for its current policies.

“Hearing Loss in Seniors: Causes and Care” is the topic for the Senior Health and Lifestyles section of our newsletter. Roughly 50% of those 75 and older have hearing loss. There are two general categories of hearing loss: Sensorineural Hearing Loss and Conductive Hearing Loss.

Sensorineural hearing loss is permanent and occurs when there is damage to the inner ear or the auditory nerve. Conductive hearing loss occurs when sound waves cannot reach the inner ear.

Many caregivers don’t realize that tinnitus is a symptom, not a disease, so it can accompany any type of hearing loss. Tinnitus is the ringing, or hissing sound in the ears frequently caused by exposure to loud noise or certain medicines. Read the article to learn about the symptoms and diagnosis. The article further explains about current treatment and research.

Our society is largely untrained in how to help those who are grieving. The last section of our newsletter, Spotlight on Caregivers, “How to Help Someone Grieving,” provides guidelines as you assist someone who is grieving.

Live independently.
Live healthy.
Live at home.

With much aloha,

David T. Nakamaejo,
President
Comforting Hands
Senior Care





Selling a Home if Your Parent has Alzheimer's

It may be your beloved family home, or a house your parents bought and even downsized into after you moved out. Either way, if one of your parents is incapacitated due to Alzheimer's, at some point you or a sibling may need to sell the home, so they can move into a nursing home, assisted living facility or in with you. Elder law attorneys say the sale of a parent's home is an issue they receive inquiries about daily. Here's what caregivers need to know before sticking the "for sale" sign in the yard.

Q: Why can selling a parent's home be such a complicated issue?

A: The bottom line is that only the person who owns the house can transfer the house to a buyer, says Henry Carpenter, a certified elder law attorney with Bucks County Elder Law in Pennsylvania and a member of the National Academy of Elder Law Attorneys. If a parent has become incapacitated, he or she needs to have identified—through a power of attorney—someone who can act on their behalf, for the sale to take place.

Q: When a parent has Alzheimer's, what rights does a caregiver have to sell their parent's home?

A: "If the caregiver has no legal authority, then the caregiver has absolutely no right to sell the home. Period," says Wesley E. Wright, a certified elder law attorney with Texas-based Wright Abshire Attorneys.

If the parent has not established a power of attorney has lost capacity, the caregiver has to apply for guardianship to get the power to sell the home. Guardianship can be an expensive and emotional process.

Q: Should caregivers awarded guardianship expect any extra steps to sell the house?

A: The court has to approve each step of the process. If you're selling the house to pay a nursing home, for example, you have to file a petition in court to ask the judge to say you're authorized to sell the house and authorize you to pay the nursing

home a certain amount each month or year. Carpenter says those rulings could take one to two months, possibly delaying the sale of a home. The court also has to approve details of the sale, such as the sale price.

Q: How else does having a court involved impact the selling process?

A: You can't petition the court for approval to sell the house until you have a signed contract for the house. In the contract with the buyer, you should include that the contract is subject to approval by the court. Once you and the buyer sign that contract, it will be filed with the court. Then the court reviews it and decides whether or not is it a good deal, Carpenter says. "The real problem is where buyers have said, 'You know what? There's another house across town, I don't want to deal with all of this,'" he says. "That happens."

In one guardianship situation, Carpenter remembers getting permission from the court to sell the property, but having the buyer back out two days before closing. Another buyer, an investor willing to pay cash, quickly put in an offer but wanted to close in two weeks. Carpenter had to walk the petition through the process by

reviewing it with the court administrator and bringing it to judges' chambers. Within an hour, he had a signed order. But that's not the norm, with it usually taking two weeks to a month, he says.

Q: What other challenges could exist, even if a caregiver has power of attorney?

A: The title company still may not accept a power of attorney. In some cases, title companies question if the parent had the capacity to sign as power of attorney when they did or they may even say the power of attorney is too old, says Wright, also a member of the National Academy of Elder Law Attorneys. If power of attorney was recently created, the title company still may require your parents' signature or to see or talk to the parent to confirm the caregiver can handle the sale.

When the time comes to consider selling parent's house, caregivers will likely face some tough legal issues. It could be a rocky road. Don't go it alone. Seek advice from a reputable elder law attorney who is familiar with the type of situation you face.

<http://www.agingcare.com/Articles/selling-parents-home-alzheimer-149909.htm>



ROTATING TOPIC

Tips for Safe Senior Travel

Our director Doreen Barnes, who leads groups of seniors from 55 to over 90, says senior travel is booming, and the travel industry is increasingly catering to the needs of seniors. "Some of our people do take oxygen. We always encounter some walkers and wheelchairs," says Barnes, who is 76. Many of her clients receive some elder assistance from a child or friend.

