



VA Caregiver Support Program

## National Caregiver Training Program

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Caregiver Workbook

## Medical Disclaimer

Every Veteran, Servicemember and situation is unique, therefore this document is for informational and educational purposes only and is not meant to substitute the advice or care provided by the Veteran's or Servicemember's medical services provider (for instance, a physician, nurse, psychologist, social worker). If you have any questions or concerns about the particular needs of an individual Veteran or Servicemember, we urge you to contact his or her medical services provider.

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Defining  
**EXCELLENCE**  
in the 21st Century

**A Message to Family Caregivers Entering Easter Seals Training  
from VA Under Secretary for Health Robert A. Petzel, M.D.**

Hello,

VA welcomes you to the comprehensive Family Caregiver Program.

The Department of Veterans Affairs (VA) is pleased to offer you this educational program and we are grateful to the Easter Seals for their partnership in providing you the training and coping skills needed to provide the best care to the Veteran you love.

We at VA are committed to providing Family Caregivers who share our sacred duty to care for those 'who have borne the battle' with the best services available. You, as a Family Caregiver are a vital partner with VA. More importantly, the focus of VA has expanded to include support for you as an individual with unique needs and concerns beyond those you bear as the Caregiver of a Veteran or Servicemember.

The education program you are undertaking is only one aspect of the many new and expanded programs VA designed for Family Caregivers with the guidance and support of fellow Family Caregivers, Veterans Service Organizations and Caregiver Organizations. Among these new and expanded programs, a stipend, health insurance, mental health counseling and respite care services are available immediately. Over the coming year, a variety of educational and stress reduction programs will also be offered for Caregivers at each VA Medical Center and Caregiver to Caregiver peer telephone support will be enhanced.

Education, information and support are powerful tools, which Caregivers need if they are to be successful. We recognize the sacrifices that Family Caregivers lovingly make every day to enable Veterans to live with dignity and autonomy in their own homes. In caring for our nations heroes who fought and were injured to protect our freedom, you, the Family Caregiver, are a hero too. Going forward, your service to this country will not be overlooked.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert A. Petzel".

Robert A. Petzel, M.D.

Under Secretary for Health



## Acknowledgements

The National Caregiver Training Program was developed for the U.S. Department of Veterans Affairs by Easter Seals. Additional partners include the following agencies.



**Easter Seals** provides exceptional services, education, outreach and advocacy so that children and adults living with disabilities can live, learn, work and play in our communities.



**Atlas Research** works in partnership with leaders throughout VA to anticipate the needs of Veterans, and help develop and support proactive, data-driven approaches to meeting those needs. Atlas is a Service-Disabled Veteran-Owned Small Business.



**The National Alliance for Caregiving** is a non-profit coalition of national organizations focusing on issues of family caregiving. The Alliance works to strengthen state and local caregiving coalitions, and represent the US caregiving community internationally.



**Family Caregiver Alliance** is a national organization that improves the quality of life for Family Caregivers through direct services, education, research and advocacy since 1978.



**The National Alliance for Hispanic Health (the Alliance)** is the premier science-driven and community-based nonprofit organization that focuses on improving the health and well-being of Hispanics.



**National Family Caregivers Association (NFCA)** works to improve the quality of Caregivers' lives by providing services to build the confidence and capability of Family Caregivers and remove the barriers that make family caregiving so much harder than it needs to be.

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### Family Caregiver Thanks and Acknowledgement

The Caregiver Support Program of the Department of Veterans Affairs would like to thank the Family Caregivers and Veterans who read early drafts of this curriculum and guided its development by offering their invaluable and constructive feedback.

This curriculum is but one part of a larger commitment by VA to sustain and support Family Caregivers. Its goal is not only to educate on providing care for a Veteran at home but also to empower Family Caregivers to take care of themselves. Whether your caregiving journey is over months, years or decades, VA is here to stand by you.



## My Local Caregiver Support Coordinator

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**National Caregiver Support Line – 1-855-260-3274 (toll free)**

**VA Caregiver Website – <http://www.caregiver.va.gov>**

## Other Important Contacts and Phone Numbers

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.



## Introduction



On behalf of the Department of Veterans Affairs (VA) and Easter Seals, we would like to welcome you to the National Veteran Caregiver Training Program's Caregiver Workbook.

## Overview

Enacted on May 5, 2010, the Caregivers and Veterans Omnibus Health Services Act (Public Law No. 111-163) provides additional support to eligible post-September 11, 2001 Veterans and Servicemembers who elect to receive their care in a home setting from a Family Caregiver. This Workbook and related training materials build on the foundation of Caregiver support now provided at the VA and reflects what families and clinicians have long known Family Caregivers in a home environment can enhance the health and well-being of Veterans under VA care.

Immediately following this brief introduction, Caregivers are encouraged to fill-in the contact information for your local VA Caregiver Support Coordinator in the space provided on page 6 if you have not already done so.

## Workbook Purpose

This educational Caregiver Workbook is designed to be shared with Family Caregivers in a variety of formats:

- ★ As a **self-study guide** for review at home. Each workbook includes one companion CD/DVD that can be viewed and listened to using either a computer or a TV/DVD player.
- ★ As a **handout and discussion guide** for use in a classroom setting. Contact Easter Seals' National Veteran Caregiver Training Program staff at (866) 423-4981 to inquire about classroom trainings in your area.
- ★ As a **supplemental resource** for Caregivers participating in the Web-based learning version of the course located at VA's Caregiver website (<http://www.caregiver.va.gov>).

## Workbook Organization

The Caregiver Workbook consists of six modules covering a variety of topics such as strategies to enhance your own care and helpful hints for Caregivers who are providing hands-on support for a Veteran. Modules vary in length and include supplemental checklists and other resources that can easily be removed for future reference. At the end of each module, you will find a listing of topical resources along with a brief "knowledge check." Completion of these 5–10 questions is optional.





## Final Self-Assessment

At the conclusion of the Caregiver Workbook, you will find a Final Self-Assessment tool. Submission of this 20-question document will be used to certify your successful completion of the training program.

Once you've filled out this Final Self-Assessment Tool, it can be submitted in the following ways:

- ★ Via e-mail to [NVCTP@easterseals.com](mailto:NVCTP@easterseals.com)
- ★ Via fax to (202) 706-7555
- ★ Via mail to Easter Seals NVCTP, 233 S. Wacker Drive, Suite 2400, Chicago, IL 60606

Should you have any questions, please contact Easter Seals NVCTP staff at (866) 423-4981 or [NVCTP@easterseals.com](mailto:NVCTP@easterseals.com).



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## Module 1: Caregiver Self Care



In this module, we will focus on the importance of your role as a Family Caregiver and what you can do for yourself to keep life fulfilling and happy for you and your family. We know that caregiving does not occur in a vacuum. In addition to being the Family Caregiver of a Veteran, you may also look out for other family members, parents, siblings, in-laws and children. And, you may have a job, too.

We will share with you information about steps you can take to keep yourself physically and emotionally healthy. We also will offer you some tips related to your roles in meeting your family's needs and in the work place. A theme to remember: resources exist all around you that can be of help to you and the Veteran you care for.

Over the past decade there has been more attention to the important role that Family Caregivers play in the lives of both Veterans and non-Veterans. We have learned a lot about what helps a Caregiver carry on this valuable role and how Caregiver's themselves need support.

## Staying Healthy

### Why Is YOUR Health So Important?

Being a Caregiver requires stamina and good health. The journey is more of a marathon than a sprint and you need to be in the best condition you can be. Taking care of *you* is essential to your own well-being, and is crucial for the Veteran's health and comfort.

Because caregiving can be very demanding, Caregivers often don't exercise enough, don't eat a healthy diet, or delay seeking health care for themselves. Yet the demands of caregiving are precisely why a healthy lifestyle is so important. If you are in good physical and mental health, you will be able to handle the challenges that present each day and provide the best care possible to the Veteran. If you ignore your own health, you risk becoming ill. Maintaining your own health is an investment that will pay off for your whole family.

### Keys to Staying Healthy

In this section we will take a closer look at the following actions you can take now to "take care of YOU:"

- ★ Eat well.
- ★ Be physically active.
- ★ Prevent back injury.
- ★ Sleep enough.
- ★ Get preventive health services.



## Eating Well

Nutrition affects physical and emotional health. Proper diet helps protect the Caregiver from stress, while poor nutrition can lead to lower immunity and disease. Poor nutrition leads to fatigue, illness and disease. Small changes in diet can have benefits for health and wellbeing



You may be asking yourself, “With a very busy schedule, how can I eat well?” Or, “Where do I find the time to cook a proper meal?” Planning menus and making shopping lists ahead of time helps a lot. It makes grocery shopping quicker and preparation time shorter. Look for tasty, easy to prepare meals. When you cook, make extra and freeze portions to use later.

## Nutrition Basics

Understanding the basics of good nutrition will help you navigate through the overwhelming amount of information about what you should and shouldn't eat. The information below will help you in making good choices.

### Salt

Nearly all Americans consume more salt than is recommended. Since sodium added during the processing of foods provides more than three-fourths of total intake, it's important to read the sodium content on the food label on the back of the product when you are grocery shopping. Decreasing salt (sodium chloride) intake is advisable to reduce the risk of high blood pressure.

The general goal is for adults to aim to consume less than 2,300 milligrams of sodium per day (about one teaspoon of salt). Intake should be reduced to 1500 milligrams for persons age 51 and older, and those of any age who are African American or have hypertension, diabetes or chronic kidney disease. This applies to about half of the U.S. population, including children and the majority of adults.

## Saturated Fat

Saturated fats come from animal products such as meat, dairy products, and from coconut oil, palm/palm kernel oil and hydrogenated and partially hydrogenated oils. Some products that may be made with these oils are: fried chicken and fish, cakes, pies and cookies. In general, saturated fats are solid at room temperature. Saturated fats can raise blood cholesterol levels which are linked to higher risks of heart disease and stroke. Replace saturated fats in your diet with monounsaturated and polyunsaturated fats. Also try to consume less than 300mg of dietary cholesterol each day.

*Recommended goal is for less than 10% of your total daily calories to come from fat.*



Saturated fats come from animal products such as meat, dairy products, and from coconut oil, palm/palm kernel oil, and hydrogenated vegetable oils.



Some products that may be made with hydrogenated vegetable oils are: fried chicken and fish, cakes, pies, and cookies.





### Carbohydrates

Reducing intake of added sugars (especially sugar-sweetened beverages) may be helpful in weight control and balancing overall nutrition. A combined approach of reducing the intake of sugar and baked goods made with white flour will actually reduce your appetite, allowing for better weight control.

### Whole Grains

The goal is to eat at least three servings per day of whole grains, preferably by replacing foods with refined grains (e.g. white flour) with foods made with whole grains.

### Fruits, Vegetables, Dairy and Protein

Fruits/Vegetables	To meet your need for vitamins and minerals a range of 5-13 servings of fruits and vegetables each day is recommended.
Dairy	Most people need 2 to 3 cups of non-fat or low-fat milk, cheese, or yogurt each day.
Protein	Choose lean meat, poultry without skin, fish and dry beans and peas. Often, they are the choices lowest in fat. The suggested serving is 2-3 proteins per day.

### Maintain a Balanced Diet

Here are some nutritional tips from ChooseMyPlate.gov to help you maintain a balanced diet. For more information go to:

<http://www.choosemyplate.com>

#### Balance Calories –

- ★ enjoy food but eat less,
- ★ avoid oversized portions

#### Foods to Increase –

- ★ make half your plate fruits and vegetables,
- ★ make at least half your grains whole grains,
- ★ switch to fat-free or low-fat (1%) milk

#### Foods to Reduce –

- ★ compare sodium in foods like soup,
- ★ bread and frozen meals – and choose the foods with lower numbers,
- ★ drink water instead of sugary drinks.



### Nutrition Tips

Try to stock up on healthy snacks and try not to purchase unhealthy ones.

If you usually eat on the run, have fresh fruits, vegetables and proteins (like cheese wedges, roasted unsalted nuts or meat slices) ready in your kitchen to grab and go.



If you have five minutes, it really helps to wash and chop some healthy vegetables ahead of time, and then they'll be ready for you for a snack or when it's time to cook.

With everything you have to do, you may find yourself rushing through meals. This can cause overeating, because your brain doesn't get the chance to register the fact that your stomach is full. By slowing down and taking time to savor your food, you can reduce the risk of overeating and enhance your physical and emotional health.



### Water

Water is a wonderful drink whenever you are thirsty. Bodies, particularly when stressed (as Caregivers' bodies often are), require water. Water cleanses, refreshes and also cuts down on the urge to indulge in mindless snacking or overeating for comfort. If you find yourself eating too much at a meal, drinking a full glass of water before the meal may work for you. This helps your brain register that your stomach is getting full. It will help you feel full with normal portions.

### A Few More Tips

- ★ Eat multiple small meals throughout the day, rather than three large meals.
- ★ Don't skip meals.
- ★ If you aren't sure you are eating properly, keep a journal and review this with your health care professional.

## Physical Activity – Move Around!

You don't have to go to a gym to get the benefits of physical activity. The benefits of physical activity include: reduced stress, increased alertness, better sleep and more energy. Any way you move counts!

You can choose activities that are appealing and meaningful to you such as:

- ★ Stepping outside to do a little gardening.
- ★ Taking a brisk walk around the block.
- ★ Exercising to a DVD or video at home when you have time.
- ★ Doing every day chores has a health benefit.
- ★ Listening to music while doing chores can help.

*Five minutes of almost any physical activity  
offers benefits lasting hours afterward.*

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### Walking

Walking is particularly good. It provides both exercise and relaxation; can be done almost anywhere; for any length of time.

One way to increase the amount of walking in your day is to walk rather than drive short distances, or to park at the far end of the parking lot. Taking the stairs rather than the elevator is another good idea.

## Exercise

- ★ Five minutes of activity several times a day adds up to a good plan for obtaining moderate exercise.
- ★ Moderate exercise improves blood flow, enhances energy and diminishes risk for disease and injury.
- ★ Try to walk a total of 20 minutes a day, three days a week to start, and build up to 30 minutes, five days a week.

What activities do you, or can you start to, perform every day that keep you moving for at least five minutes?

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What small changes can you make to increase the amount of walking you do? For example: "Instead of emailing the co-worker two cubicles over, I can walk over to speak to her."

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Take a moment to write down types of extended exercise you can begin incorporating into your schedule starting now? (Biking? Running? What else?)

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## Protecting Your Back

Giving physical care increases the risk of getting a back injury. Lifting or helping a person shift from one place to another or moving a heavy or awkward object can seriously strain the back. The good news is that using back-protecting skills works.

The key is planning the lift. It's good to take these steps before starting:



1. Think through the whole move—plot it out.
2. Size up whether moving the object or person is truly manageable—if you can't comfortably handle the lift, you shouldn't do it.
3. Identify any obstacles in your way and remove them.
4. Bend your knees and lift with your legs, not your back.
5. Keep the object balanced as you lift.

## Getting a Good Night's Sleep

As a Family Caregiver, you may be sacrificing your own sleep needs for the needs of your family, including caring for the Veteran. Lack of sleep can make you less alert, impair your productivity and ability to pay attention, reduce your ability to remember new information and slow your reaction times.

*Most healthy adults, for best performance,  
need seven or eight  
hours of sleep every night.*





Experts say we need to make sleep a priority and put it on our “to do” lists like any other important task. Sleep is not what you do when everything else is done, rather it is essential and means leaving some things undone. Too little sleep is linked to:

- ★ Car accidents.
- ★ Obesity due to an increased appetite caused by sleep deprivation.
- ★ Diabetes and heart problems.
- ★ Depression.

### Tips for Better Sleep

To open the door to better sleep, sleep specialists recommend having consistent sleep-and-wake schedules, even on weekends, and offer the following tips:

- ★ An hour or so before you expect to fall asleep, enjoy a regular, relaxing bedtime routine such as soaking in a hot bath or listening to soothing music.
- ★ Submersing in warm water, or allowing it to flow over your body, is a known relaxant.
- ★ Taking a bath or shower before bed prepares the mind and body for deep sleep.
- ★ Create a sleep-friendly environment—a place that's dark, quiet and cool with a comfortable mattress and pillows.
- ★ Using meditation or relaxation recordings helps some people sleep.
- ★ White noise machines, or recordings of nature sounds, like the ocean, also can help.



*Rid your bedroom of "sleep stealers" that can keep you awake like watching TV, using a computer, or reading a book.*



## Exercise and sleep

Exercise regularly during the day. While exercising regularly will help you to sleep, it's usually best not to exercise close to bedtime, as this may keep you awake.



## Bedtime snacks and sleep

It's generally best to finish eating a few hours before going to bed.

- ★ Some people find that eating a small bedtime snack of sleep-promoting foods helps such as carbohydrates (like bananas or toast) or food containing tryptophan (like turkey or milk).
- ★ Foods containing caffeine, such as coffee or chocolate, can keep you awake if you have them within a few hours of bedtime.



## Preventive Health

Preventive health care like vaccinations and screenings, help you stay healthy and identify health problems early. Your family history will give your doctor some clues about the screenings you might need. Catching a problem early will help you take care of it before it impacts your health and takes away from your ability to provide care for the Veteran at home.



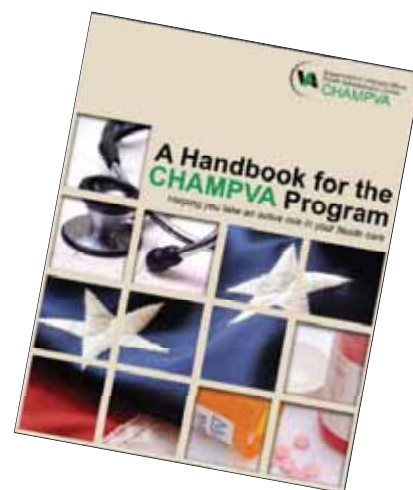
Most Caregivers are very diligent about the Veteran's doctor's appointments but may postpone scheduling their own. Some Caregivers haven't been able to afford medical care for themselves. Now, with access to The Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), eligible primary Family Caregivers will have access to the health care they need to stay healthy and identify health problems early.

### CHAMPVA Program

CHAMPVA is a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries.

*A Handbook for the CHAMPVA Program is available at <http://www.va.gov/hac>. It provides information on a wide range of covered services. The covered preventive services include:*

- ★ Immunizations and vaccines (e.g., that annual flu shot)
- ★ Cardiovascular screenings
- ★ Cholesterol screening
- ★ Diabetes screening
- ★ Mammograms
- ★ Pap test
- ★ Pelvic exam
- ★ Cancer screening (colorectal, skin, prostate, testicular, thyroid)



## Your Emotional Health

### Why Emotional Health is Important

When challenging things happen, emotional health lets you bounce back and move on. Most of us take emotional and mental health for granted and only focus on it when problems occur. But like physical health, it requires attention to build and maintain.

