Questions & Answers

It is so nice to always have a special event to look forward to! We all truly appreciate the organizations and volunteers who work so hard to plan exciting year round events for us

.At Pleasantview we know how daunting it can be when someone you love is facing a major life care change. Our Questions & Answers page has been designed to offer guidance and help on learning more about the many questions you may face.



- <g&a>When is Medicare Open Enrollment for 2016 coverage?</g&a>
- Food ideas for those on soft or pureed diets
- Tips for avoiding scams
- Are you a safe driver?
- My mom is worried that she may no longer be a good driver. When should she guit driving?
- How will I get around if I can't drive?
- Do you have some gift suggestions for nursing home or assisted living residents?
- I'd love to host a family party for my mom. Do you have a space for that?
- What is hospice care?

When is Medicare Open Enrollment for 2016?

You can sign up for Medicare as soon as you become eligible, regardless of what month it is. However, each year, you have the option of making changes to your Medicare Advantage and prescription drug plan (or Medicare Part D) during open enrollment.

Open enrollment for 2016 begins on October 15, 2015 and ends on December 7, 2015. During that period, you can switch from original Medicare to Medicare Advantage, or vice versa. You can also switch from one Medicare Advantage plan to another, or from one Medicare Part D (prescription drug) plan to another, or drop your Medicare Part D coverage altogether.

There's also a Medicare Advantage disenrollment period (MADP) that runs from January 1 to February 14 each year. During this time, Medicare Advantage enrollees can opt to switch back to original Medicare, and can then sign up for Medicare Part D as well.

For 2015 coverage, open enrollment for Medicare Advantage and Medicare Part D ended on December 7, 2014, and the Medicare Advantage disenrollment period ended on February 14, 2015. However, enrollment continues year-round for people who are newly-eligible for Medicare.

Tips for Soft or Pureed Diets

When you host a party, attend a social gathering, or visit someone in a nursing home or hospital, your first thought may be - what can I bring to eat? Below are some suggestions for those on soft or pureed diets. A great gift would be a picnic packed for an outing on the patio or a trip to the park.

Soft Diet ideas

- Sandwiches egg salad, peanut butter and jelly, tuna, finely chopped chicken (no celery), etc.
- Appetizers cream cheese spread with soft crackers, humus with soft pita bread, finely chopped artichoke dip with soft pita, etc.
- Side dishes baked ziti, macaroni and cheese, cheesy potatoes (finely chopped potatoes), etc
- Desserts soft brownies (no nuts or chips), cream pies, baked custard, cheese cake, angel food cake, soft baked cookies (no nuts or chips) etc.
- Special treats milkshake, ice cream float, smoothie (no seeds), ice cream sundae with chocolate, carmel, maple syrup, etc.

Pureed Diet Ideas

- Appetizers guacamole (blended in blender), cottage cheese with fruit (and juice) blended, favorite cheese dip blended with extra milk, etc
- Main courses canned chicken or tuna salad mashed up (no celery), frozen broccoli and cheese (blended), mashed cheesy potatoes (blended), etc.
- Special treats milkshake, fruit smoothie (no seeds) baked custard, cream pie (no crust), homemade pudding, sundae with sauce, etc.

Tips for Avoiding Scams

The Better Business Bureau has pulled together an excellent Senior Awareness Initiative to help seniors avoid scams over the holidays season. To view the short version in a pdf format <u>click here</u>. If you would like to read the full articles with lots and lots of excellent information on the BBB web site <u>click here</u>.

- If it sounds too good to be true it probably is. Check the BBB reviews before ordering.
- Exercise caution with Craigslist always go with a friend and NEVER wire money.
- Keep your wallet safe and cover the pin pad keyboard when entering a PIN number.
- Research charities check the BBB for Wise Giving Alliance recommendations.
- Be careful with your email don't click on attachments you aren't absolutely sure
 of

Beware the Fake Package Scam

Watch out for poor spelling or grammatical errors.

- Ignore calls for 'immediate action' they're trying to make you act without thinking.
- Don't always believe what you see it's easy to copy a logo and insert it in an email. Fake email addresses will have slight variations from the real one.
- Don't be fooled by email links or download files from an unfamiliar email address, and remember that a hyperlink may not actually lead where it's claiming to go.