Planning Trips for Seniors

According to Barnes, successful trips require a little extra planning. Seek out hotel rooms designed for people with

limited mobility and other special needs, and ask for rooms close to the elevator to limit the need for walking.

Special TSA Programs

The Transportation Security Administration, which screens all airline passengers, has established a special program for screening people with disabilities and their mobility aids, devices and other medical equipment. But advance notice needs to be provided to the airline or travel agent. A gate pass can also be obtained for anybody accompanying a person with

special needs. The limit of one carry-on and one personal item does not apply to medical supplies, equipment, mobility aids and assistive devices. If your loved one has a pacemaker, find out whether it's safe to go through the metal detector, and if not, make arrangements for an alternate screening method. Travelers ought to keep all medical supplies with them, along with personal identification, to avoid necessary items being lost with luggage.

The TSA asks that medications be packed in their own carry-on bag and that all medication be clearly identified. Packing medications in checked bags is discouraged, as not to expose them to X-rays. Larger quantities of medications can always be sent to a destination.

Managing Medications While Traveling

It's important that senior travelers have

enough medication with them for the duration of their trip. It is best to bring original prescription bottles to answer any questions that might arise about them, especially if there's a medical emergency.

“Medications are a lifeline for many travelers. But safely transporting them is often last on people's packing lists,” says Dr. Byron Thames, an AARP board member.

Thames recommends thinking in terms of “just in case.” Bring an extra week's supply of medications, and copies of the prescriptions (both brand and generic versions), because medication could be lost or stolen.

Traveling with Supplemental Oxygen

Each airline has its own policy for on-board oxygen transport and in-flight oxygen usage. Contact the individual airline for its current oxygen policies.

Personal supplemental oxygen will need

to undergo screening. Ask a doctor whether disconnection can be done safely. If it can't, a security officer can conduct an alternate inspection process. Also, if an oxygen supplier is needed to meet a loved one at the gate, caregivers must check with the airline well in advance of departure to make arrangements.

Arranging Special Transportation

Similarly, if your loved one has limited mobility, take advantage of special transportation services offered by airlines, cruise lines, and trains to board and alight safely, often via wheelchair. Call ahead to check whether the service is available, and if it is, make a reservation.

<http://www.aplaceformom.com/senior-care-resources/articles/senior-travel>

Senior Health & Lifestyles

Hearing Loss in Seniors: Causes & Care

Hearing loss is one of the most common conditions affecting older adults. Roughly a third of Americans age 65 to 74, and 50% of those 75 and older have hearing loss.

Types of Hearing Loss

There are two general categories of hearing loss:

Sensorineural Hearing Loss: This occurs when there is damage to the inner ear or the auditory nerve. This type of hearing loss is permanent.

Conductive Hearing Loss: This occurs when sound waves cannot reach the inner ear. The cause may be earwax build-up, fluid, or a punctured eardrum. Medical or surgical treatment can usually restore conductive hearing loss.

One form of hearing loss, presbycusis, comes on gradually as a person ages. Presbycusis can occur because of changes in the inner ear, auditory nerve, middle ear or outer ear. Some of its causes are aging, loud noise, heredity, head injury, infection, illness, certain prescription drugs and circulation problems such as high blood pressure.

Presbycusis commonly affects people over 50, many of whom are likely to lose some hearing each year.

Tinnitus, also common in older people, is the ringing, or hissing sound in the ears frequently caused by exposure to loud noise or certain medicines. Tinnitus is a symptom, not a disease, so it can accompany any type of hearing loss. Tinnitus can come and go, or it can persist or stop altogether. Tinnitus can also be a sign of other important health problems.

Some people may not want to admit they have trouble hearing. Older people who can't hear well may become depressed or withdraw from others to avoid feeling frustrated or embarrassed about not understanding what is being said. It is easy to mistakenly call older people confused, unresponsive, or uncooperative just because they don't hear well.

Symptoms & Diagnosis

Some people may have a hearing problem without realizing it. Others might think they have a problem, but are too embarrassed to tell their doctor, friends, or family.

You can

help identify a possible hearing problem by asking yourself the following key questions:

- Do I have a problem hearing on the telephone?
- Do I have trouble hearing when there is noise in the background?
- Is it hard for me to follow a conversation when two or more people talk at once?
- Do many people I talk to seem to mumble or not speak clearly?
- Do I misunderstand what others are saying and respond inappropriately?
- Do I often ask people to repeat themselves?
- Do people complain that I turn the TV volume up too high?
- Do some sounds seem too loud?