#### *Caregiving is a stressful job!*

A Caregiver's emotional health is very important. Chronic stress that doesn't go away can lead to health problems. There are many different tools that can help you achieve balance in your life, with time to relax, enjoy relationships, work and have fun.

Let's talk about things Caregivers can do to maintain their emotional health. First, ask for help. Reach out to social contacts. Get some respite from the day-to-day stress. And seek out support groups.



### Ask For Help

Sometimes Caregivers have a difficult time saying they need help. They're expected to be, or expect themselves to be, the strong ones, taking care of others' needs. But one of the best things a Caregiver can do to maintain emotional health is to ask for help.

There's no shame in letting others know that you need assistance. A great place to start is in your faith community, your neighborhood or social groups where you already have a connection to others. Support might come in the form of direct help with care, or assistance with meals or chores around the house. Having supportive people in one's life can make all the difference in an emergency.

Who will you ask for help?

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## Reach Out to Social Contacts

A five-minute break to touch base with a compassionate friend, relative or neighbor, even by phone, or e-mail can lift your spirits.

Caregiving can feel lonely and isolating. Keeping up social contacts helps a lot in staying well. Hearing the sound of others' voices, reading their supportive words, or sharing thoughts with a kindred spirit requires only a short time in a busy caregiving day. Yet, this regular contact maintains your social support network.



Who will you call?

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## Get Some Respite

Respite means having someone stand in for you so that you can take a break. Stepping away from caregiving for an hour or two, a full day or a week can help to relieve stress and restore your sense of well-being when you know that the Veteran is in good hands during your absence.

The VA provides enhanced respite support for Veterans and their primary Caregivers enrolled in the new Caregiver program as part of the Program of Comprehensive Assistance for Family Caregivers. VA respite options include:

- ★ In-home respite, when someone comes into your home to provide caregiving for the Veteran while you are away.
- ★ Adult day programs, where the Veteran can participate in a full day of programs and socialize.
- ★ Out-of-home respite at the VAMC, VA Community Living Centers, or assisted living communities and community nursing homes.

What resources will you use?

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## Seek Out Support Groups

Your local VA Medical Center, churches, non-profit groups, community hospitals and other health care providers offer support groups specifically for Caregivers.

Support groups are safe havens for exploring and expressing grief, fear, guilt, anger and loss, joys and sharing coping skills. They are also great places to exchange caregiving resources. A social worker or other professional often leads the group.

Individual psychological counseling provides crucial support for some Caregivers. Many Caregivers find the combination of attending a support group and getting private counseling helps a lot in managing stress.

In the Program of Comprehensive Assistance, primary and secondary Family Caregivers will be eligible to participate in individual and group therapy, counseling and peer support groups offered at the VA Medical Center. The counseling provided for the Family Caregiver is independent and not connected to the Veteran's care.



What support groups will you reach out to?

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## Symptoms of Stress

Stress is both a mental and physical reaction to events upsetting the balance in our lives. You might think there's nothing you can do about your stress level. But you really can control lots more than you first think. Taming stress is a matter of taking charge of your thoughts and how you deal with problems; controlling your schedule and seeking help from others. Many Caregivers also find relaxation techniques useful in reducing stress and feelings of burden.

Recognizing stress is the first step in relieving it. Here is a summary of some physical and emotional effects of stress.

### Self-Check

Are you experiencing any of these symptoms of stress? Check all that apply to you.

- |   |  |
|---|--|
| <input type="checkbox"/> Headaches                                | <input type="checkbox"/> Irritability          |
| <input type="checkbox"/> Neck and shoulder tightness              | <input type="checkbox"/> Depression            |
| <input type="checkbox"/> Fatigue                                  | <input type="checkbox"/> Forgetfulness         |
| <input type="checkbox"/> Trouble sleeping                         | <input type="checkbox"/> Poor concentration    |
| <input type="checkbox"/> Weight change                            | <input type="checkbox"/> Low productivity      |
| <input type="checkbox"/> Stomach upsets                           | <input type="checkbox"/> Negative attitude     |
| <input type="checkbox"/> Fear and worry                           | <input type="checkbox"/> Confusion             |
| <input type="checkbox"/> Mood swings                              | <input type="checkbox"/> Weariness             |
| <input type="checkbox"/> Crying spells                            | <input type="checkbox"/> Boredom               |
| <input type="checkbox"/> Increased use of alcohol, drugs, tobacco | <input type="checkbox"/> Feelings of isolation |
|   | <input type="checkbox"/> High blood pressure   |



How are you coping with your stress? Check all that apply to you.

- |  |   |
|--|---|
| <input type="checkbox"/> Deep breathing or other relaxation techniques         | <input type="checkbox"/> Accept help from friends and family when offered |
| <input type="checkbox"/> Time management                                       | <input type="checkbox"/> Meditation                                       |
| <input type="checkbox"/> Respite care to get breaks                            | <input type="checkbox"/> Exercise   |
| <input type="checkbox"/> Humor   | <input type="checkbox"/> Reward yourself                                  |
| <input type="checkbox"/> Stay in touch with friends                            | <input type="checkbox"/> Set limits                                       |
| <input type="checkbox"/> Join a support group                                  | <input type="checkbox"/> See a therapist                                  |
| <input type="checkbox"/> Read a book   | <input type="checkbox"/> Listen to music that lightens your mood          |
| <input type="checkbox"/> Keep engaging in activities that are important to you |   |

### Relieving Stress

Probably the simplest way to reduce your stress is to do something you enjoy and find relaxing. Some of these might work well in your life.

- ★ Go for a walk
- ★ Spend time outside
- ★ Take a long, hot bath
- ★ Play with a pet
- ★ Work in your garden
- ★ Curl up with a good book
- ★ Listen to relaxing music
- ★ Sweat out tension with a good workout

### Relaxation Techniques

You may also find it helpful to do some simple relaxation techniques like these. They may be done independently or in combination.

- ★ Breathing Exercises
- ★ Muscle Relaxation
- ★ Imagery Meditation
- ★ Mindfulness Meditation
- ★ Journaling



## Breathing Exercises

Breathing deeply is a quick way to relax. You can do it almost any place and time you need to relieve stress. Deep breathing helps maintain a sense of calm and it's part of almost all relaxation and meditation techniques. The key is to breathe deeply from your abdomen, rather than shallowly from your lungs, and get as much fresh air and oxygen into your lungs as possible.

### Instructions:

1. Sit or lie down in a comfortable position.
2. Put one hand on your stomach (and the other on your chest if possible).
3. Feel your breathing for a short time, noticing the rise and fall of your stomach.
4. Breathe in (inhale) deeply through your nose. As you breathe in, the hand on your stomach should rise (and the one on your chest should move very little).
5. Breathe out (exhale) through your mouth—push out as much air as you can and feel your stomach tighten as it flattens. Again the hand on your stomach should move (your chest shouldn't move much).
6. Be sure that you empty out all the air and then pause.
7. Try to inhale to the count of 10 and then exhale to the count of 10—this helps to slow your breathing.
8. Repeat this breathing for several minutes. If you are lying down, you can put a small book on your stomach and try to breathe so it rises as you inhale and falls when you exhale.



## Muscle Relaxation

Muscle relaxation techniques are easy to do. Combining muscle relaxation with deep breathing can be even more effective in relieving stress. Some people find muscle relaxation useful for helping them to fall asleep.



### Instructions:

1. Lie down in a comfortable position, with your arms slightly out to the side and your legs straight.
2. Start with deep breathing for a minute or so.
3. Concentrating on each body part, one at a time, you will tense its muscles as tightly as you can, hold them for 10 seconds, then release and completely relax.
4. Start with your head and face—you'll move down through your body to your feet and toes:
  - ★ Raise your eyebrows as high as you can and hold for 10 seconds and then release.
  - ★ Smile as wide and hard as you can, hold for 10 seconds and then release.
  - ★ Touch your chin to your chest, hold and then release.
  - ★ Raise your shoulders as high as you can, hold and then release.
  - ★ Force your arms straight making them unbendable, hold and then release.
  - ★ Make fists, hold and then release.
  - ★ Tighten your stomach, hold and then release.
  - ★ Tighten your buttocks, hold and then release.
  - ★ Force your legs straight, hold and then release.
  - ★ Bend your ankles, pointing your toes at your knees, hold and then release.
  - ★ Curl your toes, hold and then release.
5. After relaxing each body part, notice how heavy each part feels when it is totally relaxed.
6. When completed, continue performing the deep breathing.

## Meditation

A goal of meditation is to quiet the mind. It reduces the feeling of stress and can rein in your emotions. For beginners, concentrating on something specific helps block or let go of thoughts. Here we provide you with some basic information and exercises to get you started.

Imagery Meditation	Quiet your mind by imagining yourself in a relaxing place.
Mindfulness Meditation	Focus purposely on staying with a present experience whether that's the rhythm of your breathing, or a particular emotion, or something as simple as eating, as a means of creating a quiet mind where you feel calm and content.

### Imagery Meditation Instructions:

Before you begin, choose the type of place that you most enjoy. Some examples are being at the beach, beside a stream in the woods or in a flower-filled meadow in the mountains. If you use that same place each time you practice imagery meditation, it can become a special calming influence for you to draw upon during a stressful situation. By simply imagining this place, you can reduce your feeling of stress.

1. If possible, find a place to lie down. If you can't do that, seat yourself comfortably so you can fully relax.
2. Begin with deep breathing. Practice deep breathing for approximately five minutes.
3. As you calm down and relax, begin to imagine yourself in your special place.
4. Use your imagination to block other thoughts and allow your mind to quiet—concentrate on the details of the place you are imagining, for example:
  - ★ If you imagine the sky, ask yourself “What does it look like? Are there clouds? What shade of blue is it? Is it sunrise, sunset, mid-day? Where is the sun?”
  - ★ What's near you? If there are flowers, what are their colors? Are they in bunches, on vines, are they like daisies or some other flower? Are there birds? Are they singing? Is there water? Can you hear it? Where are you in this place? Are you on sand, grass, leaves? Are you in a chaise lounge, on a blanket or on the bare ground?
5. Each time a thought about something else intrudes, just let it go and concentrate on your special place.
6. Be sure to continue using deep breathing as you do your imagining.
7. Try to stay with the thought of the imagined place for 10-20 minutes.



## Mindfulness Meditation

Mindfulness meditation is a way to calm down and stop running on “auto pilot” as many of us do in our busy lives. Several mindfulness meditation techniques relieve stress, including:

Body scan	Focus attention on various parts of your body, as in muscle relaxation except that instead of tensing/relaxing you just notice how each part feels without judging whether the sensation is good or bad.
Walking meditation	Focus on what each step feels like—your foot touching the ground, the rhythm of your breathing as you move, the wind on your face, the beating of your heart.
Mindful eating	Sit down at the table, focus completely upon the meal (no TV, newspaper reading or eating on the run) and eat slowly, completely enjoying and concentrating on each bite.

Observing your breath is another technique you can use to develop mindfulness. The breath is a wonderful reminder of this present moment, since it’s something we can directly tune into that purely occurs in the present. We can’t hold our breath forever, or prevent the taking in of air, as long as we’re alive. Focusing on your own breathing gives you something to pay attention to in the moment, without making a judgment.

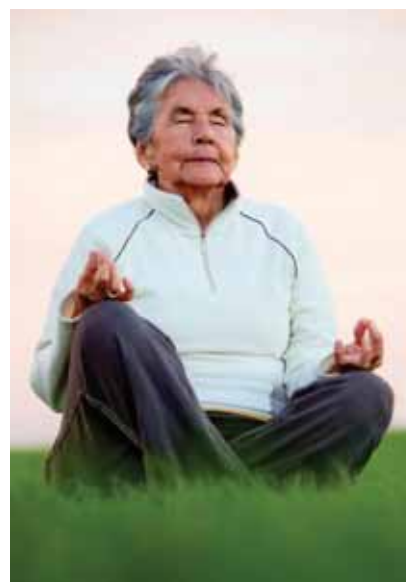
***Mindfulness does not come until we decide to devote some time and effort to it.***

Mindfulness practices can be part of daily living, such as dressing, walking and brushing teeth. Setting aside a few minutes each day will build and stabilize mindfulness. Over time, the benefits gained from mindfulness meditation are; a clearer mind and less stressed body, a greater sense of pleasure in ordinary things and a fuller appreciation of life.



You might think that meditation sounds like daydreaming, but that's not the case. If you try it you'll see that maintaining your concentration and bringing your mind back to the present when it starts to drift off takes effort. You'll get better at it over time. Done regularly, it actually changes the brain. The areas involved in joy and relaxation strengthen, while those involved in negativity and stress weaken.

As you try to focus the mind and pay attention, you'll be amazed to see how your mind jumps and wanders around—planning, dreaming and remembering. Over time, with repeated practice, the mind begins to settle down. Learning to recognize that the mind is wandering is considered a breakthrough in changing the old pattern of automatic pilot—if you can see that your mind is somewhere far away, you can bring your attention back to the present.



### Mindfulness Meditation Instructions:

Below is a practice exercise to do in a group, with one person reading the instructions to the others.

1. Sit in a chair with your feet flat on the floor, your hands resting in your lap and your posture upright yet relaxed. If you're comfortable doing so, close your eyes softly. Otherwise, try to gaze at the ground ahead of you. Your head, heart and stomach should be stacked one above the other. Perhaps you are noticing the pull of gravity in your jaw or shoulders, or the feel of your feet on the floor.
2. Bring your attention to your breath; notice it as you breathe in and breathe out. Don't force the breath in any way, just notice it as it enters and leaves your body. Perhaps focus on the sensation in your nostrils as you breathe or the rise and fall in your stomach. You might even place your hands on your stomach for a few breaths just to feel the movement of the belly as you breathe in and then out. Continue to bring your attention to your breathing.
3. (Pause for a minute.)
4. You might begin to notice that your mind is having some difficulty just staying with the breath. Perhaps you are thinking about something, notice a feeling of boredom or restlessness or this or that. This is normal. Our minds naturally jump around like monkeys from tree limb to limb. The more we try to rein them in, the more they will jump. See if you can just notice where your mind has gone without judging yourself. Perhaps when you notice that you are no longer focused on the in- and out-breath, you can gently bring your attention back to it. Perhaps you can do this each time you are able to notice that your attention has wandered from your breath.
5. Let's sit here for a while longer, practicing keeping your focus on your breathing.
6. (Pause for another minute.)
7. Gently open your eyes when you are ready.

If you're interested in learning more about meditation or would like to have an audio guide there's a free download (to your computer, iPod or MP3 player) at [http://www.helpguide.org/toolkit/emotional\\_health\\_audio.htm](http://www.helpguide.org/toolkit/emotional_health_audio.htm). It's called "Ride the Wild Horse" meditation guide.



## Journaling

Journaling is writing down personal experiences, thoughts and feelings. It often provides an emotional release and leads to valuable insights, whether in the moment or after reflection and review. Sometimes journaling just chronicles daily activities and values. It may even evolve into a personal memoir.

### Why Journaling is Beneficial?

Journaling is a powerful form of writing down your personal thoughts and feelings without anybody ever needing to know. Perfect spelling, grammar or artistic skills aren't necessary. It can be handwritten on paper or typed on a computer. It can be like a scrapbook, too, with photos and notes from others.

Journaling offers a flexible, low-cost, creative way to help cope with the worries, concerns, questions, challenges and feelings of isolation that may come with being a Caregiver for a Veteran.



Just taking the time to journal can give you a break from the demands of caregiving. In turn, these positive benefits may be passed along to the Veteran. Self-discovery and solutions to challenging issues occur when maintaining a journal, reviewing entries and reflecting on them. Practical plans may even be put into place as a result of journal notes.

### Getting Started Using Prompts

It's quite easy to start a journal. One way is to start with a prompt to get feelings or thoughts flowing, something as simple as:

- ★ "I feel..."
- ★ "Today I want..."
- ★ "I love you, but..."
- ★ "If I am honest with myself, I am..."

If you commit to writing at least six lines after such a prompt you'll have a solid journal entry, and maybe be inspired to write more. Why don't you give it a try?

“I feel...”

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“Today I want...”

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“I love you, but...”

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“If I am honest with myself, I am...”

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You can also use page headings as prompts. Prompts can explore feelings, hopes, wishes, desires and beliefs, all within the safety of the journal like these.

“Thoughts about caregiving”

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“How I want to care for myself”

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“What I’d like to do next for the Veteran”

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*Some prompts are good to repeat and revisit—the responses typically change over time.*



## Getting Started Using Themes

Some people find it helps to have a theme, such as:

A **gratitude** journal where you record all the things for which you feel grateful each day, week, etc. and note the people, animals, events and things that really matter to you.

An **ideas** journal where you record all the ideas and inspirations that flash into your mind at any time without warning. The ideas can be for anything at all and the journal provides a place that you can come back to as an idea-storming resource when you have the time.

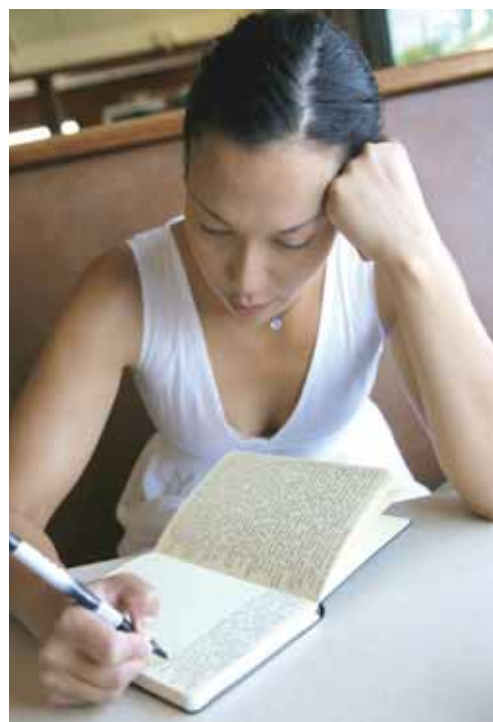
A **transition** journal where you record the transition you're going through. It can note changing patterns in your life and be a place to explore such questions as:

- ★ "What do I enjoy and not enjoy?"
- ★ "What do I expect for the future in what I am doing now?"
- ★ "Which people can help me as I transition?"

A **daily activities journal** where you simply record what has happened during the day. A note of a doctor's appointment or a visit to the VA can be a good way to track the value and scope of a busy caregiving schedule. And these entries may trigger further thoughts:

- ★ How should such future activities be handled?
- ★ What can we do differently?
- ★ How far have we come?