Phony Publishers Clearing House Calls

- Be wary of emails claiming you've won and asking you to send money.
- Never give your credit card number to collect a prize.
- Do not send money to claim a Sweepstakes prize.
- If an offer sounds too good to be true think twice it probably is. All you need to know is that no purchase is necessary and the winning is always free.

Are You A Safe Driver?

Maybe you already know that driving at night, on the highway, or in bad weather is a problem for you. Older drivers can also have problems when yielding the right of way, turning (especially making left turns), changing lanes, passing, and using expressway ramps.

What you can do:

- When in doubt, don't go out. Bad weather like rain or snow can make it hard for anyone to drive. Try to wait until the weather is better, or use buses, taxis, or other transportation services available in your community.
- Look for different routes that can help you avoid places where driving can be a problem. Left turns can be quite dangerous because you have to check so many things at the same time. You could plan routes to where you want to go so that you only need to make right turns.
- Have your driving skills checked. There are driving programs and clinics that can test your driving and also make suggestions about improving your driving skills.
- Update your driving skills by taking a driving refresher course. (Hint: Some car insurance companies may lower your bill when you pass this type of class.)

Is It Time To Give Up Driving?

We all age differently. For this reason, there is no way to set one age when everyone should stop driving. So, how do you know if you should stop? To help you decide, ask yourself:

- Do other drivers often honk at me? Have I had some accidents, even if they are only "fender benders"?
- Do I get lost, even on roads I know?
- Do cars or people walking seem to appear out of nowhere?
- Have family, friends, or my doctor said they are worried about my driving?

- Am I driving less these days because I am not as sure about my driving as I used to be?
- Do I have trouble staying in my lane?
- Do I have trouble moving my foot between the gas and the brake pedals, or do I confuse the two?

If you answered yes to any of these questions, it may be time to think about whether or not you are still a safe driver.

For more information on older drivers go to The National Institute on Aging - http://www.nia.nih.gov/health/publication/older-drivers

How will I get around if I can't drive?

Are you worried that, if you stop driving, you won't be able to do the things you want and need to do? You're not alone. Many people have this concern, but there may be more ways to get around than you think. For example, some areas offer free or low-cost bus or taxi service for older people. Some communities also have carpools that you can join without a car. Religious and civic groups sometimes have volunteers who will drive you where you want to go. Your local Area Agency on Aging can help you find services in your area. Call 1-800-677-1116 to find the nearest Area Agency on Aging.

You can also think about taking taxis. Sound pricey? Don't forget—it costs a lot to own a car. If you don't have to buy a car or pay for insurance, maintenance, gas, oil, or other car expenses, then you may be able to afford to take taxis or other public transportation. You can also help buy gas for friends or family who give you rides.

Gift suggestions for those in Nursing homes or assisted living.

Our number one gift choice for a nursing home resident is a scrapbook with pictures of family, friends, places visited, favorite foods, poetry, homes and neighborhoods one once lived. The joys and memories of past experiences, journaled with reminiscent comments offer a wonderful opportunity for conversation and reflection. This gift will be used frequently, especially during future visits.

Another great choice - many of our residents enjoy scheduled shopping trips to local stores. GIFT CARDS to a Dollar Store, especially the Dollar Tree, Wal-Mart and Marcs are always welcome.

Other gifts that have been very popular and practical include:

- A bedspread or afghan from home, perhaps hand-made by a family member
- A night light

- Roomy cotton, jersey and fleece clothing that is easy to put on (snaps or Velcro closures are often better than buttons. Elastic waistbands are more comfortable)
- Subscription to a favorite magazine or newspaper
- Washable cardigan sweaters (no wool)
- Word games, board games and puzzles
- Shawls and lap blankets (no wool)
- Stuffed animals, especially dogs, teddy bears, and cats
- Music some of the most enjoyed CD's are church music, big band/swing, polka, and sing-alongs
- "Gel Gems" window and mirror clings
- Scented hand lotions, creams, flavored lip balms and shower gel.
- A favorite dessert or treat
- Decorations that can be put on a walker or wheelchair

Note: Please label all clothing items with the resident's name using a permanent market. You might want to make sure it fits before you do this.

