

# Caregiving Tips

Caregiver Information Booklet

Support for those  
who care for others



An Area Agency on Aging

# Family Caregiver Support Project

Northwest Regional Council/Area Agency on Aging

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## Caregiving Tips

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# Tips for Caregivers

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Caring for a frail older person at home may be made easier by simplifying the environment and by doing tasks that need to be done in the easiest way possible, even if that is different than the way you have done things in the past. Think about your situation. Make changes before a crisis. Taking care of yourself means you are more able to care for another person. Here are some ideas that have worked for others.

## **Promoting Safety at Home**

- Install hand rails or grab bars for tub and toilet
- Use night lights in the hallway and bathroom
- Remove extension cords and scatter rugs from pathways
- Reduce clutter
- Remove easy-to-trip-over furniture such as foot stools
- Keep household furnishings in the same place
- Use adaptive equipment to maximize safety and independence (lift chair, raised toilet seat, ramp)
- Use intercom or “baby” monitoring system
- Put a sticker on the telephone with an emergency number
- Use large number or push button phone with emergency numbers “programmed in”
- Install banisters on both walls of a stairway

## **Using Memory Aids**

- Use a large calendar to keep track of events
- Write a schedule of the day’s activities
- Repeat the names of visitors, including visiting family members
- Provide step-by-step instructions
- Use an identification bracelet or label clothes in case of wandering

## **Easing Activities of Daily Living**

- Bathe and groom at regularly scheduled times
- Use bath chair or bench in tub
- Use hand-held shower
- Limit fluids prior to bedtime
- Allow as much independence as possible, letting the person accomplish the task alone with supervision
- Prepare foods that are easily chewed and swallowed
- Use a system to make sure medications are taken correctly

## **Dealing with Caregiver Stress**

- Eat properly and get enough sleep and exercise
- Take time to get away
- Utilize available family, friends, or paid help
- Schedule visitors at different times to maximize the time you can be relieved of caregiving responsibilities
- Look for positive experiences in caregiving
- Maintain your sense of humor
- Use community resources for information and support
- Seek assistance with difficult situations and behaviors—knowing what to expect helps
- Join a support group
- Arrange for a comprehensive assessment to get specific recommendations

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# Tips for Traveling

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Traveling long distances with a person in the early stages of dementia may still be quite enjoyable. As dementia advances, however, traveling becomes unpredictable as the person becomes more confused.

## Preparing for a Trip

Prepare for a trip by gathering important documents: insurance cards, passports, your physician's phone number, refills on medications and a copy of medical records in case the person with dementia needs to see a physician while away. Make sure you keep track of all the documents and medications. Packing them in carry-on bags so they will not get lost en route is a good idea.



Remember to bring sufficient funds or a credit card with you in case you must change your plans suddenly and return home. Also, you may want to bring along a brief letter from your physician to the airline or hotel to expedite a change in plans.

## Sticking to a Routine

When traveling, try to follow the routine that is followed at home. And be sure to allow plenty of time for everything. Bathe and dress the person without rushing, have leisurely meals at restaurants at non-peak times and stay with favorite food choices. Plan for rest periods throughout the day. For example, if you're taking a tour by bus, you may want to remain in the bus so the person can take a nap instead of visiting all the sites.

## Wandering and Anxiety

The person who wanders when at home, may do so in an unfamiliar place. In the event that this happens, have the person wear a Medic Alert bracelet or necklace that clearly explains that she has a dementing illness. Put a card with the name and address of the hotel where you are staying in the person's pocket. You may want to carry a recent photo of the person in case he/she gets lost.



Traveling may also make the person more anxious. Bring along an anti-anxiety medicine "just in case."

## Toileting and Bathroom Issues

Toileting is an issue that requires some forethought when you are traveling. If you are driving, stop at the rest area toilets every couple of hours. If the person needs assistance in the bathroom and you may be in there for a while, bring along an "occupied" sign for the washroom door. Have on hand a full change of clothing and a supply of disposable underwear.