These markers provide a spot to take stock of the emotions stirred by these activities, too.





### Hints for a Rewarding Journaling Experience

**Find a quiet place** — a comfortable spot away from distractions.

Where can you go? \_\_\_\_\_

**Find the right time.** Some Caregivers pick the same time every day. Others like to keep their journal handy so that they can write things down when the right time presents itself. You may want to try different ways to see what works for you.

When is “your” right time? \_\_\_\_\_

**Relax.** Don’t worry about the appearance of what you write. Remember this is just for you.

What relaxation technique will you use? \_\_\_\_\_

**Reflect.** Use your journal to work through the hard stuff in your life. Take time to reread what you’ve written in the past—you might be surprised at how far you’ve come.

How often will you re-read previous journal entries? \_\_\_\_\_



## Who Will Provide Care in an Emergency? Creating a Plan

It's not possible to prevent every illness, even if you are paying close attention to your health. A Caregiver's illness impacts both the Caregiver and the Veteran. Having an emergency plan in case you get sick provides peace of mind and assures the Veteran's ongoing care.

Supportive relationships are especially important in a time of emergency. The quality and close connection of social supports is more important than having lots of individuals involved. Staying in routine touch with supportive friends and family via quick notes or calls fosters a healthy connection.



Contact and  
Caregiving  
Information

Designated  
Decision  
Maker

Important  
Papers

### Contact and Caregiving Information

It's a good idea to keep all contact information—names, phone numbers, email and/or street addresses—for family and friends up-to-date and easily available. Having this information on display at home makes it possible for someone else to make calls if you can't. A special list can identify people who have agreed to step in for caregiving support, if you, the Caregiver, fall ill.

It makes sense to keep crucial caregiving information up-to-date and accessible.

- ★ In-home calendars
- ★ Medical contacts and appointments
- ★ Medication lists
- ★ Every-day activities information
- ★ Nutritional requirements including allergies
- ★ Other important information about the Veteran

Anyone stepping in as a Caregiver will want to know these details. The Veteran's Primary Care Team also needs to have up-to-date contact information.

## Designated Decision-Making

Both you and the Veteran, if able, can empower a designated person to make health care decisions in the event of incapacity. A legal document, often known as a Durable Power of Attorney for Health Care, can be executed. See Module 6 for more information on these topics.

You can use a form to help you identify all your important information for ready reference by you or someone acting in your stead.

*Keep crucial information up-to-date  
and accessible.*





© Family Caregiver Alliance

**Where to Find My Important Papers – Page 1**

Name: _____			
Social Security No: _____			
Spouse/Partner's Name: _____			
Social Security No: _____			
Address: _____			
Date Prepared: _____			
Copies Given to: _____			
My valuable papers are stored in these locations. (Enter address and where to look.)			
A. Residence: _____			
B. Safety Deposit Box: _____			
C. Other: _____			
Item	A	B	C
My will (original)			
Power of attorney– healthcare			
Power of attorney--finance			
Spouse's/Partner's Will (original)			
Safe combination			
Trust agreement			
Life insurance policy			
Health insurance policy			
Homeowners policy			
Car insurance policy			
Employment contracts			



Where to Find My Important Papers – Page 2

Item	A	B	C
Partnership agreements			
List of checking, saving accounts			
List of credit cards			
Retirement papers			
Deferred compensation; IRA			
Funeral arrangements			
Titles and deeds			
Notes (mortgages)			
List of stored & loaned items			
Auto ownership records			
Birth certificate			
Military/Veterans papers			
Marriage certificate			
Children's birth certificates			
Divorce/separation records			
Other			
Other			

Important Names, Phone Numbers, and Addresses

Emergency Contact:

Doctor(s):

Clergy:

Attorney:

Accountant:

Insurance Agent:

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## Your Family and Your Job

In this section we provide some ideas and information to help you and your family support one another. We also offer some suggestions about tapping into resources in your workplace, if you also have a job. It's difficult for most people to talk about a serious injury, so we provide some tips about how to do this.



### Ways Families Cope

Each family has its own way to support all of its members, one that works for them. To tap into this resilience, experts in family therapy offer these recommendations. Take a moment to reflect on how your family copes.

Ways families cope	Don't do now	Do now	Could improve
Acknowledge the range of emotions that each person has and the struggle with taking on new roles.			
Understand that each individual has unique needs and these needs may change over time.			
Recognize that routines likely will alter to accommodate changes in the Veteran and each family member may need to take on new roles and get used to a new schedule.			
Realize that your family may struggle with feeling isolated since other families in your community are not going through the same things.			
Learn to ask for help from one another.			
Know that you might not get what you ask for and there might not be follow through, even when you asked and help was offered.			
Reach out for support.			
Learn to accept that "It's not fair!"			



## Working Together as a Family

To build and maintain family strength, you may find it useful to take some of these additional steps:

Have **regular family meetings** where each member of the family can talk about what's working and what's not, express feelings and give/get support. You can discuss distribution of chores, schedules and expectations.

Schedule **family fun days**—outings, movies with popcorn, “no chore” day, arts and crafts projects and the like so the family has positive experiences and memories to rely on when weary from day-to-day caregiving. Create a photo album or video from these days.

What fun activity could you put on the calendar for you and your family to enjoy?

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Have a **“mood” chart** so family members can show how they're feeling today. You can find various types of emotions charts, with facial expressions, by using the words “Emotions chart” in an internet search. This Website offers an educational unit for young children, which includes a facial expressions chart:

[https://Veteraneee.uci.edu/wiki/index.php/Face:\\_How\\_Are\\_You\\_Feeling\\_Today%3F](https://Veteraneee.uci.edu/wiki/index.php/Face:_How_Are_You_Feeling_Today%3F)



Start a **family blog** to talk about what's going on and enlist the support of extended family—those who are miles away and those who are nearby and can pop in with a meal or provide child care regularly or occasionally.

Join an **online support group** with other families going through the same thing. Experts who've worked with war-injured families have created a website, Courage to Talk.org, to help families communicate as a family, especially with your children. Professional resources and support are also available to help keep your family strong.



### Enlist Long-Distance Family Members

Long-distance family members can be the sounding board for the primary Caregiver. You can talk to them when you're having a bad day and feeling down. You may want to ask your relatives to initiate calling as well as be available when you call. You might need to prompt them to ask, "How are **YOU** doing?" in addition to getting an update on the Veteran and the kids.

Other suggestions include:

- ★ Ask if they can plan time to visit and give you a break—it lets you have some time with your children without the pressure and interruptions of caregiving tasks.
- ★ Delegate some tasks that don't require being at your house—such as helping with bill paying, organizing photos, creating systems to help things run smoother or doing a family e-newsletter.
- ★ If they have financial resources, suggest they treat you to a dinner out once a month or pay to hire an attendant to give you a break.
- ★ Ask them to be a special friend to the children so they know there's a safe person to talk to about their feelings when they don't want to say things to their parents.

### Getting support outside the home

Your family and Caregiver support system starts within the home, with family participation in an ongoing effort to help one another through each change and challenge. Support outside of the home is also necessary as the need for various support and services may be life-long and may change over time. Changing family support needs may be triggered by factors, such as:

- ★ The Caregiver's individuality, interests and personal needs may become submerged by the Veteran's needs.
- ★ Family members feel trapped and need opportunities for respite.
- ★ Family members may feel isolated because they've stopped socializing because:
  - It may be embarrassing to the Caregiver when out in public.
  - The Veteran may get lost or frightened in unfamiliar places.
  - The Veteran's behavior upsets strangers.
  - Peers just don't understand.

## Helping Children Cope

As you are learning to adjust in the Caregiver role, the children are also in a state of transition. In this section we will discuss:

- ★ Why it is important to consider the needs of the children, the effects the injury has on the injured Veteran's children and parenting after the Veteran's return home.
- ★ We'll also discuss tips for communicating with the children about the changes in the Veteran and at home and ways to help children cope with their feelings.



## Parenting and the Veteran's Return Home

It is especially traumatic when children welcome home a parent with injuries. It is important to be aware of the changes to the lives of the children and how it may affect them. They need help and support to cope with the transitions or trauma they are facing in response to the injury.

- ★ Encouraging the Veteran to stay involved in parenting helps boost morale and benefits the whole family.
- ★ Setting up new routines with the participation of all family members is helpful to keep the family functioning with as little stress as possible.
- ★ Consistent rules and consequences help your child feel more secure with so much change whirling around. Don't be surprised if your child misbehaves to test whether the rules are real. A steady response, with usual "consequences" or discipline will provide a sense of security, order and control to the child.



How parents deal with the change affects how the child will also deal with it. Be aware of your own reactions to the changes—if you are upset, the children will be upset.

The parent (and Caregiver) has many stressors, and often may not recognize that the children are not getting enough attention. Children may become lost in the hectic and confusing adjustment period.

## Challenges Children Face

When communicating with your child, it is important to be aware of the many challenges they face. Often, there is a shift in attention from them to the Veteran at home, and they don't fully understand. Outside of the home, they recognize that their peers are not going through the same changes and they may have no one with whom they can identify.

Furthermore, children may misunderstand the nature of the changes in the Veteran. For example, it may be difficult for them to understand that a change in the Veteran's personality or interests is related to the physical injury. Or they may misunderstand the nature of the injury itself.

Changing schedules and a lack of familiar routines can also leave children feeling disoriented and lost.

Every child has different needs and different ways of coping. We will provide you with some tips on how you may begin tailoring the way you communicate with children and help them to cope and express themselves.



## Children's Emotions

Over time, the Veteran's condition and the child's level of understanding will change so ongoing attention to communication is important. You can help your child understand that it's normal to feel the full range of emotions—sad, angry, fearful, dismissive and happy.

Children often experience conflicting emotions. Although happy to have their parent back home, children can resent losing the attention they were used to having and seeing so much go to the Veteran. At the same time they experience guilt at feeling resentment and ambivalence.

They may also be upset that the life they know has been disrupted and may experience depressions, anxiety or fearfulness.

They also may feel embarrassed if their parent looks or acts different from others. Depending on their understanding of the circumstances, they may feel a desire to take revenge on someone for hurting "my Mommy, or my Daddy." They may even feel they don't have a right to be happy if Mommy or Daddy doesn't seem happy.

What emotions have you observed in your children during the transition?

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### Communicating with Children

It's natural to want to shield children from unpleasant information, but doing that often backfires. Even babies pick up on emotional changes in the family. Children sense something bad has happened and become worried or frightened if they don't know what it is. Kids often imagine that it's worse than it is. Here are some suggested approaches:



- ★ Talk to your child about the situation as soon as possible, when you feel calm enough and won't be interrupted.
- ★ Whatever your child's age, sit together and talk at eye level—if you are calm your child will be better able to take in what you say. Use language your child can understand—don't provide *details* to a child who isn't ready to hear them yet. Take cues from your child—the questions asked, the topics brought up—to know the right time and how much to share.
- ★ Use props for young children—five-year-olds, for example, may find it helpful if you use a doll or puppet to show where the Veteran is injured.
- ★ Tell your child what's being done for the injured parent—it's important a child to know that the Veteran is getting the best of care.
- ★ Reassure your children that you are safe and they will be cared for and kept safe.
- ★ Provide your children with opportunities to have fun.
- ★ Let your child's school know what is happening at home so they may also help you to recognize when the child needs support.



### Using Art Activities to Communicate with Children

You can use art activities to help your child of any age to express his/her emotions. Younger children are especially receptive to joining you in some quality “art” time. Children make very personal connections to their artwork. They instinctively create and share their art as tangible extensions of themselves. Take advantage of this instinct to help them to work through their emotions during this time of adjustment.

Some helpful drawing activities you can do together with your children are included in this workbook for you.





Ask your child to draw a picture of your family.

## My Family



Ask your child to draw a picture of your family doing something together that they enjoy.

**I wish that my family could...**



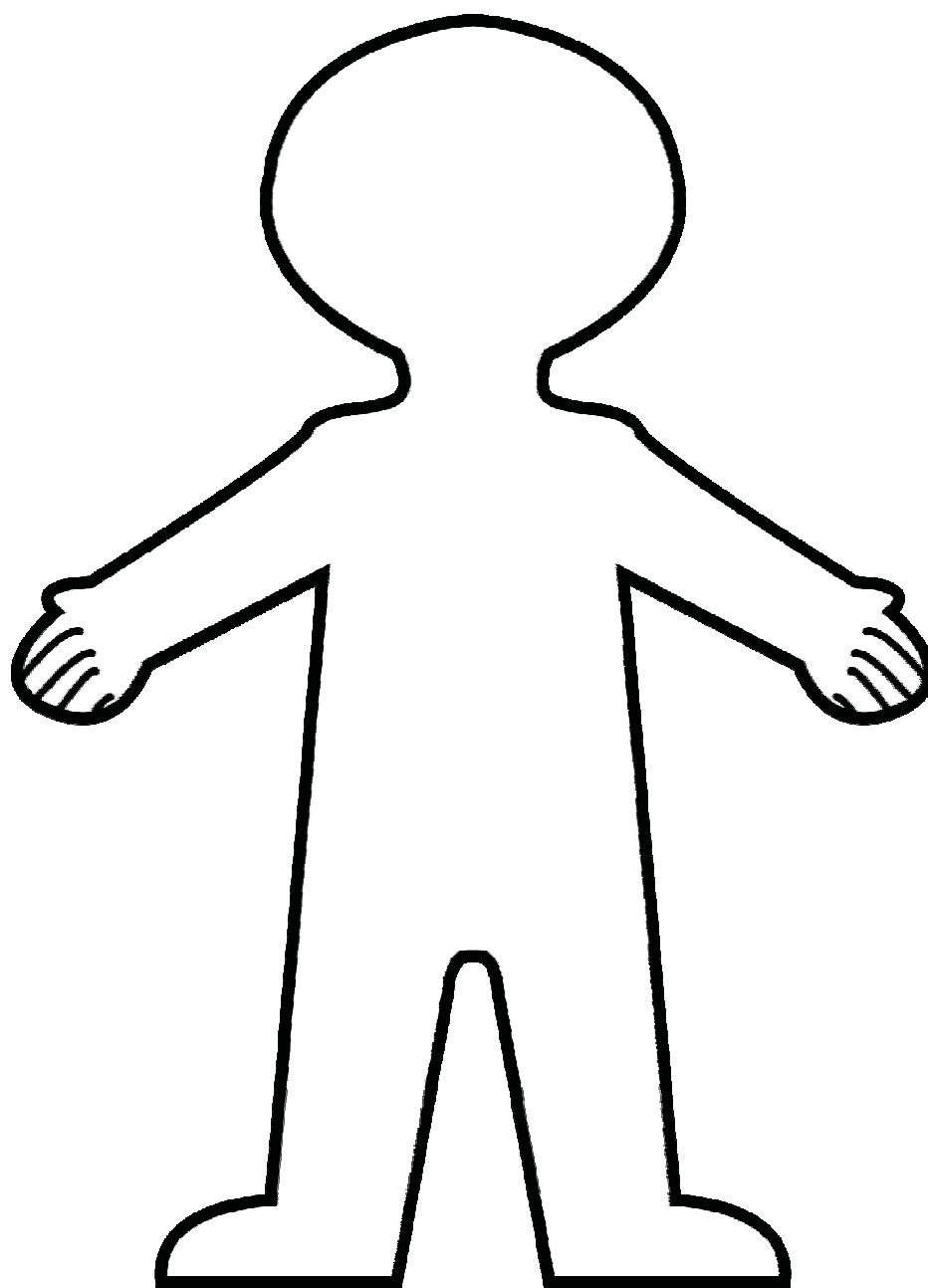
Ask your child to draw a picture of their feelings.

**When mommy or daddy says \_\_\_\_\_, I feel...**



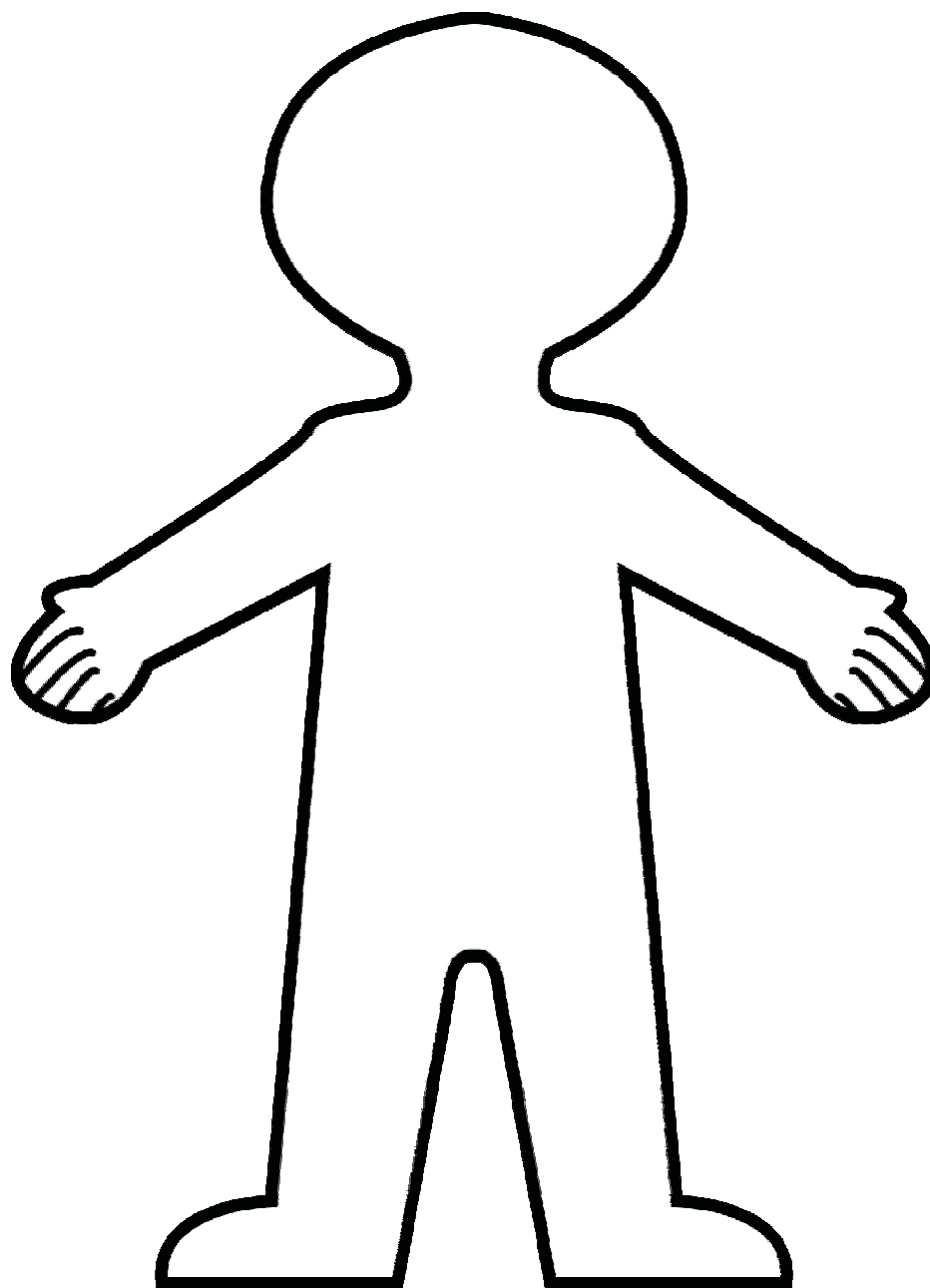
Ask your child to draw a picture of mommy or daddy and show where “it hurts”.