Do you have a place that we can host a family party for mom?

Family party space is available for groups of 25 or less. Please call Kristine Leonard, Activities and Volunteers Director at 440-887-4236 at least one week in advance to reserve space. Also, families are welcome to dine with a loved one on holidays. For information and to make a reservation please call Karen Sentabor in the Dietary Department, ext. 4222.

What is hospice care?

Hospice is a special healthcare option for patients and families who are faced with a terminal illness. A team of physician, nurses, social workers, bereavement counselors and volunteers works together to address the physical, social, emotional and spiritual needs of patient and family. The hospice team provides care to patients in their own home or a home-like setting regardless of the patient's age or ability to pay. There are many things to consider when making a decision about hospice.

What does hospice really do?

Hospice services provides many patient care services including symptom management, emotional support, spiritual support and psychosocial intervention. Hospice addresses the issues most important to the patient's needs and wants at the end of their life, focusing on improving the individual's quality of life.

How do I know when it is time for end-of-life care?

Patients are eligible for hospice care when they have been diagnosed with a terminal illness with a prognosis of 6 months or less. At that time comfort care and symptom management become the primary focus, and curative treatment is no longer the patient's choice or option.

When should hospice be called?

Hospice should be called at any time the patient has been diagnosed with a life-limiting illness. It is appropriate to discuss all of the patient's care options, including hospice.

Where is hospice care provided?

Hospice care is provided in a setting that best meets the needs of each patient and family. The most common setting is the patient's home. Hospice care is also provided in nursing homes, assisted living facilities and hospitals according to patient care needs.

Are all hospices the same?

No. "Hospice" is a medical specialty like pediatrics, geriatrics, oncology, etc. Each hospice is a different company. All hospices have the same general philosophy but their services may differ. Some hospices are for-profit corporations, while others are not-for-profit organizations.

Does Hospice provide 24 hour in home care?

No. Hospice provides intermittent nursing visits to assess, monitor and treat symptoms, as well as teach family and caregivers the skills they need to care for the patient. Team members are available 24 hours a day, 7 days a week to answer questions or visit anytime the need for support arises.

Does hospice do anything to bring death sooner?

No. The goal is always to alleviate suffering and manage symptoms. Hospice does nothing to speed up or slow down the dying process. the role of hospice is to lend support and allow the disease process to unfold as comfortably as possible.

Can I live alone and still receive hospice services?

Yes. Most Hospice services accept patients who live alone. Part of the admission and ongoing care process, however, is to plan and prepare for the time in a patient's illness when 24-hour-a-day care will be necessary.

Can a hospice patient choose to return to curative treatment?

Yes. Receiving hospice care is always a choice. A patient may leave hospice and return to curative treatment if that is their choice. If the patient later chooses to return to hospice care, Medicare, Medicaid, and most insurance companies permit re-activation of the hospice benefit.

Can I go back to the hospital and still receive hospice care?

Yes. Many symptoms, however, that would normally require hospitalization or an emergency room visit can be successfully managed at home by the hospice team, thus preventing the stress of hospitalization. Hospice patients generally only have the need for short hospital stays to stabilize a symptom and then are able to return home.

Is the decision for hospice care giving up hope or waiting to die?

No. Hospice is about living. Hospice strives to bring quality of life and comfort to a patient and their family. Our successes are in helping a patient and family live fully until the end. Often patients will feel better with good pain and symptom management. Hospice is an experience of care and support, different from any other type of care.

Do I have to be homebound to receive hospice services?

No. Hospice is about living fully. We encourage patients to do what they enjoy as they are able. The hospice team assists patients and families in achieving their goals and dreams as much as possible.

Does hospice provide support to the family after the patient dies?

Yes. Bereavement Services follow family and caregivers for a year following the patient's death. These services may include personal visits, providing information concerning the grief process and offering periodic opportunities for group support. Bereavement Services provides information and referral to other area resources when needed.