Bathrooms in unfamiliar places, such as hotel rooms, may pose problems, too. Be sure to keep the way to the toilet well-lighted, and turn on the night-light in the bathroom.



### A Few Extra Tips

A few more travel tips to keep in mind: If you're driving, never leave the person alone in the car. Try to bring along a relative or friend to share in the driving. And if you're traveling by plane, you may want to notify the airline ahead of time, so it can provide any needed assistance.

# Walking, Rising, & Seating

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## Walking

Although the client may show no signs of physical impairment, perceptual dysfunction can seriously impede her mobility.

- Walking through a crowded area is threatening for the client who is spatially insecure. It often helps if you offer her your arm and lead, rather than push, her through the area.
- A client may be able to move more securely if she is given a concrete visual target to head for, such as "the blue chair," and if the route to the destination is clear of obstacles.
- It may be necessary to break down a long trip into several "legs."
- Warning the client of obstacles and irregularities in the terrain may add to her security.
- A client who has an irregular gait or who has some physical impairment will walk more evenly if a rhythm is established. Take her arm firmly and use your body to set a somewhat exaggerated rhythm to the steps. This will encourage a more normal gait than verbal instructions alone would.
- A client who has difficulty coordinating the movement of a cane or a walker often responds well to instructions given in single words in the cadence of the walk, e.g., "Step, walker, step, walker."



## Rising from a Chair

This can become a serious problem for the more severely motor-impaired client. It can be frustrating and time consuming for both client and staff. When the task is approached in a step-by-step fashion, some of this frustration can be alleviated.

- The first step in rising from a chair is to move forward in the seat. Therefore, before attempting to transfer a client from a chair, ensure that she is positioned well forward.
- The second step is to position the feet back slightly under the seat of the chair and flat on the ground. The heels may be raised slightly, especially if the client has tight heelcords.

- The next step for the client is to lean forward, bring her body weight out over the feet, and push off with her hands either from her knees or from the arms of the chair. It sometimes helps to give the client gentle but firm pressure on the nape of the neck (not the back of the head) to bring the head forward and bring her center of gravity over her feet just as she is making the effort to rise. Some clients find it easier to execute this maneuver on the count of three, so their efforts and the staff members' efforts can be coordinated.
- If the client does not succeed in rising from the chair and standing on the first try, you may offer her a hand to help her balance herself, but avoid trying to pull her up. It may confuse her in her efforts to rise, and you may be left supporting her whole weight. This is not safe for you or for the client. Rather, let her back down gently and try again.
- A client who is very weak and who has poor balance is likely to need a walker for ambulating. Position the walker in front of her and let her pull up on it while you guide her as she shifts her weight.

### **Seating in a Chair or on the Toilet**

This is sometimes as difficult as rising and can be facilitated with the following techniques.

- Point out the chair as you approach it with the client.
- Approach the chair from the front and direct the client to bend slightly and place her hand on the chair arm on the opposite side.
- Then, while keeping her hand on the arm of the chair, direct her to “turn, turn, turn,” taking small steps until she is positioned with her back square to the chair. You may guide her by putting firm pressure on her hip and nudging her in the right direction.
- Once she is positioned, direct her to reach back for the other arm of the chair and ease herself down.
- Some clients have difficulty flexing their hips at this point. A little downward pressure with your hand on the nape of her neck may help get her down.
- For severely motor-impaired clients, a commode chair with arms placed over the toilet is very helpful.

Some complex maneuvers, such as getting in and out of the car, become even more difficult if the client is given time to “think” about what she is to do. At this point, she may realize that she cannot remember how to go about it and may get “stuck.” It often helps to keep up a casual conversation as you approach the car with her, open the door, and gently and unobtrusively position her for entry into the vehicle. The long-established pattern of movement will often take over.

In all these techniques, the principle applies of providing only as much help as the client really needs. Too much help can be as confusing as too little.