**Where does mommy or daddy hurt?**



Ask your child to draw a picture of where he or she hurts when mommy or daddy is hurt?

**Where do you hurt when mommy or daddy hurts?**



## Helping Your Children Respond to Others

If your children are **school-age**, friends, family and neighbors may continue to ask how the Veteran—their parent—is doing. Families often find it helpful to have a response ready—something brief, clear and easily repeated when needed. For example,

“My mom was injured in Iraq. She was in the hospital for six months and now she’s in rehab. We just moved into this neighborhood and I’m getting used to a new school and making new friends. I’m playing soccer.”

Parents can help children tell the caring adults in their lives—teachers, coaches, neighbors—what they need to know about the family injury.

## Communicating with Pre-teens

**Pre-teens** can be challenging throughout the recovery process. Between the ages of 9 and 12, children are most concerned with peers and fitting in. They compare their family to others. Some pre-teens are willing and able to help; others need more prompting. Here is some sample language for this age group:



“Daddy had a traumatic brain injury when the bomb exploded. It caused changes to the way his brain works. He needs a lot of rehab to learn how to do things again. He has trouble with his feelings sometimes. It isn’t about you. It’s hard to be patient and understanding. I know you get angry and frustrated, too. We need to keep talking about it.”

“Mommy is getting rehab so she can do all the things she used to be able to do. I’m sure you get frustrated sometimes when she needs help with something quite simple. It would be great if she didn’t have this problem, but we all need to work together to get things done around here. I appreciate your help and when you get done helping, maybe you’d like to have a friend over.”



## Communicating with Teens

Normal development for **teens** is to become increasingly independent, but now they're pulled back into the family. Although intellectually capable of understanding the details of the injury and family situation, they're not ready to be a "substitute" adult. They can become irritable and "act out"—take risks such as drinking, drugs or driving recklessly. Staying in communication is really important. Here are two examples of what to say to a teen:

"You know that Dad's leg had to be amputated because the bones were crushed and the medics couldn't save it. He gets cranky and moody when he has pain in his "phantom leg" and when he isn't making progress as fast as he would like. I know sometimes you're the recipient of his frustration and that he takes it out on you because of your pink hair. Try to understand that he loves you and is doing the best he can to cope. And he doesn't love you any less—it's just hard."

"Mom's PTSD gets in her way on her bad days. I'm sure it's no fun to come home to a moody parent who hasn't gotten out of bed all day and that you're embarrassed that the house isn't being kept up. But, she's getting help through the VA and on good days things are pretty much back to normal. It's hard to be patient, but we all need to hang in there together to get this to work for all of us. I worry about you and wonder if you are getting depressed also. Would you like to talk with a counselor about the stress you're under because of all of this?"

***Finding My Way: A Teen's Guide to Living with a  
Parent Who Has Experienced Trauma"**  
is a helpful book for teenagers.*

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## Watching for Signs of Depression

The moods of pre-teens and teens typically are like the wind. They can be pleasantly breezy and calm, and then suddenly whip into a howling rage. Aside from the teen moodiness, serious depression is a real possibility. Parents can help children through depression by looking for these symptoms and providing them with professional help:

- ★ Change in sleeping patterns.
- ★ Change in eating habits.
- ★ Acting out behavior, especially in the form of aggression.
- ★ Withdrawal/isolation – reluctance to go out with friends.
- ★ Lack of joy in doing things.
- ★ Moodiness.
- ★ Too much TV/computer use.
- ★ Decline in school performance.



## Making Your Job Work for Your Family

Although you're a Caregiver 24/7 you also may be employed several hours a day, or several days a week to make ends meet or to extend health care benefits. A job also may be a source of satisfaction and friendships, providing a welcome break from caregiving tasks.

Caregiver-employees have learned that it works best for their families when an employer can offer:

***Flex time***—being able to adjust your start and ending times, make up time and working flexible hours may mean the difference between working and not working.

***Telecommuting, or working from home***—enables you to meet the demands of the job while being present to oversee care.

***Part-time work***—allows you to meet the demands of caregiving yet maintain concentration on work days.

***Support*** from co-workers and supervisors.

***Family leave days or leave-time assistance***—co-workers may want to donate their paid time off to you to relieve your stress from time to time.



### ***Federal and state laws protect Family Caregivers from workplace discrimination.***

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The Family and Medical Leave Act (FMLA) requires companies with 50 or more employees to allow up to 12 weeks of unpaid leave to care for a seriously ill parent, spouse or child, while protecting job security.

Some states have Paid Family Leave programs. In California, partially paid time off is allowed for caregiving responsibilities.

## Resources & References

### Your Physical Health

- ★ An example of a recipe site is <http://www.epicurious.com>
- ★ Two examples of sites with nutritional guidance are the Mayo Clinic's <http://www.mayoclinic.com/health/nutrition-and-healthy-eating/MY00431> and the USDA's My Food Pyramid <http://www.mypyramid.gov/> which has interactive tools to get a personalized eating plan, or to plan and assess food and physical activity choices based on the Dietary Guidelines for Americans)
- ★ Family Caregiver Alliance "Where to Find My Important Papers" Available at: [http://www.Caregiver.org/Caregiver/jsp/content\\_node.jsp?nodeid=851](http://www.Caregiver.org/Caregiver/jsp/content_node.jsp?nodeid=851)
- ★ Family Caregiver Alliance "A Guide to Taking Care of Yourself" Available at: [http://www.Caregiver.org/Caregiver/jsp/content\\_node.jsp?nodeid=784](http://www.Caregiver.org/Caregiver/jsp/content_node.jsp?nodeid=784)
- ★ Family Caregiver Alliance. (2003). "Taking Care of You: Self-care for Family Caregivers. Available at: [http://www.Caregiver.org/Caregiver/jsp/content\\_node.jsp?nodeid=847](http://www.Caregiver.org/Caregiver/jsp/content_node.jsp?nodeid=847)

### Your Emotional Health

- ★ National Family Caregivers Association "Reaching Out for Help" Available at: <http://www.thefamilyCaregiver.org/pdfs/ReachOut.pdf>
- ★ National Family Caregivers Association "Believe in Yourself" Available at: <http://www.thefamilyCaregiver.org/pdfs/BelieveInYrself.pdf>

### Meditation

- ★ Defense and Veterans Brain Injury Center. Traumatic brain injury a guide for Caregiver of Servicemembers and Veterans: Module 3. Available in electronic format at <http://www.traumaticbraininjuryatoz.org>
- ★ Helpguide.org "Wild the Ride Horse" meditation guide, Free download available at: [http://www.helpguide.org/toolkit/emotional\\_health\\_audio.htm](http://www.helpguide.org/toolkit/emotional_health_audio.htm)
- ★ UCLA free mindfulness meditation downloads at: <http://marc.ucla.edu/body.cfm?id=22>



## Journaling:

- ★ “How to Keep a Journal” Available at: <http://www.wikihow.com/Keep-a-Journal>
- ★ “How Veterans Can Aid Resilience Through Journaling” Available at: <http://www.realwarriors.net/Veterans/treatment/journaling.php>
- ★ “Self-Discovery Through Journaling” Available at: <http://health.howstuffworks.com/wellness/women/general/self-discovery-through-journaling.htm>

## Your Family and Your Job

- ★ Center for the Study of Traumatic Stress, “Resources for Recovery: Communicating with Children about Parental Injury” Available at: <http://www.couragetotalk.org/talking.children.php>
- ★ “Families At Ease”-- works with family members and friends of Veterans of any era to help them help their Veteran get care 888-823-7458 (8:00 a.m.-5:30 p.m. ET), [Families.Ease.PA@va.gov](mailto:Families.Ease.PA@va.gov), or on the Web at <http://www.mirecc.va.gov/FamiliesAtEase>.
- ★ Sesame Workshop “Deployment, Homecoming, Changes, Grief.” Available at: <http://www.sesameworkshop.org/initiatives/emotion/tlc>

## Organizational Resources

Department of Veterans Affairs (VA)

VA Caregiver Support: Caring for those Who Care

<http://www.caregiver.va.gov/>

Easter Seals

(312) 726-6200

(312) 726-4258 (TTY)

Fax: (312) 726-1494

Toll-Free: (866) 423-4981

Submit questions online-

[http://www.easterseals.com/site/PageServer?pagename=ntl\\_contactus](http://www.easterseals.com/site/PageServer?pagename=ntl_contactus)

<http://www.easterseals.com/>



## Caregiver Self-Care Knowledge Check

1. All of the following are true of eating a balanced diet EXCEPT:
  - a. A balanced diet can support your immune system
  - b. A balanced diet helps fight fatigue
  - c. A balanced diet does not do much and takes too much time to plan
  - d. A balanced diet is often overlooked by Caregivers
  
2. What kind of reaction is stress? Pick one
  - a. Mental
  - b. Physical
  - c. Both
  
3. "Today I want..." at the top of a journal page is an example of a:
  - a. Wish list
  - b. Demand
  - c. Prayer
  - d. Prompt
  
4. Which of the following should be kept in a list that is easily seen in your home, in case someone needs to take over the caregiving if you get sick? Select all that apply.
  - a. Medical contacts and appointments
  - b. Medication lists
  - c. Activities of daily living information
  - d. All of the above





5. All of the following are good ways for Caregivers to cope with stress EXCEPT:
- a. Deep breathing and other relaxation techniques.
  - b. Humor.
  - c. Drinking more than one serving of alcohol each day.
  - d. Staying in touch with friends.

The answer key is located on page 167.



## Notes

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## Module 2: Home Safety



As a Caregiver, it is especially important to assure that your home environment is safe for the Veteran and yourself. Although home accidents and falls can cause serious injuries, these can be prevented by checking your home for safety hazards and making some simple changes.

## Slips, Trips and Falls

Falls in the home can cause head injuries and other injuries such as broken bones, bruises and burns. Veterans who have injuries or disabilities affecting their balance and ability to walk are especially at risk for slips, trips and falls.

Both slips and trips result from losing solid contact between the feet and the ground. You can minimize these by:

- ★ Making sure you and the Veteran wear shoes that fit properly and are securely tied or fastened.
- ★ Clearing walkways and paths of objects and obstacles.
- ★ Checking surfaces on outdoor pathways making sure they are flat, preferably concrete, packed dirt or asphalt.
- ★ Putting non-skid strips or mats on steps or other slippery surfaces such as the bathtub or shower.
- ★ Clean up all spills immediately.



Carrying groceries or other items can also cause trips so remember to:

- ★ Walk slowly and carefully.
- ★ Try not to carry too many items, particularly stacked boxes.
- ★ Keep one hand free when going up or down stairs.

## Fear of Falling

When Veterans have an injury or illness that weakens their legs, affects their balance or their ability to walk, they can develop a fear of falling. Although a fear of falling is a natural reaction it can actually result in increasing his/her risk of falling.

A fear of falling may cause someone to avoid walking and limit other physical activities. As a result his/her muscles become weaker thus setting up a cycle of further imbalance and slower reaction times to obstacles resulting in slips and trips.



So you can see why it is important that the Veteran remain as physically active as possible in activities recommended by his/her Primary Care Team.



## What to Do In an Emergency

If the Veteran is at risk for falling, it is important to be able to call for help if it is needed. Carrying a cell phone at all times, keeping emergency phone numbers in large print beside every phone and using a medical alert system can help the Veteran get help quickly in an emergency. Ask your Primary Care Team about how to access a medical alert system.



In addition to minimizing slips, trips and falls, it's helpful to take other safety precautions in your home. You can use the following home safety checklist to check the safety of your home and make necessary changes.



## A Safe Home is No Accident: A Checklist

### Check for the Basics throughout Your Home

Yes   No

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have emergency numbers next to the phone?                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there a stepladder handy?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Are electrical outlets exposed? They can be covered if unused.                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Are extension cords frayed? Replace them.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you check electrical outlets to be sure they're not overloaded?                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you know where the circuit breaker or fuse box is? Do you have spares?           |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you know how to turn off the electricity and gas in an emergency?                |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your hot water heater set at 120° F or below?                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have fresh batteries in the smoke detector and the carbon monoxide detector? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is your fire extinguisher ready to use?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Are your floors non-skid?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Are your floor coverings and rugs secure?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have protective screens in front of fireplaces?                              |
| <input type="checkbox"/> | <input type="checkbox"/> | Are candles kept away from walls and curtains?                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Do interior doors have safety release locks so they can open from either side?      |
| <input type="checkbox"/> | <input type="checkbox"/> | If there are small children in your home, are windows and screens secure?           |
| <input type="checkbox"/> | <input type="checkbox"/> | Is lead-free paint used on all surfaces?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Are furnaces and flues regularly inspected and cleaned?                             |
| <input type="checkbox"/> | <input type="checkbox"/> | Are guns unloaded and locked up?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Does everyone know two ways to exit your home?                                      |



### Check Your Stairs and Hallways

Yes No

- ☐ ☐ Are stairways free of clutter and throw rugs?
- ☐ ☐ Are banisters and railings strong and secured?
- ☐ ☐ Are all steps the same height and width?
- ☐ ☐ Are stairways free of toys, tools and other objects?
- ☐ ☐ Are stair treads and/or carpeting kept in good condition?
- ☐ ☐ Is the stairwell well-lighted with light switches at the top and bottom?
- ☐ ☐ Are young children protected by gates at the top and bottom of stairs?
- ☐ ☐ Are there nightlights in hallways and near stairs?

### Know What's Cooking in Your Kitchen

Yes No

- ☐ ☐ Are window curtains pulled away from your stove?
- ☐ ☐ Are electrical appliances unplugged when not in use?
- ☐ ☐ Do gas appliances have flue ventilation?
- ☐ ☐ Is there a light over the sink and the stove?
- ☐ ☐ Are freezers and trash compactors locked to protect children?
- ☐ ☐ Do you keep kitchen drawers and cupboards closed?
- ☐ ☐ Are knives and sharp tools stored in a rack or drawer?
- ☐ ☐ Do cooking pot handles point away from the stove's edge?
- ☐ ☐ Are cleaning supplies stored out of children's reach?
- ☐ ☐ Do you have pot or dish holders near the stove?



### Ensure You've Checked Your Bedrooms

Yes No

- ☐ ☐ Is a light within easy reach of the bed?
- ☐ ☐ Are room heaters placed away from furniture and turned off at bedtime?
- ☐ ☐ Are rooms with freestanding heaters kept well-ventilated?
- ☐ ☐ Is your baby's mattress firm and crib free of pillows and loose blankets?
- ☐ ☐ Are infant's and toddler's toys soft, with individual parts too large to be swallowed?
- ☐ ☐ Are pins and detachable decorations removed from small children's clothes?
- ☐ ☐ Are plastic dry cleaner's bags destroyed or kept out of children's reach?
- ☐ ☐ Does everyone know that there is no smoking in bedrooms?
- ☐ ☐ Are candles kept away from windows and curtains?
- ☐ ☐ Are closets kept clean enough for doors to open safely?

### Clean Up Any Bathroom Hazards

Yes No

- ☐ ☐ Do tubs and showers have non-skid surfaces or mats?
- ☐ ☐ Have grab bars been securely installed alongside the bathtub, shower and toilet – especially if someone is elderly or disabled?
- ☐ ☐ Are all electrical appliances kept away from water and unplugged after use?
- ☐ ☐ Are all medicines (including vitamins) kept in locked cabinets—out of children's reach?
- ☐ ☐ Do you separate medicines for external use only from other medicines?
- ☐ ☐ Do you throw away outdated prescription medications?
- ☐ ☐ Are infants and young children always supervised when bathing?
- ☐ ☐ Can the bathroom door be unlocked from inside and out?



## Evaluate Your Yard for Potential Hazards

Yes    No

- ☐    ☐    Are your steps and sidewalks clear, and free from toys, tools, ice and snow?
- ☐    ☐    Is your yard free from glass, nails, yard tools and any other sharp items?
- ☐    ☐    Do you check play equipment and lawn furniture for safe use?
- ☐    ☐    Are clotheslines strung high—so no one will walk into them?
- ☐    ☐    Does the person using the power mower wear sturdy shoes?
- ☐    ☐    Are children kept away from power tools when they're in use?
- ☐    ☐    Are gas and charcoal grills kept clean and lit carefully?

Periodically do a safety check of your home to identify items that need attention or as a reminder of safety behaviors you need to follow.



## Things to Do– Home Safety

[illegible]

## Things to Do– Home Safety

- ☐ \_\_\_\_\_
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- ☐ \_\_\_\_\_





## Ask for Help

Ask family members and friends to help you with the checklist and in making your home safe for you and the Veteran.

Who can you ask to help?

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The VA is also here to help. The Veteran may be eligible for home modifications such as lowering countertops, expanding doorways, or creating a roll-in shower.



A member of the VA Healthcare Team will be visiting you and the Veteran at home as part of the application for the Caregiver Support Program. Ask them if there are any assistive devices or home modifications that would improve the safety and independence of the Veteran and ease the physical stress of care giving.



What questions do you want to ask the clinician?

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## Emergency Preparedness

Protecting yourself and your family when disaster strikes, requires planning ahead. Every household should have an emergency plan and needed supplies in the event of simple emergencies such as loss of electricity due to storms, significant natural disasters (such as wildfires) or man made disasters (oil spills, terrorist attack). A disaster may require sheltering-in-place at home or evacuating to an emergency shelter or other form of temporary housing.



For Caregivers and the Veteran with a disability, the challenge of emergency preparedness is more complex and requires detailed advanced planning. Consider all the strategies, services, devices, tools, and techniques that the Veteran and you use on a daily basis. Examples include medications, durable medical equipment, consumable medical supplies, a service animal, assistive technology etc. Think about what you might do if any of these were limited or not available.