If you answered “yes” to three or more of these questions, you could have a hearing

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problem and you may want to have your hearing checked by your doctor. In some cases, he or she can identify the problem and prescribe treatment. Your doctor may refer you to an otolaryngologist. This doctor and surgeon has special training in problems of the ear, nose, throat, head, and neck. Your doctor may also recommend that you visit an audiologist. An audiologist can identify and measure hearing loss. If you need a hearing aid, an audiologist can help you choose the right one.

Treatment & Research

Many people who have a hearing loss wear a hearing aid. A hearing aid is an

electronic, battery-operated device that makes sounds louder to the wearer. Some hearing aids fit inside the ear canal, while others fit behind the ear. Hearing aids can be analog or digital. More advanced analog models can be adjusted with a computer to suit a number of environments, such as a room with a lot of background noise. Digital hearing aids use a computer chip to process sounds, and are the most flexible in adjusting to different environments. They are also the most expensive.

Other devices also can help you hear in certain listening environments. TV listening systems help you enjoy television or radio without being bothered by other

sounds around you. Some telephones work with certain hearing aids to make sounds louder and remove background noise.

If your hearing loss is severe and of a certain type, your doctor may suggest that you talk to a specialist about a cochlear implant. A cochlear implant does not restore or create normal hearing. Instead, it can help people who have a severe hearing loss be more aware of their surroundings and understand speech.

—By Caren Parnes
For The Senior’s Choice



SPOTLIGHT ON CAREGIVERS

How to Help Someone Grieving

As a friend or relative, there is nothing more difficult than watching those we love endure pain—especially the pain that comes from the loss of a loved one.

Our society is largely untrained in how to help those who are grieving, and you may be unsure of the best way to provide support for your loved ones during a very difficult time. The following guidelines can assist you as you provide a helping hand:

Don’t try to find the magic words or formula to eliminate the pain.

Nothing can erase or minimize the painful loss your friend or loved one is facing. Your primary role at this time is simply to be there. Don’t worry about what to say or do, just be a presence that the person can lean on when needed.

Don’t try to minimize or make the person feel better.

When we care about someone, we don’t want to see him or her in pain. Often we’ll say things like, “I know how you feel,” or “perhaps, it was for the best,” in order to minimize their hurt. While this can work in some instances, it never works with grief.

Help with responsibilities.

Even though a life has ended, Life doesn’t. One of the best ways to help is to run errands, prepare food, do laundry and help with the simplest of maintenance.

Don’t expect the person to reach out to you.

Many people say, “Call me if there is

anything I can do.” At this stage, the person who is grieving will be overwhelmed at the simple thought of picking up a phone. If you are close to this person, simply stop by and begin to help. People need this but don’t think to ask.

Talk through decisions.

While working through the grief process many bereaved people report difficulty with decision-making. Be a sounding board for your friend or loved one and help them think through decisions.

Don’t be afraid to say the name of the deceased.

Those who have lost someone usually speak of them often, and believe it or not, need to hear the deceased’s name and stories involving them. In fact, many griever welcome this.

Remember that time does not heal all wounds.

Your friend or loved one will change because of what has happened. Everyone grieves differently. Some will be “fine” and then experience deep grief a year later, others grieve immediately. There are no timetables, no rules. Be patient.

Remind the bereaved to take care of themselves.

Eating, resting and self-care are all difficult tasks when besieged by the taxing emotions of grief. Do not push the bereaved to do things they may not be ready for. Many griever say, “I wish they would just follow my lead.” While it may be upsetting

to see the bereaved withdrawing from people and activities, it is normal. They will rejoin with others as they are ready.

Avoid judging.

Don’t tell people how to react or handle their emotions. Simply let them know that you will help in any way possible.

Share a meal.

Invite the bereaved over regularly to share a meal or take a meal to their home since mealtimes can be especially lonely. Consider inviting the bereaved out on important dates like the one-month anniversary of the death, the deceased’s birthday, etc.

Make a list with the bereaved of everything that needs to be done.

This could include everything from bill paying to plant watering. Prioritize these by importance. Help the bereaved complete as many tasks as possible. If there are many responsibilities, find one or more additional friends to support you.

Make a personal commitment to help the one grieving get through this.

After a death, many friendships change or disintegrate. People don’t know how to relate to the one who is grieving, or they get tired of being around someone who is sad. Vow to see your friend or loved one through this, to be an anchor in this difficult time.

<http://www.holidaytouch.com/retirement-101/senior-living-articles/how-to-help-someone-grieving>