The essentials of Emergency Preparedness include:

- ★ creating a personal support network (Discussed in Module 1)
- ★ completing a personal assessment of what you can do for yourself and what assistance you may need
- ★ making a plan
- ★ assembling a disaster supplies kit

## Shelter-In-Place

One of the instructions you may be given in an emergency where severe weather conditions, such as a tornado warning, occur is to shelter-in-place. This is a precaution aimed to keep you safe while remaining indoors. (This is not the same thing as going to a shelter in case of a storm.) Shelter-in-place means selecting a small, interior room, with no or few windows, and taking refuge there. It does not mean sealing off your entire home or office building.

*Plan to be able to shelter-in-place  
at home for 3-5 days.*

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Should this occur, information will be provided by local authorities on television and radio stations on how to protect you and your loved ones. Because information will most likely be provided on television and radio, it is important to keep a TV or radio on, even during the workday. In the event you lose electricity, your disaster kit should include a battery powered or hand cranked radio. The important thing is for you to follow instructions of local authorities and know what to do if they advise you to shelter-in-place.

## Remaining at Home

In some situations, such as a severe snow storm, or storm damage with many trees down, you may not be able to leave your home for several days. Many of the same concepts discussed in “Shelter-In-Place,” also apply in these disasters.

If the Veteran is dependent on medical equipment run by electricity, contact your Primary Care Team to discuss an electric generator other ways to ensure that you will be able to use the equipment when your home does not have electricity. It is also important to contact your local utility company so that you will have priority to have power restored.

## How to Shelter-in-Place at Home:

- ☐ Get your family disaster supplies kit out and ready to use.
- ☐ If the weather remains unstable, you may be told to go to an interior room without windows, below ground level if possible.
- ☐ It is ideal to have a hard-wired (land line) telephone in your home in situations where you may lose electricity. Call your emergency contact and have the phone available if you need to report a life-threatening condition. Cellular telephone equipment may be overwhelmed or damaged during an emergency.
- ☐ Keep listening to your radio or television until you are told all is safe or you are told to evacuate. Local officials may call for evacuation in specific areas at greatest risk in your community.



## Complete a Personal Assessment

Decide what you will be able to do for you and the Veteran and what assistance you may need before, during and after a disaster. Make a list of the Veteran's personal needs and what resources are available to you to manage in a disaster environment.

### Daily Living

Yes No

- ☐ ☐ Do you need assistance with Personal Care of the Veteran such as grooming and bathing?
- ☐ ☐ Does the Veteran use adaptive equipment for bathing, such as a shower chair, and/or dressing himself/herself?
- ☐ ☐ Does the Veteran use special utensils to prepare or eat food independently?
- ☐ ☐ Do you have a backup for electrical equipment such as electrical lifts?
- ☐ ☐ Do you have a supply of water if service is cut off or you are unable to heat water?

### Getting Around

Yes No

- ☐ ☐ Do you need a specially equipped vehicle or accessible transportation?
- ☐ ☐ Do you need help to get groceries, medications, and medical supplies?
- ☐ ☐ Do you have a planned exit route following a disaster?
- ☐ ☐ Do you have a plan to cope with debris in your home or along your exit route?
- ☐ ☐ Will you be able to reach the Veteran if roads are blocked or the disaster has affected the Veteran's home?

### Evacuating

Yes No

- ☐ ☐ Does the Veteran need help to leave the home?
- ☐ ☐ Have you identified the best exits in the Veteran's home to use in an emergency?
- ☐ ☐ Is there an in home alarm that the Veteran can access?
- ☐ ☐ Do you have a plan if you are not able to locate mobility aids such as wheelchairs? Or if ramps shake loose from the house?
- ☐ ☐ If the Veteran has a service animal, do you have a plan on how to evacuate, and care for the animal?





## Community Emergency Agencies

Contact your local emergency management offices to learn about the Veteran's community response plan, evacuation plan, and designated emergency shelters. Find out how local authorities will warn you or the Veteran of a pending disaster and how they will provide information to you during and after a disaster. Ask about special assistance programs in the event of an emergency. Many communities ask people with disabilities to register with the local fire department or local emergency management office to rapidly locate those needing assistance in a disaster. If you have a secondary Caregiver, let him/her know that you have registered, and with whom.

## Make a Plan

The American Red Cross recommends following these four preparedness steps.

1. Get information
2. Make a plan
3. Assemble a kit
4. Maintain your plan and kit

### Step 1: Get Information

Learn what types of threats or hazards are prevalent in your area and contact local agencies to find out about your community's emergency response plans, warning systems, and assistance programs.

### Step 2: Make a Plan

Meet with your support network and discuss what you learned about your community's emergency response plans, as well as your own personal assessment of the type of assistance and support you may need.

Create a communication plan and identify an out of town contact who could act as "communication central" in the event you need to execute your emergency plan.

Test your plan against various hazards or disaster scenarios. Ask yourself, "What if?" then discuss alternative actions to take for each type of scenario using the planning worksheet on the next page.





## Planning Worksheet

Type of Hazard / Threat: \_\_\_\_\_

Discuss what to do before the threat if there is sufficient warning to prepare.

What if...	Then do...

Discuss what to do during the threat to protect you, the Veteran and pets.

What if...	Then do...

Discuss what to do after the threat to get help for you, the Veteran and pets.

What if...	Then do...



### Step 3: Assemble a Kit

Have disaster supplies ready and be prepared to leave at a moment's notice with all the supplies you may need in a portable container near the exit door.

Also consider having an emergency supply kit in each car and at work.



#### Recommended Items to Include in a Basic Emergency Supply Kit:

- ★ Water, one gallon of water per person per day for at least three days, for drinking and sanitation
- ★ Food, at least a three-day supply of non-perishable food
- ★ Battery-powered or hand crank radio and a NOAA Weather Radio with tone alert and extra batteries for both
- ★ Flashlight and extra batteries
- ★ First aid kit
- ★ Whistle to signal for help
- ★ Dust mask, to help filter contaminated air and plastic sheeting and duct tape to shelter-in-place
- ★ Moist towelettes, garbage bags and plastic ties for personal sanitation
- ★ Wrench or pliers to turn off utilities
- ★ Can opener for food (if kit contains canned food)
- ★ Local maps
- ★ Cell phone with chargers, inverter or solar charger
- ★ Medications the Veteran is taking
- ★ Emergency Cash

#### Step 4: Maintain Your Plan and Kit

At least once a year review and update your plan with new information, contacts, or action items. Also take an inventory of the items in your emergency kit and replace or replenish it as needed.

For more in-depth information, get a copy of "Disaster Preparedness for People with Disabilities" (A5091) from the American Red Cross, or visit:

[www.redcross.org/services/disaster/beprepared/disability.pdf](http://www.redcross.org/services/disaster/beprepared/disability.pdf)



#### Resources & References

- ★ VA Caregiver Support website at <http://www.caregiver.va.gov>
- ★ VA Caregiver Support Line at 1.855.230.3274

## To Do List – Emergency Preparedness

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## Home Safety Knowledge Check

1. Match the safety problem with the area of the home where you would find it.

a. Throughout the home	g. Loose banister or railings
b. Stairs and hallways	h. Uneven surface or cluttered walkway
c. The kitchen	i. Throw rugs
d. Bedrooms	j. Open drawers and pantry doors
e. Bathroom	k. Smoking in bed
f. Outside Entrances	l. Hair dryer plugged in
  
2. How wide should the path be through each room in the house?
  - a. 2 feet
  - b. 3 feet
  - c. It doesn't matter, just have a pathway
  
3. Falls in the home are the leading cause of head injuries?
  - a. True
  - b. False
  
4. How well your shoes fit has nothing to do with tripping or falling.
  - a. True
  - b. False
  
5. Fear of falling can be caused by:
  - a. Lack of confidence
  - b. Psychological factors
  - c. Loss of mobility
  - d. All of the above



6. To help reduce fear of falling, you should encourage the Veteran to:
  - a. Reduce the amount of activity he/she gets
  - b. Stay physically active

The answer key is located on page 167.





## Notes

This image shows a full page of blank white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for writing or drawing. There are no margins, text, or other markings present.

## Notes

[illegible]

## Module 3: Caregiver Skills



In this module we will review some of the skills that will assist you in caring for the Veteran. As a Caregiver, you are an essential part of the Veteran's health care team in monitoring physical health and well-being. The skills that will be reviewed in this module are:

- ★ Vital Signs
- ★ Infection Control/Avoidance
- ★ Skin Care
- ★ Medication Management
- ★ Pain Management

Although the Veteran you care for may not need daily monitoring in these areas, the information presented in this module can be helpful to know.

## Vital Signs

Vital signs measure the basic functions of the body. It's helpful to monitor the Veteran's vital signs to detect any changes in the status of the Veteran's health. Some basic vital signs that are commonly tracked include:

- ★ Temperature; body temperature in degrees.
- ★ Pulse (or Heart Rate); beats per minute.
- ★ Respirations (breathing rate); breaths per minute.
- ★ Blood pressure; not covered in this lesson.



To take vital signs you will need a thermometer and a watch with a second hand. You may want to have a pen and pad of paper nearby so you can write down the results. Using a calculator to find the “average” can help to speed up the process and ensure accurate results. Sharing accurate vital sign records with the Veteran's Primary Care Team can help them make better decisions.



## Body Temperature

The normal body temperature can range from 97 to 99.6 degrees Fahrenheit. Knowing the Veteran's usual temperature can help you determine when there might be a problem, such as an infection. When a Veteran has an infection or illness, the body temperature can rise. A body temperature over 104 degrees can be dangerous. It's best to call the Primary Care Team if the Veteran has a temperature

that is one degree above his/her normal body temperature, unless the Primary Care Team has given you other instructions.

Measuring temperature with an oral thermometer is the most convenient. At other times the Primary Care Team may ask you to use a rectal thermometer or an ear thermometer. Since thermometers are not all the same, it's helpful to have the right one. Some Caregivers may choose to use a digital thermometer, as it may be faster and easier to read.

Factors that influence body temperature include environment, exercise, age and drinking either hot or cold fluids just before taking the temperature. All of these can affect the body temperature readings so:

***Ask the Veteran not to drink anything 10 to 15 minutes prior to taking his/her body temperature.***

---

## Instructions

To take an oral temperature, ask the Veteran to sit upright. If the Veteran must stay in bed, then it's helpful for him/her to be in a sitting position.

1. Ask the Veteran to open his/her mouth and lift up their tongue.
2. Gently place the thermometer under the tongue.
3. Have the Veteran close his/her mouth without biting on the thermometer.
4. Push the start button, if you are using a digital thermometer.
5. The digital thermometer will beep when it is done. It will show the Veteran's temperature in Fahrenheit degrees (leave a glass thermometer in place 3-5 minutes).

***Remember to clean the thermometer before storing it.***

---



### Pulse or Heart Rate

The pulse gives you a sense of the health of the heart. The pulse, or heart rate, is the number of times the heart beats in one minute. You may also check the rhythm of the heart and the strength of the pulse. Having a watch with a second hand or a stopwatch handy to measure pulse will be helpful.

The normal heart rate can range from 60 to 100 beats per minute. Activity, stress, worry and anxiety, as well as caffeine, nicotine and some medications can affect the heart rate. The heart rate can also increase with pain or sickness. Familiarize yourself with the Veteran's usual resting heart rate. This is the heart rate when the Veteran has not been participating in exercise or heavy activity. Knowing the Veteran's usual heart rate will help you to identify when something has changed.

The pulse can be felt in several different places; however, we'll concentrate on how to take the pulse at the wrist and the neck. If you need to know other methods, your Primary Care Team can help you.

### Instructions

1. Have the Veteran sit up straight, resting his/her arm on a table or tray, if possible. Relax the hand and arm with the palm of the hand facing up toward the ceiling.
2. Place a watch with a second hand where you will be able to see it.
3. To take the pulse at the wrist, place the tips of the first and second fingers (index and middle fingers) on the Veteran's wrist about one inch below the thumb. At first it may be helpful to move your fingers gently until you feel the pulse.
4. To take the pulse at the neck, you will use your first and second fingers. Place them on the side of the neck, about half way between the ear and chin, where the chin meets the neck, just to the side of the windpipe.
5. For either technique, count the pulse for 60 seconds. You can also count for 30 seconds and multiply the pulse by 2.

If you are unsure, try it again. You can also take the pulse three times and then average them. To do this, add up the pulse readings from all three measurements, then divide by three. This will be the average pulse rate.



## Let's Give it a Try!

Ask a friend or family member if you can practice taking their pulse.

Wrist Pulse		Neck Pulse	
Rate:		Rate:	
Date:		Date:	
Time:		Time:	

When you are taking the pulse, you can also be aware of the rhythm of the beats—if they are regular or seem to skip.

Write your description of the pulse you just took.

Wrist Pulse: \_\_\_\_\_

Neck Pulse: \_\_\_\_\_

You can also be aware of the strength of the pulse—is it strong or weak?

Write your description of the pulse you just took.

Wrist Pulse: \_\_\_\_\_

Neck Pulse: \_\_\_\_\_

If you think that the heart rate has changed, for instance increased unexplainably, you can wait a few minutes and then take it again.

Wrist Pulse		Neck Pulse	
Rate:		Rate:	
Date:		Date:	
Time:		Time:	



### Affects on Pulse Rate

The pulse rate can be affected by some medications. Ask the primary care team if medications the Veteran takes will affect his or her pulse. Other things that may affect the pulse rate are:

- ★ Activity and exercise.
- ★ Stress, worry and anxiety.
- ★ Caffeine, nicotine.
- ★ Pain.
- ★ Illness.



It's best to contact the Primary Care Team immediately if there is any significant change that cannot be explained. These changes may include:

- ★ The pulse is very different from the Veteran's usual reading.
- ★ A heart rate that is over 100 and the Veteran has not been exercising, drinking coffee, or doing anything else that might cause this to happen.
- ★ The heart rate is irregular or unusually rapid, or if the Veteran is experiencing chest pain, dizziness, fainting, lightheadedness or shortness of breath.
- ★ If the Veteran feels cold and sweaty—this could be diaphoresis (excessive sweating) and can be a sign of serious heart problems.

## Respirations

Respirations are the number of times the Veteran breathes in a minute. To measure respirations, you count the number of times the chest rises.

Like the pulse, the breathing rate can be changed by exercise, strong activity or illness.

*The normal rate for respirations is  
16-24 breaths per minute.*

When we know that our breathing is being watched, we tend to change our breathing pattern. For this reason, try not to tell the Veteran that you are going to count their breaths. Just do it as part of taking their pulse.

## Instructions

1. After taking the pulse, keep your fingers in place as if you are still counting the pulse without letting the Veteran know that you are counting respirations.
2. Count how many times the chest rises and falls for one minute. If you prefer, you can count for 30 seconds and then multiply by two.
3. When you are measuring respirations, you can also listen to the breathing. Does it sound clear or congested?



Contact the Primary Care Team if there is any significant change that cannot be explained. Some examples of when to call include:

- ★ If you hear any gurgling or chest congestion.
- ★ If the Veteran is complaining of shortness of breath, as if he/she cannot catch his/her breath.

## Let's Give it a Try!

Ask a friend or family member if you can practice taking their pulse then also check their respiration and write down your results.

Wrist Pulse		Respiration	
Rate:		Rate:	
Date:		Date:	
Time:		Time:	

## Recording Vital Signs

Writing vital signs down each time you take them will help you keep an accurate record. Vital signs may vary slightly each time you take them. A little difference in the readings each time is to be expected. It is easiest to use a chart so that you can see when there is a real change.

Date/Time	Temperature (Degrees)	Pulse (Beats/Min)	Respiration (Breaths/Min)
April 18 8:00am	98.6	68	20
April 18 12:00pm	98.6	64	19

Remember, you are an important part of the Veterans Care Team. Measuring vital signs accurately can really help in keeping the Veteran healthy.

## MyHealtheVet

My HealtheVet is a free, online personal health record provided by VA, available 24/7 where ever there is Internet access. This site offers valuable information on health conditions, wellness reminders, and the Veteran's schedule of medical appointments as well as the ability to send secure messages to the Veteran's health care team. Both Caregivers and Veterans can register to participate on this site. After registering on the site, the Track Health tab at the top of the page will allow you to record and maintain a record of the Veteran's vital signs and other important measures of health such as blood pressure, cholesterol and other laboratory tests.

This site offers a special section for Caregivers, providing information on specific disease conditions of greatest interest to Family Caregivers.



## Vital Signs Chart

[illegible]

## Infection Control

Standard Precautions, otherwise known as Universal Precautions, were developed in the early 1980's to reduce the risk of infection. They are designed to protect both caregivers and care recipients from transmitting disease.

### What are Universal Precautions?

Universal Precautions are practices designed to prevent the spread of infection from blood that has been infected with bacteria or viruses, also known as bloodborne pathogens. The intent of Universal Precautions is to isolate the disease, not the person and to prevent exposure of Caregivers and Veterans to these bacteria and viruses.

Universal Precautions are a two-way street. It's helpful to think of all body fluids as having the potential to be infected. As a Caregiver, you may not always know when the Veteran has been exposed to a new virus or bacteria. Also, he/she may be more susceptible to infection due to their injury; using Universal Precautions will protect the Veteran you care for from any viruses or bacteria that you may carry.

### Bloodborne Pathogens

Bloodborne pathogens are infectious agents that are passed from person to person through blood or other body fluids.

Bloodborne pathogens include but are not limited to HIV/AIDS and Hepatitis B and Hepatitis C. If the Veteran has one of these infections, it is important that you protect yourself from contracting it. Refer to the charts below for a list of body fluids that may or may not contain bloodborne pathogens.

Keep in mind that other body fluids such as drainage from sores, pus, mucus from the nose or throat, sputum, vomit etc and fecal material can be a source for bacteria, viruses or other infectious agents to transmit infections including but not limited to the following:

- ★ Staph and Strep Infections.
- ★ MRSA (Methicillin-Resistant Staphylococcus Aureus).
- ★ Hepatitis A.
- ★ Influenza.
- ★ Other Infections.

#### Body fluids that may contain Bloodborne pathogens

- Blood
- Body fluids related to sex
- Body fluids that need to be removed with a needle, e.g. pleural fluid





For this reason, it's helpful for you to use gloves and Universal Precautions when handling these fluids as well as blood and fluids with visible blood in them. The intent of Universal Precautions is to isolate the disease—not the person—and to prevent exposure of Caregivers and Veterans to these bacteria and viruses.



## Using Barriers

Barriers prevent the spread of a disease and include equipment or clothing which protect your skin or airway from the source of infection. Gloves, face masks, safety glasses and surgical gowns are all different types of barriers, also known as Personal Protective Equipment or PPEs.



## Glove Use

Consider wearing properly-fitting disposable gloves any time you might be exposed to body fluids, particularly during the following situations:

- ★ Assisting the Veteran with toileting and other personal care tasks.
- ★ Changing diapers or Depends (as applicable).
- ★ Wiping a family member's nose or mouth.
- ★ Cleaning up vomit, urine, or feces.
- ★ Cleaning or bandaging a cut or a wound.
- ★ Cleaning contaminated surfaces, like chair arms, table tops, counters.

Remember to remove and discard your disposable gloves after each use or after each task.

## Face Masks

You may choose to wear a face mask if you are or have recently been sick with a cold, the flu or other illness since the Veteran may be more susceptible to infection.

## Other Personal Protective Equipment

Other Personal Protective Equipment includes gowns and eye protection (safety glasses).

- ★ Gowns and eye wear are generally used to protect the Caregiver from splashes of blood or body fluids.
- ★ Caregivers may choose to use these for wound care.

## Hand Washing

Viruses and bacteria are commonly spread through contact with the hands whether by sneezing or coughing, handling raw foods such as chicken, petting animals or changing a diaper. Hand washing is the single most effective way of preventing and controlling the spread of infection.

### Instructions

Encourage all family members to use the following hand washing tips:

1. Keep clothing from touching the sink.
2. Moisten hands using warm, running water.
3. Vigorously scrub hands with soap for 15-30 seconds. Wash the back, palm and fingers of each hand. Wash between fingers. Clean under nails.
4. Rinse hands under running water.
5. Dry hands well using a paper towel.
6. Use the towel or your elbow to turn off the water.



Moisten  
hands



Scrub hands  
for 15-30  
seconds



Rinse Hands



Dry Hands  
with a paper  
towel

Children (and adults, for that matter) can be encouraged to soap their hands while they sing the song *"Happy Birthday to You"* twice, which is about the time needed to scrub hands adequately.

Remember, it's helpful to wash your hands:

- ★ Before and after work.
- ★ Before and after use of disposable gloves.
- ★ After handling soiled (dirty) items.
- ★ After using the restroom.
- ★ After assisting a person in the restroom.
- ★ After diapering or applying/changing Depends®.
- ★ Before preparing or serving food.
- ★ After any contact with body fluids.
- ★ When your hands are dirty.



### Alcohol-based Hand Sanitizers

These are an alternative to washing hands with soap and water. Although washing with soap and water is preferred, hand sanitizers can be useful when out in public, in the car or in other situations away from home. If you choose to use a hand sanitizer, try to select one that contains at least 60% alcohol.

### Other Precautions

In addition to taking precautions against bloodborne pathogens and other infections, try the following tips to help protect you, the Veteran and others from becoming ill:

- ★ Dispose of needles, glucose sticks and other sharp items in a hard plastic sharps disposal box.
- ★ Avoid sharing any items that touch another person's mouth such as cups, eating utensils, thermometers or toothbrushes.
- ★ Encourage your family not to share any items used for personal care such as hairbrushes, cosmetics, razors or eyeglasses.
- ★ Cover your nose and mouth with a tissue when sneezing or coughing and dispose of the tissue in a trash bag immediately. If no tissues are available cough or sneeze into the crook of your elbow.
- ★ Keep wounds clean and covered with a bandage until healed.
- ★ Clean and disinfect laundry soiled with body fluids, kitchen surfaces, bedpans and commodes.

## Vaccinations

Maintaining your own health and those of other family members is very important to minimize the Veteran's susceptibility to illnesses. Talk with your family and members of the caregiving team periodically to ensure all of their immunizations are up-to-date, particularly annual flu vaccines.

## Skin Care

Healthy skin protects you from bacteria and foreign objects as well as ultraviolet rays (sun damage). It contains nerve endings that let you know if something is cold or hot, sharp or dull, or hard or soft. It also helps in regulating your body's fluids and temperature. Healthy skin minimizes the Veteran's susceptibility to infections. Even with the best care though, the Veteran may experience bed sores, also called pressure ulcers or pressure sores which can occur with even short periods in a wheelchair or bed.

What are Pressure Sores?

Pressure sores are places on the skin that become irritated due to lack of movement, reduced or loss of sensation in the skin, or reduced blood flow.

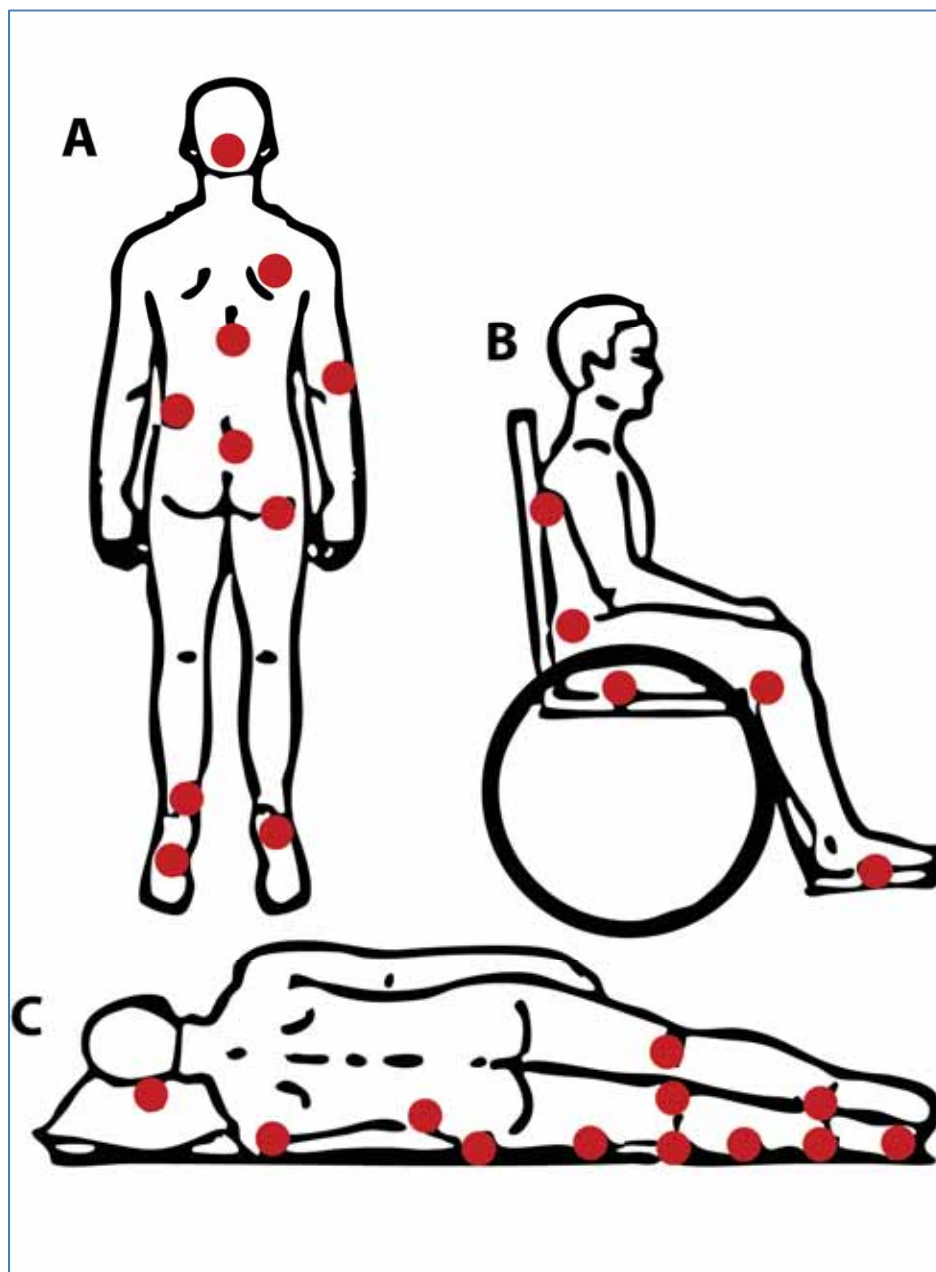
### How do Pressure Sores Develop?

These types of sores are caused by pressure on a bony area from lying or sitting in the same position for long periods of time. These can also be caused by sitting or lying on hard objects, bruises, the skin being wet or moist for long periods of time, or the friction of sheets or clothing rubbing an area of skin when the Veteran is confined to a bed or chair. Pressure sores can also develop under oxygen or feeding tubes, around casts, drainage tubes, neck collars, or other medical devices that touch the skin with too much pressure. Pressure sores can quickly become infected and result in serious medical complications, at times requiring hospitalization and surgery.

### Where do Pressure Sores Form?

These following graphics and photographs show the stages of pressure sore development. Pressure sores typically start out as reddened skin, form a blister, then an open sore and finally a crater. See Figures 1 and 2 on the next two pages.

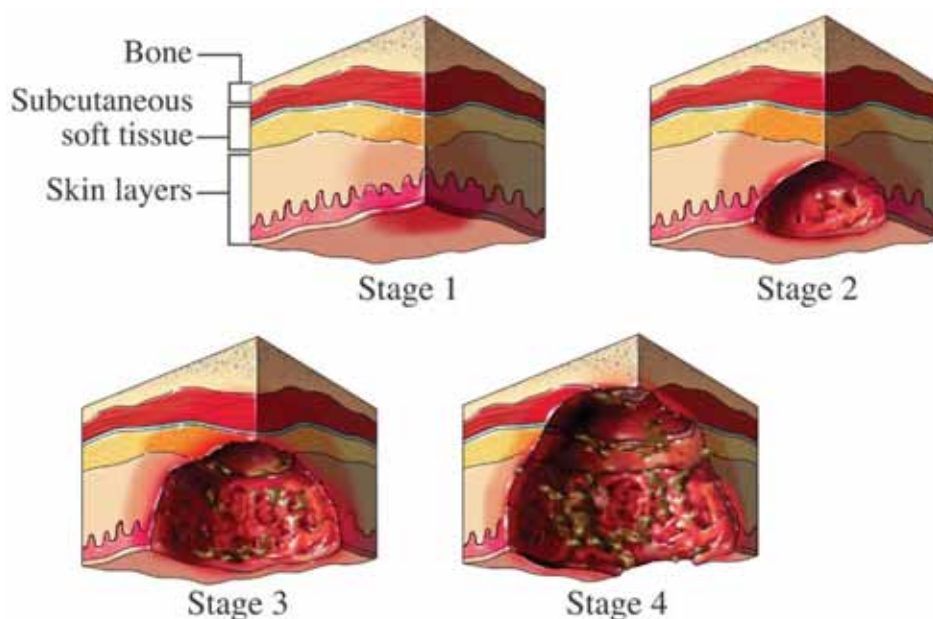
Figure 1: Areas on the Body Most Susceptible to Pressure Sores (<http://www.ncbi.nlm.nih.gov>)



Pressure sores form on the back of the head, ears, shoulder blades, elbows, tailbone, buttocks, hips and heels.



**Figure 2: Stages of Pressure Sore or Ulcer Developments**



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### Stage 1

Healthy skin has active blood flow just below the surface. If redness on the skin does not go away after it is lightly touched by the thumb or finger, then a pressure sore is starting to develop. In Veterans with darker skin, discoloration of the skin, warmth, edema, or hardness may also be indicators of development.

### Stage 2

The skin blisters or forms an open sore and may look red and irritated. The ulcer may look like an abrasion, blister, or very shallow crater.

### Stage 3

The skin may now look like a crater with damage to the tissue below the skin.

### Stage 4

The pressure ulcer is so deep that there is damage to the muscle and bone, and sometimes to tendons and joints.



Although it may be tempting to massage the area of the ulcer or use donut-shaped or ring-shaped cushions to relieve the pressure, these actions can actually be harmful. It's best to contact the Veteran's Primary Team if the skin forms an open sore, particularly if there are any signs of infection including an odor from the ulcer, redness or tenderness around the *ulcer* or the skin is warm and swollen.

### Prevention: Performing Skin Inspections

Routine skin inspections are helpful in preventing pressure sores and reducing the chance of skin infections. If the Veteran is confined to bed or frequently in a wheelchair, try to check his/her skin at least twice a day—when getting dressed in the morning and undressed at night. Look for redness over bony areas that does not go away when the Veteran is repositioned, blisters, rashes, areas that feel hot to touch, or areas that are often moist with sweat or urine. Lift skin folds to check creases in the skin and areas that are not easily visible. Examine bony areas like heels, knees, hips and elbows as well.

### Healthy Skin Care Practices

The old adage that an ounce of prevention is worth a pound of cure certainly applies to developing a system to maintain healthy skin.

- ★ Help the Veteran keep his/her skin clean and dry.
- ★ Use skin lotion on dry skin, rubbing it in gently, especially after bathing, when the Veteran is in a room with dry heat, or any other time you notice his/her skin is dry.
- ★ Ensure the Veteran drinks plenty of fluids daily and maintains a healthy diet, including foods rich in vitamins A, E, B6, such as fresh fruits and vegetables, dairy products and fish.
- ★ Keeping the Veteran's skin, bed sheets and clothing clean and dry can be helpful.
- ★ Check the Veteran's feet carefully when wearing new shoes to ensure they are not too tight, too large, or rubbing hot spots on the feet.



### Prevention: Keep Moving!

If the Veteran is able, be sure he/she gets up and moves around several times a day.

If the Veteran cannot get up without assistance, be sure that his/her position is changed several times a day.

If the Veteran is in a wheelchair and has upper body mobility, he/she can do “wheelchair push-ups” or pressure lifts as much as every 20 minutes.

This is done by securing the lock on the chair wheels, releasing the security belt, and having the Veteran push down on the top of the wheels with their arms lifting the weight of their lower body and lifting their bottom off the chair seat. Ask the Veteran to hold this position momentarily and then relax back into the seat. This exercise may be repeated during the day as recommended by the Primary Care Team.



### Relieve Pressure on Bony Areas

Encourage the Veteran to change positions frequently to relieve pressure on bony areas of the body. If the Veteran is able, it's helpful for him/her to spend time on his/her stomach at least once a day. A mobile person may turn once every 12 minutes while sleeping.

*For a bedridden Veteran, a schedule of turning every two hours at a minimum is best.*

- ★ If you cannot remember the turning schedule, then have it written on a notepad near the bed.
- ★ If the Veteran is using a wheelchair, try to keep it adjusted properly, especially the height of the foot pedals. Encourage the Veteran to be as active as possible, changing positions every two hours.
- ★ The Veteran's Primary Care Team or other provider can teach you the best positions for the Veteran given their specific injury condition or disability. Try to ensure clothes, socks and shoes fit properly and are not rubbing against the skin.

## Medication Management

Developing a good working relationship and open lines of communication with the Primary Care Team is important to ensure that the Veteran's medications are managed effectively and common errors are avoided such as:

- ★ Taking the wrong dosage.
- ★ Not taking the medication properly.
- ★ Stopping medications prematurely.
- ★ Mixing prescription and over-the-counter drugs (OTC) that are compatible.



As the Caregiver, you are on the “front lines” and can document the Veteran's response to medications taken at home. Caregivers closely observe changes in mood, diet, sleeping habits and other factors that can inform the Primary Care Team's approach to treatment and planning.

### Questions You Should Ask about the Veteran's Medicines

- ☐ What is this medication for?
- ☐ How should the medication be taken?
- ☐ Should this be taken with or without food?
- ☐ Are there any foods that should be avoided?
- ☐ How long is the medication to be taken? How often? Daily? Twice per day?  
Does this medication need to be taken at certain times?
- ☐ Will this drug interact with the medications the Veteran is currently taking  
(including OTC medications)?
- ☐ Are there medications to be avoided while on this medicine?
- ☐ What are the possible side effects of this medication?
- ☐ What should we do if these occur?
- ☐ Can we do anything to avoid or minimize possible side effects?
- ☐ How will we know the prescribed medicine is working?

### Developing a Medication List

The easiest method to track the Veteran's medications is to make a list of all the drug names, dosage and instructions for use. If you can, also include any over the counter (OTC) medications such as cold medications, or herbal supplements. You can create your own list or download a sample from the Internet such as the VA's RESCUE medication card. It's helpful to carry a copy in your wallet/purse, and post one on the fridge (especially if the Veteran is home bound).





## Managing and Organizing the Veteran's Medication

Sometimes the best management of the Veteran's medication is to ask the Primary Care Team if it is possible to minimize the number of different pills the Veteran is taking or at least limit the number of medicines taken twice a day or more frequently. In doing so, you can increase the likelihood that the Veteran will stick to the treatment schedule.

It's also helpful to routinely discuss the medications the Veteran is taking with the Primary Care Team. Bringing all the prescriptions, OTC medicines, vitamins and herbal supplements to the visit will keep the Primary Care Team informed of any changes in the Veteran's regimen.

Using pillboxes is one of the most effective ways of organizing the Veteran's medicines. Those that have labeled compartments for each day of the week and multiple rows of compartments for medicines taken several times per day are particularly useful.

In order to minimize the number of pharmacies the Veteran uses, ask your Caregiver Support Coordinator about ordering prescription refills through the VA's program MyHealtheVet.



## Safety Tips

Keep in mind the following safety tips in helping the Veteran manage medications before, during and after hospital stays:

When you enter the hospital	Ensure a copy of the Veteran's updated medication list is given to the hospital. If you do not have an updated list, then try to bring the medications with you.
During a hospital stay	Ask if the Veteran is receiving his/her daily medications including those that do not relate to his/her hospital stay.
At discharge	Be sure that you understand all instructions. Ask whether new prescriptions are replacing medications you have at home Try to take accurate and thorough notes to refer to later.
At the pharmacy	Make sure you are given the right medication before you leave. If you are renewing medications, ensure that the refill looks like your previous one.
At home	Try to write the name of the condition being treated on each container and remember to update the Veteran's medication list.

A final safety tip is to consider paying particular attention to the Veteran's medications in these situations when medication problems may be likely to occur:

- ★ Prescription is written, filled or re-filled.
- ★ Prescriptions are not taken as directed or not taken at all.
- ★ Changes in medical condition.
- ★ Transitions in care and care settings take place.
- ★ Taking multiple medications, seeing multiple providers and using multiple pharmacies.
- ★ Prescribers/pharmacists unaware of other OTC medications, herbals and supplements taken.

### Steps to Medication Disposal

Follow these steps when disposing of medications as there are environmental restrictions on flushing medications. Try to check with the pharmacist for recommendations for disposal.

1. Crush or dilute the medication.
2. Put the medication in a plastic bag.
3. Add kitty litter, sawdust, or coffee grounds to the plastic bag.
4. Seal the plastic bag and place in the trash.





## Pain Management

Acute pain, or sudden pain that happens with an injury or sudden illness, is well understood. We know that chemicals released at the site of injury, cause swelling and inflammation. Veterans in acute pain may have symptoms such as rapid heart rate or feel faint. Most acute pain disappears as the swelling gets better, the injury heals, or the infection clears up.

It's possible that the Veteran may develop chronic pain after an injury. Sometimes the cause is understood, for example when a nerve is injured and never quite heals, or when surgery leaves scar tissue that causes painful tugging. Other Veterans have chronic pain that does not seem to be related to an injury event but may come on gradually overtime such as in low back pain.

Sometimes doctors can figure out the cause, for example, chronic arthritis causing swelling in joints or a herniated disc in the lower back irritating or pressing on a nerve. Other chronic pain is more mysterious and a single physical cause can't be found. Often, in these cases, there is trouble in the way the brain or spinal cord processes pain signals; occasionally the brain or spinal cord are actually damaged so that they generate a false signal that a part of the body is being injured, when there is no injury.



Veterans react to pain in different ways, and this personal reaction is a big part of the reason that some people become very distressed or even disabled by their chronic pain, while others seem able to move on and not be held back by the pain. This personal reaction can also have a big impact on how much the pain gets in the way of recovery. It is very important that pain management programs include ways to help Veterans manage their reactions to pain, in addition to any medications or other treatments that are needed.

Constant pain is a common problem with serious injuries. In some cases, the cause of the pain is obvious, but in other cases, even with testing, providers can't find the cause. Chronic pain is a more common problem in Veterans than acute pain.

We'll focus on chronic pain, what you should expect in the Veteran's pain management program, and how you can help make sure the program is as safe and effective as possible.

## The Goals of a Chronic Pain Management Program

In an effective pain management program, treatment goals are tailored to the Veteran and address the following:

- ★ Improved quality of life and function.
- ★ Increase self-management that helps persistent pain.
- ★ Reduced need for pain medications.
- ★ Lower pain level.
- ★ Less emotional distress related to chronic pain.

## What are the Different Kinds of Medicine Used to Treat Pain?

A wide range of medications can be used to treat pain. Some medications work well when they are used together, and others can have dangerous results when mixed.

Types of pain medications include:

- ★ Over-the-counter drugs such as acetaminophen and non-steroidal anti-inflammatory drugs (NSAIDs), like ibuprofen which may be a prescription medication in higher dose forms.
- ★ Seizure medications and related drugs that help pain caused by damaged or diseased nerves.
- ★ Antidepressant medications that help a lot of people cope with chronic pain
- ★ Opioid medications.
- ★ Opioids are analgesic, or pain-relieving, medications. Opioid drugs include those often combined in a pill with acetaminophen such as hydrocodone (e.g., Vicodin), codeine (e.g., Tylenol #3) oxycodone (e.g., Percocet) and those often prescribed in extended release form such as oxycodone (e.g., OxyContin—an oral, controlled-release form of the drug), morphine (e.g., MS Contin, Kadian, Avinza) and Fentanyl (in patches applied to the skin), and related medications.

Opioids are not recommended or used very cautiously and with close medical supervision in patients with:

- ★ Severe respiratory conditions.
- ★ Suicide risk or unstable psychiatric illness.
- ★ Active substance use disorder.
- ★ True allergy to opioids.
- ★ Need for other medications with serious risk for interactions with opioids.
- ★ History of giving medications to others.
- ★ Sedating medications or certain anti-anxiety medications such as benzodiazepines.



## Side Effects of Opioid Medications

Opioid medications usually cause constipation and commonly cause drowsiness, dizziness, nausea and vomiting, particularly when beginning therapy, and can lead to physical dependence or tolerance. Properly managed medical use of opioid analgesics is safe, can manage pain effectively, and rarely causes addiction.

There are several different words used to describe the possible long-term effects of opioid analgesics on a person.

**Physical dependence**—means that the patient will have withdrawal if the opioid is suddenly stopped. This is expected with long-term use and it does not mean that the person is addicted.

**Tolerance**—means the body has adapted to the medication, and there is the need for increasing or more frequent doses of the medication to get the same results.

**Addiction**—refers to a pattern of dysfunctional opioid use that may involve any or all of the following:

- ★ Loss of control over the use of opioids.
- ★ Obsession with getting more opioids, even when pain is controlled.
- ★ Continued use in spite of bad consequences.

## Warning Signs about Problems with Opioid Medications

As a Caregiver, you are an important part of the treatment team for the Veteran. The Primary Care Team will rely on you to help them understand how the pain management program is impacting the Veteran's functioning and pain levels. They will also need your help in monitoring and tracking side effects. There are useful tracking tools available from The American Chronic Pain Association and the American Pain Foundation (links in resources).

In addition to tracking the effectiveness and side effects of the medication, it's helpful for you to discuss any of the following problems with the Veteran's Primary Care Team:

- ★ Signs that the Veteran is too sedated or confused.
- ★ Any difficulty with breathing.
- ★ Concerns about suicide risk or depression.
- ★ Trying to get more medication when it is not time for the dose. This may be a sign of either beginning addiction or need for higher doses of medication or a need for a change in medication to control pain.



## Effective Treatments for Pain Other Than Medication

Because pain is not just physical, an effective treatment program needs to address the coping behaviors and the ways the Veteran thinks about and reacts to pain. The experience of pain is affected by emotions like anger, fear, anxiety and depression.

Physical activity is really important; a Veteran may be physically out of shape because pain has interfered with movement and physical activity. You can talk to the Primary Care Team about developing a program to help the Veteran resume physical exercise at a level that he/she can handle.

There are many other non-medication approaches that can help the Veteran in managing pain, including hypnosis, pastoral counseling, icing, acupuncture, massage, support groups, involvement in hobbies or other activities that occupy his/her attention, meditation and relaxation, laughter and even music.

## How can Caregivers Help the Veterans with Chronic Pain?

As Caregivers, it's helpful to learn as much as you can about the cause of the Veteran's pain, and to understand the pain management plan, including not just the medications, but the importance of the non-medication parts of the plan. Keep in mind that reduced pain level is just one goal in the plan, and that increasing function and being safe are other really important goals.

Finally, as the Veteran's Caregiver you can help by:

- ★ Believing the Veteran's report of pain.
- ★ Understanding treatment plans and asking the Primary Care Team questions.
- ★ Providing medications exactly as prescribed and storing them securely.
- ★ Tracking pain levels and discussing them with the Primary Care Team without over focusing on pain levels. Activity, functioning and movement are important goals as well.
- ★ Paying attention to other possible signs of pain:
  - Facial expressions, such as grimacing.
  - Breathing and sighing heavily.
  - Unusual body movements, such as limping.
  - Behavioral changes, such as not wanting to eat or sleep.
  - Emotional changes, such as crying or irritability.
- ★ Engaging the Veteran in enjoyable activities that may distract from the pain.
- ★ Remaining aware of possible suicide risk or other safety concerns and discussing them immediately with the Veteran's Primary Care Team.



## Resources & References

### Vital Signs

- ★ Saginaw Valley State University. How to take vital signs. Retrieved April 18, 2011, from <http://www5.svsu.edu/~amrankin/Vital%20signs.htm>
- ★ Ashley EA, Niebauer J (2004). Cardiology explained. London: Remedica. Retrieved April 18, 2011, from <http://www.ncbi.nlm.nih.gov/books/NBK2213/>
- ★ VA Caregiver Support website at <http://www.caregiver.va.gov>
- ★ VA Caregiver Support Line at 1.855.230.3274.

### Infection Control

- ★ Center for Disease Control and Prevention. Sharps safety for healthcare professionals available at <http://www.cdc.gov/sharpssafety>
- ★ Center for Disease Control and Prevention. Hand hygiene in healthcare settings available at [http://www.cdc.gov/handhygiene/Patient\\_materials.html](http://www.cdc.gov/handhygiene/Patient_materials.html)
- ★ Center for Disease Control and Prevention. Vaccines and immunizations available at <http://www.cdc.gov/vaccines/> and <http://www2.cdc.gov/nip/adultImmSched/>

### Medications

- ★ Medicine Safety: A Toolkit for Families at <http://www.learnaboutrxsafety.org>
- ★ Department of Veterans Affairs. RESCUE: Resources & Education for Stroke Caregivers' Understanding and Empowerment. Managing Medicines available at: <http://www.rorc.research.va.gov/rescue/healthy-living/managing-medicines.cfm>
- ★ Department of Veterans Affairs. RESCUE: Resources & Education for Stroke Caregivers' Understanding and Empowerment. Helpful Tools—Medication Card available at <http://www.rorc.research.va.gov/rescue/tools.cfm>
- ★ My HealtheVet at <http://www.myhealth.va.gov/mhv-portal-web>



## Pain Management

- ★ Management of Opioid Therapy for Chronic Pain. VA/DoD Evidence Based Clinical Practice Guideline. May 2010. [http://www.healthquality.va.gov/COT\\_312\\_Full-er.pdf](http://www.healthquality.va.gov/COT_312_Full-er.pdf)
- ★ NIDA InfoFacts: Prescription and Over-the-Counter Medications  
<http://www.nida.nih.gov/infofacts/painmed.html>
- ★ American Pain Foundation. Logs and tracking sheets  
<http://www.painfoundation.org/archive/learn/publications/target-notebook.html>  
<http://www.painfoundation.org/archive/learn/publications/files/TargetNotebook.pdf>
- ★ The American Chronic Pain Association  
<http://www.theacpa.org/9/PainManagementTools.aspx>
- ★ Partners Against Pain. Caregiver Corner and Pain tracking sheet  
<http://www.partnersagainstpain.com/pain-management/Caregiver.aspx>  
<http://www.partnersagainstpain.com/printouts/A7012PD2.pdf>





## Caregiver Skills Knowledge Check

1. Call the Primary Care Team if the Veteran's temperature is more than one degree above his/her normal temperature
  - a. True
  - b. False
  
2. The normal average pulse rate is:
  - a. 60-100 beats per minute
  - b. 45-80 beats per minute
  - c. 25-50 beats per minute
  - d. 90-100 beats per minute
  
3. Which fingers do you use to take a pulse?
  - a. Thumb
  - b. Index finger
  - c. Index and middle finger
  - d. Any fingers you want
  
4. You should call the Primary Care Team if the Veteran has:
  - a. A very fast heart rate
  - b. Dizziness
  - c. Feels cold and sweaty
  - d. All of the above



5. Which of the following would be an average “normal” respiration rate:
  - a. 35
  - b. 22
  - c. 10
  - d. 60
6. The most effective way to control the spread of disease and infection is:
  - a. Washing your hands correctly
  - b. Wearing gloves
  - c. Wearing a face mask
  - d. None of the above
7. You only assume blood or body fluids are infected if the doctor told you they were.
  - a. True
  - b. False
8. Pressure sores are most likely to develop on bony parts of the body when:
  - a. The skin is pressed against hard objects.
  - b. Blood flow is restricted when the Veteran sits or lies in the same position for a long period of time
  - c. The skin area stays wet or moist for a long period of time
  - d. All of the above



9. What should you ask the Primary Care Team about the Veteran's medication? Pick three.
- a. Are there medications to be avoided while on this?
  - b. If the Veteran can continue to take OTC medications
  - c. How long is the drug supposed to be taken?
  - d. How should the medicine be taken?
  - e. All of the above.
10. When are medication problems most likely to occur?
- a. When the prescription is written
  - b. When the prescription is filled or re-filled
  - c. When seeing multiple providers
  - d. When using multiple medications
  - e. All the above

The answer key is located on page 167



## Notes

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## Notes

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## Module 4: Veteran Personal Care



For many Veterans, disabling injuries such as spinal cord injuries, amputations and traumatic brain injuries may make it difficult to perform some of the basic activities we all do every day, such as eating, bathing, dressing, using the toilet, or moving from one position to another.

You may wonder if the Veteran you care for is able to handle routine, everyday tasks independently. If not, when and how can you help? What services or products are useful? Do you need special training to assist?

This module will focus in on answering these questions about the personal care of the Veteran you provide care for.



## Activities of Daily Living (ADLs)

The term “**activities of daily living**”, or ADLs, refers to the basic tasks of everyday life, such as eating, bathing, dressing, toileting and transferring.

The ability to perform ADLs impacts one’s ability to live independently. An assessment of ADLs provides important information on the functional abilities of the Veteran to assess his/her progress in rehabilitation and identify the personal assistive devices that will be needed at home. This assessment also helps the Caregiver by identifying the activities the Veteran can perform independently. For those activities where the Veteran will need assistance—an ADL assessment will help you to know how much assistance is needed while promoting the Veteran’s independence.

VA nurses, case managers, physical therapists and occupational therapists complete assessments of activities of daily living and will work with you and the Veteran in any areas of need.

## Instrumental Activities of Daily Living (IADLs)

IADLs refer to a series of more complex tasks or functions that help maintain one’s personal life and environment, for example: shopping for food, cooking, doing laundry, housecleaning, managing money, managing medications, driving/using public transportation, or using the phone.



## What are Compensatory Skills?

**Compensatory skills** are techniques or strategies that will help the Veteran you care for to find new ways to accomplish activities of daily living. Some examples of compensatory skills are:

- ★ Training and adaptation to handle activities such as dressing, bathing, toileting, grooming and feeding.
- ★ Creating or identifying new methods to complete tasks in a way that accommodates changes in the Veteran's abilities.
- ★ Helping the Veteran to relearn basic skills like cooking and grooming that may have been lost due to injuries such as TBI.
- ★ Training and adaptation for activities such as shopping, running errands or handling finances.
- ★ Working with employers and/or schools to adapt the work or home environment so the Veteran is able to do his or her best.
- ★ Helping to identify and develop healthy, fulfilling hobbies or other activities if he or she can't return to work.



Physical and occupational therapists will help identify which compensatory skills would be the best fit for the Veteran's specific needs. They will teach you and the Veteran to develop these skills.

## Tips to Help with Daily Activities

The goal, as always, is to maximize the Veteran's and your safety, confidence, independence and ability to handle everyday activities. Try these helpful tips:

- ★ As a first step, ask the Veteran which activities or goals he or she wants to accomplish, and how you might help.
- ★ Understand the Veteran's formal ADL or IADL assessment and identified needs. Being familiar with the assessment will help you and the VA staff to find appropriate resources and set up a plan of care that's best for the Veteran and for you. Remember that every situation is different and solutions that work for some people might not work in your situation.
- ★ Aim for a flexible approach to care. The Veteran's needs may change over time and the help you provide as a Caregiver will change as well.
- ★ Talk with the Primary Care Team. You are the authority on the Veteran's life at home. If you feel that the Veteran's abilities are getting weaker, if you notice a change in behavior, or if a certain service is needed, let the healthcare team know.
- ★ Learn about the resources that are available to help the Veteran, such as VA-provided home care services. These services not only will assist the Veteran, but also could provide *you* with a break or respite from your care responsibilities.

## Transferring

If the Veteran needs to be moved from one spot to another, for example from the wheelchair to the bed, it's wise to close the gap as much as possible first and make the situation stable. You can take the chair close to the bed, and then lock the brakes and move armrests and footrests out of the way.

Encourage the Veteran to help with the lift as much as possible. Whether or not the Veteran is able to help, you, as Caregiver, can explain what's about to happen before you start.

To prevent back injury ***assume the proper lifting stance***.

A good general stance for lifting is:

- ★ A straight back.
- ★ Feet about a shoulder width apart with one foot placed slightly in front of the other.

Some Veterans may be eligible for home lifting devices. You may want to discuss this with your Primary Care Team. If issued a home lifting device, you will want to get training in using it. It's important to ask questions if you don't understand.



## Assistive Devices that Can Help the Veteran

**Assistive devices** are items or products that maintain or improve the abilities and independence of someone with disabilities. Some familiar devices include:

- ★ Walkers
- ★ Canes
- ★ Manual or motorized wheelchairs
- ★ Grab bars near the toilet, shower and bathtub
- ★ Shower/bath chairs
- ★ Pill boxes
- ★ Hearing aids
- ★ Scoop plates and weighted utensils for easier feeding
- ★ Reachers for getting items in hard to reach locations

There are more sophisticated assistive devices as well, including:

**Automatic medication dispensers**—some with timers and alarms.

**Environmental Control Units (ECUs)** —useful in the home. Can assist with actions such as turning on lights and fans, controlling a telephone or using a computer. May be voice-activated.

**Lifts** —can be ceiling-mounted or portable units, such as a Hoyer Lift. These help you move the Veteran from a bed to a chair; or from room to room; or from bedroom to shower, for example. A variety of slings are available to make sure the move is safe and comfortable.

**Ramps** —can be constructed as a permanent structure for your home or be a modular, temporary structure. In either case, ramps make it easier to move the Veteran in and out of your home. Portable ramps can be stored in your car and used when going into other homes or buildings that are not wheelchair-accessible.



**Vehicle adaptations and transportation assistance**—van modifications such as a ramp or raised roof, adaptive hand controls, wheelchair and scooter lifts; Paratransit (flexible transportation such as shared taxis).



**Attendant Controls**—can be fitted to any power wheelchair. These allow you to easily guide the Veteran's wheelchair.

**Electronic Devices**—special phones, computers that “speak” or enlarge text, voice-activated devices, personal digital assistants with audible prompts for tasks/events/activities. There continue to be many new and ingenious products in the marketplace that may help the Veteran.

**Work-based Devices**—in addition to home-based assistive devices, a variety of computer and non-computer-based products are available to help the Veteran in the workplace.

### **Home Modifications**

Modifying your home can increase the Veteran's self-reliance, make care a little easier and help reduce the stress you may experience as a Caregiver. Home modifications can include:

- ★ Lowered countertops
- ★ A roll-in shower
- ★ Enlarged doorways to fit a wheelchair
- ★ Lowered light switches and heating/AC controls
- ★ Lever doorknobs instead of round knobs



Staff from the VA can assist you and the Veteran in identifying devices and modifications that are most appropriate for your specific needs. Included below under “Resources” are VA programs that provide assistive devices and home modifications, including financial assistance.



## Resources & References

- ★ My HealtheVet at <http://www.myhealth.va.gov/>
- ★ VA Caregiver Support, Home Equipment and Modifications at [http://www.Caregiver.va.gov/VA\\_Equipment.asp](http://www.Caregiver.va.gov/VA_Equipment.asp)
- ★ VA Prosthetic and Sensory Aids Service (PSAS) at: <http://www.prosthetics.va.gov/>
- ★ Home Improvement and Structural Alterations Grant at: <http://www.prosthetics.va.gov/hisa2.asp>
- ★ Disabled American Veterans, Transportation Services at: <http://www.dav.org/volunteers/Ride.aspx>
- ★ The DAV operates a nationwide Transportation Network to meet the need for transportation to and from VA medical facilities for needed treatment.
- ★ VA Adapted Housing Grants Provide a link to Veterans Benefits Administration website
- ★ The Specially Adapted Housing grant (SAH) is generally used to create a wheelchair-accessible home for those who may require it for activities of daily living. VA's Home Loan Guaranty program and the Native American Direct Loan program may also be used with the SAH benefit to purchase an adaptive home.
- ★ The Special Housing Adaptations (SHA) grant is generally used to assist Veterans with mobility throughout their homes due to blindness in both eyes, or the anatomical loss of use of both hands or extremities below the elbow.
- ★ The Temporary Residence Adaptation (TRA) grant is available to eligible Veterans and seriously injured active duty Servicemembers who are temporarily living or intend to temporarily live in a home owned by a family member.



## Personal Care for the Veteran Knowledge Check

1. Which of the following is a reason to assess a Veteran's ability to perform ADLs?
  - a. Identify rehabilitation needs of the Veteran
  - b. Plan for specific home-based services such as personal assistance services
  - c. Identify specific tasks that a Caregiver will need to perform for the Veteran on an on-going basis
  - d. All of the above
  
2. All of the following are home modifications EXCEPT?
  - a. Lowered sinks
  - b. Hearing aids
  - c. Roll-in shower
  - d. Ramps
  
3. All of the following are assistive devices except:
  - a. Cane
  - b. Walkers
  - c. Wheelchair
  - d. Reachers
  - e. All of the above are examples of assistive devices





4. Which of the following is NOT a compensatory skill that Caregivers can use to help improve a Veteran's independence in activities of daily living?
- a. Training and adaptation (if needed) for activities of daily living, such as dressing, bathing, toileting, grooming, and feeding
  - b. Doing tasks for the Veteran because it is easier and faster.
  - c. Helping and supporting a Veteran to relearn basic skills, such as cooking and grooming that may have been lost due to certain injuries such as TBI
  - d. Helping to identify and develop healthy, fulfilling hobbies

The answer key is located on page 167



## Notes

[illegible]

## Module 5: Managing Challenging Behaviors



As a Caregiver, your life has been changed considerably by your new role. The Veteran that you care for may seem like a different person from the one you knew before his/her injury. Some injuries, particularly injuries to the brain can cause changes in behavior. The Veteran may behave impulsively and/or express frustration and anger by behaving aggressively at times. It is important to remember that his/her feelings, behaviors, thoughts and beliefs may not be personally directed at you and may not be caused by anything you did or did not do.

In this module we will discuss some challenging behaviors and strategies to help you cope as well as what you can do to help the Veteran that you care for.

## Coping Tools to Consider

Combat Veterans can suffer wounds that not only impact their lives; but also the lives of the people and family around them; symptoms of stress, depression or anger are not unusual. You as a Caregiver need to learn about these symptoms and to manage your responses to them as well as get the help you need.



Everyone experiences anger from time to time. Anger is a natural emotion, which can be felt more often or more intensely especially by combat Veterans. When a person feels vulnerable, anger can allow them to feel more in control. What matters isn't getting angry, but rather, how the anger is handled.

The following are some coping tools, you may want to consider:

**Find or create a support group** of other family members and friends who may be dealing with the same or similar situations. Talking about your feelings, frustrations and fears with someone else can help ease your burden and give you the knowledge that you are not alone.

You may want to seek **counseling** for yourself independent of any therapy in which you may be involved in with the Veteran.

You do have the choice and ability to control your own responses to the Veteran's behavior. **Stay calm** in the face of outbursts and aggressive behavior.

**Try not to over-react** to statements and behaviors. If the Veteran is aggressive or in an outburst, do not over react by yelling or escalating your behavior. Speak calmly but firmly without raising your voice or using an excited tone of voice. Sometimes, you may need to speak slowly and let the Veteran know he/she is in distress. If his/her behavior begins to get worse, then you may need to slowly walk away telling the Veteran that you are walking away until he/she calms down.

**Avoid challenging** the Veteran's thinking when she/he is obviously in a highly agitated state. If the Veteran's anger is at a frightening level, stay safe and keep your children safe. Back away and keep a safe distance. Get help immediately if you sense that the Veteran is a danger to himself/herself or others.

Do **try to redirect** his/her focus by helping him/her attend to something else.

A Veteran who has lost independence in any form, due to an injury in the line of duty, may find this hard to accept. Imagine needing someone's help to bathe or to tie your shoe or not be able to think and express ideas clearly. This can be very frustrating. The following are ways you, the Caregiver can minimize some of the frustration the Veteran may be feeling:

- ★ Keep things simple.
- ★ Minimize the amount of things that can distract the Veteran while engaged in an activity.
- ★ Keep the noise down.
- ★ Allow the Veteran plenty of time to do tasks.
- ★ Keep a daily routine. Change can increase frustration.
- ★ Find tasks that the Veteran can do with little help. This will promote feelings of independence.
- ★ Change activities if the Veteran becomes frustrated.

## Communicating with the Veteran

If the Veteran is having difficulty expressing thoughts and ideas, the following techniques may be helpful:

- ★ Tell the Veteran when you do not understand what he/ she said. Ask him/her to repeat it again more slowly.
- ★ Use a consistent cue or gesture to let him/her know you did not understand. For example, cup your hand over your ear as a reminder to speak louder.
- ★ Help the Veteran start a conversation by asking a leading question such as, "What do you think about ...?"
- ★ Encourage the Veteran to talk about topics of interest or familiar topics.
- ★ Ask open-ended questions (e.g., questions that cannot be answered with a "yes" or "no"), such as, "Tell me more about your day."
- ★ Give your full attention to the conversation.



## Depression

Sometimes people will say that they are sad or feel down and will refer to it as feeling depressed. Usually these feelings resolve within a few days. If the symptoms continue or become worse, they could be a sign of clinical depression.

The two most common symptoms of clinical depression are:

- ★ Feeling sad or hopeless nearly every day for at least 2 weeks.
- ★ Losing interest in or not getting pleasure from most daily activities nearly every day for at least 2 weeks.

Depression is a treatable illness. Anyone can become depressed but it is important for people with depression to seek treatment. Family history and stressful life events can contribute to the development of depression. It is easier to treat if recognized early. If you are concerned that the Veteran you care for may be depressed contact the Primary Care Team at your VAMC.



## Tips to Manage Depression

If the Veteran is working with the Treatment Team, use medication as prescribed and participate in recommended therapy. The following approaches also help people with depression to recover:

- ★ **Regular physical activity.** Studies show improved mood as a result of physical activity.
- ★ **Sufficient sleep.** A good night's sleep can help mood and stress levels. Avoid sleeping pills unless your doctor prescribes them.
- ★ **Stress management.** Too much stress can help trigger depression. Some ways to relieve stress include: meditation, watching funny movies or doing enjoyable activities. Getting regular exercise also relieves stress.

Avoid substance misuse such as: drinking alcohol, using illegal drugs, or taking medicines that have not been prescribed for the Veteran. Having a substance abuse problem makes treating depression more difficult as both problems need to be treated.



## How the Caregiver Can Help?

It is important that you work in collaboration with the Veteran's Primary Care and/or Treatment Team. As a Caregiver, you are an essential partner the Veteran's recovery.

- ★ Offer emotional support, understanding, patience and encouragement.
- ★ Talk with the Veteran and listen carefully.
- ★ Acknowledge feelings, point out realities and offer hope.
- ★ Be patient, depression does not go away overnight; it takes time to get better.
- ★ Involve the Veteran in activities outside the house (e.g., walks, shopping, movies, religious services, volunteering). If she/he declines, keep making gentle suggestions but don't insist.

## Signs that a Veteran with Depression May Need Immediate Professional Attention

If the Veteran is depressed and has any of the following signs or symptoms, this suggests a crisis situation with risk for suicide. It is an emergency situation.

- ★ Talking, reading, writing or drawing about suicide, death or killing someone else.
- ★ Psychotic symptoms (being out of touch with reality, hearing or seeing things that aren't real).
- ★ Speaking in a bizarre way that is not usual.
- ★ Trying to get guns or pills or other ways to cause self-harm.



## Suicide Prevention

Suicide is the taking of one's own life on purpose. There may be warning signs before a suicide. People thinking about suicide are often depressed, anxious or have low self-esteem. They are often clinically depressed, anxious or agitated. There may be problems with sleep and changes in the eating habits of someone who is suicidal. A Veteran who is suicidal may stop paying attention to hygiene and appearance, and may withdraw from family and friends. Usually people who are suicidal feel hopeless, helpless and worthless, and have no sense of life purpose. Suicide may seem like the only solution for what they are feeling and the only way out.

### Suicide Warning Signs

Watch for these key suicide warning signs, and provide the Veterans Crisis Line number (1-800-273-8255, press 1) to anyone who exhibits these warning signs:

- ★ Talking about wanting to hurt or kill oneself.
- ★ Trying to get pills, guns or other ways to harm oneself.
- ★ Talking or writing about death, dying or suicide.
- ★ Hopelessness.
- ★ Rage, uncontrolled anger, seeking revenge.
- ★ Acting in a reckless or risky way.
- ★ Feeling trapped, like there is no way out.
- ★ Saying or feeling there's no reason for living.

### Suicide Risk Factors

Risk factors refer to the traits, situations and life events that have been shown in research to increase the risk of suicide, compared with people who do not have such traits or history. Generally, Veterans who are male, white, younger than 25, have less than a high school education and E-01 to E-02 rank have a higher risk of committing suicide.



### Other Risk Factors Include:

- ★ History of past suicide attempts or problems with violence or extreme anger.
- ★ Family history of suicide, violence, mental illness or substance abuse.
- ★ Being around others who have attempted suicide.
- ★ Chronic medical problems, including chronic pain or mental illness.
- ★ Recent or threatened severe loss (especially a marriage or relationship).
- ★ Humiliating events or failure.
- ★ History of imprisonment.
- ★ Difficult times like holidays or anniversaries.
- ★ Problems adjusting to new life circumstances.
- ★ Poor social and coping skills.
- ★ Drug and alcohol abuse.

### Personal or Environmental Protective Factors

Protective factors are skills, strengths or resources that help people deal more effectively with stressful events. Protective factors help a person bounce back from problems and balance risk factors for suicide. Protective factors can be in the person or in their environment.



### Personal and Environmental Protective Factors Checklist

Take stock of the protective factors in the Veteran you care for.

Yes    No

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Believing in the value of life and that suicide is wrong.                          |
| <input type="checkbox"/> | <input type="checkbox"/> | Good social skills, such as making decisions, solving problems and managing anger. |
| <input type="checkbox"/> | <input type="checkbox"/> | Feeling connected to friends and families.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Hope for the future; optimism.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Following doctors' orders and advice.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Strong sense of self-worth or self-esteem or determination.                        |
| <input type="checkbox"/> | <input type="checkbox"/> | Ability to cope and adapt (resiliency).  |
| <input type="checkbox"/> | <input type="checkbox"/> | Ability to control impulses.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Reasons for living.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Being married or a parent.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Being sober.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Strong relationships, particularly with family members and/or significant other.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Chances to be involved in family projects and activities.                          |
| <input type="checkbox"/> | <input type="checkbox"/> | A safe and stable environment.   |
| <input type="checkbox"/> | <input type="checkbox"/> | No access to guns, pills or other means to harm self.                              |
| <input type="checkbox"/> | <input type="checkbox"/> | Responsibilities to others.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Pets.  |



### Things Someone Thinking About Suicide May Say

- ★ “It would be better if I wasn’t here.”
- ★ “You would be better off without me.”
- ★ “I want out.”
- ★ “I’m going away on a real long trip.”
- ★ “You don’t have to worry about me anymore.”
- ★ “I just want to go to sleep and never wake up.”
- ★ “Don’t worry if you don’t see me for a while.”
- ★ “There is no way out.”



### Possible Suicide Warning Signs

A Veteran who is thinking about suicide may demonstrate these behaviors. Do any of these apply to the Veteran you care for?

Yes    No

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about feeling trapped – like there is no way out of a situation.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk of a suicide plan or make a serious attempt.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk, write or draw pictures about death, dying or suicide.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about suicide in a vague or indirect way.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Give away things that are special.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Put affairs in order, tie up loose ends or make out a will.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Try to get guns, pills or other means of harming oneself.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Call old friends, particularly military friends, to say goodbye.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Clean a weapon that they may have as a souvenir.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Become obsessed with news coverage of the war, or the military channel.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Talk about how honorable it is to be a soldier.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Become overprotective of children and the home.   |
| <input type="checkbox"/> | <input type="checkbox"/> | Act recklessly or violently, such as punching holes in walls, getting into fights.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Suddenly change, for example changing from being very sad to being very calm or appearing to be happy, as if suddenly everything is okay. |
| <input type="checkbox"/> | <input type="checkbox"/> | Use more alcohol, tobacco, or pain pills.   |



## What Should You Do if You Think the Veteran is Considering Suicide?

- ★ Trust your instincts that the Veteran may be in trouble.
- ★ Talk with the Veteran about your concerns.
- ★ Listen to what the Veteran says.
- ★ Ask direct questions without being judgmental

*"Are you thinking about killing yourself?"*

*"Have you ever tried to hurt yourself before?"*

*"Do you think you might try to hurt  
yourself today?"*

---

- ★ Find out whether the Veteran has a suicide plan. The more detailed the plan, the greater the risk:

*"Have you thought about ways that you  
might hurt yourself?"*

*"Do you have pills or a gun?"*

---



Do not leave the Veteran alone.  
Do not swear to secrecy.  
Do not act shocked or judgmental.  
Do not counsel the Veteran yourself.  
Get professional help, even if the Veteran resists.



## Suicide Prevention Resources for Veterans and Their Families

The VA is committed to addressing the issue of suicide among our Veterans and offers a network of support available to those who have served our country. VA provides a confidential 24/7 Veterans Crisis Line for Veterans in crisis and their families. Trained VA professionals are available at all times to assist Veterans and their family members. Veterans and their families do not have to be enrolled in VA to use the free, confidential Veterans Crisis Line.

### *Veterans Crisis Line 1-800-273-8255*

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Veterans Chat- Veterans Crisis Line at:

<http://www.suicidepreventionlifeline.org/Veterans/Default.aspx>

Locate Your Local Suicide Prevention Coordinator at:

<http://www.suicidepreventionlifeline.org/Veterans/ResourceLocator.aspx>

Each VA Medical Center has a suicide prevention coordinator to make sure Veterans receive needed counseling and services. Calls from the Lifeline are referred to those coordinators.

DoD/VA Suicide Outreach: Resources for Suicide Prevention at:

<http://www.suicideoutreach.org/>

This site is a comprehensive resource- you will find ready access to hotlines, treatments, professional resources, forums and multiple media designed to link you to others. This site supports all Service Branches, the National Guard and the Reserves, our Veterans, families and providers.

Medal of Honor Recipients: Speak Out! Save Lives at:

<http://www.medalofhonorspeakout.org/>

Our nation's greatest heroes – Medal of Honor recipients – speak out to save lives by encouraging America's military to seek help when adjusting to life after combat.



## Substance Abuse (Alcohol and Drugs)

Substance abuse is a major concern among Veterans returning from combat. Prescription drug abuse doubled among U.S. military personnel from 2002 to 2005 and almost tripled between 2005 and 2008. If you believe that substance use or abuse has become a problem for the Veteran then it is worth discussing with a health professional.



If the Veteran has had a TBI or has any mental health issue such as PTSD or depression, substance abuse will further impair their thinking. While intoxication may provide immediate relief of symptoms such as anxiety, it may start and/or worsen symptoms of several kinds of mental illnesses that are already present and may lead to using alcohol or drugs more persistently.

Opioid pain killers and medications known as benzodiazepines (e.g., Valium) when taken with alcohol, work together to create greater negative effects than if taken alone, posing risks for function, impulsive behavior, serious overdose and possibly death. In addition, painkillers that combine acetaminophen and narcotics, such as Vicodin, could cause severe liver damage when mixed with alcohol.

### Signs of Drug Misuse

If you as a Caregiver suspect that the Veteran is using illegal drugs or misusing medications that are prescribed, the following are common signs and symptoms:

- ★ Intoxication, incoherency, bloodshot eyes or dilated pupils, smell of substances and other physical indications that the person is under the influence.
- ★ Loss of interest in hobbies, sports and other favorite activities.
- ★ Changed sleeping patterns: up all night and sleeping all day.
- ★ Mood swings; irritable and grumpy and then suddenly happy and bright.
- ★ A sudden change in personality. A few keys signs to watch for are: lying, moodiness, oversensitivity, forgetfulness and a sudden lack of motivation.
- ★ Carelessness about personal grooming.

## Signs of Alcohol Misuse

Possible signs of alcohol misuse include:

- ★ Continuing to drink even though the Veteran's alcohol use is causing problems in your relationship.
- ★ Drinking more than intended—the Veteran may want to quit drinking, but can't.
- ★ The Veteran has given up other activities, including physical rehabilitation, because of alcohol.
- ★ Downplaying the negative consequences of drinking.
- ★ Complaining that family and friends are exaggerating the problem.
- ★ Blaming drinking or drinking-related problems on others.



## Taking Care of Yourself and Your Family

Often, Caregivers, family and friends feel the need to cover for the person with the drinking problem. Pretending that nothing is wrong and hiding away all of your fears and anger can cause you more stress.

- ★ Seek counseling for yourself and family in order to help you manage the stress of your relationship with the Veteran and to prepare you for helping him/her change.
- ★ Get assertive: learn effective communication skills.
- ★ Build a support network: speak to supportive people in your community about ways to get help.
- ★ Protect yourself as alcohol and drugs can increase the likelihood of aggression. If you are experiencing domestic violence, take action to protect yourself by calling your local law enforcement.

## Gaining Trust with the Veteran

Unfortunately, Veterans are often reluctant to discuss misuse of prescribed and non-prescribed substances during their recovery. Ways that you can help include:

- ★ Establish open and honest communication with the Veteran.
- ★ Develop a family support network to provide stability around the Veteran.
- ★ Limit the Veteran's access to alcohol and prescription drugs, particularly to opioid pain relievers and benzodiazepine anti-anxiety medications.
- ★ Stay in contact and coordinate with members of the Healthcare Team.

## Substance Abuse Resources

Resources where the Caregiver and other family member can get help with dealing with addiction in their family:

- ★ Speak with the existing Primary Care Team
- ★ Contact the OEF/OIF/OND Program at your local VA Medical Center
- ★ Substance Abuse and Mental Health Services Administration (SAMHSA) at:  
Website: <http://www.samhsa.gov/vets> 877-SAMSHA-7
- ★ Call 1-800-827-1000, VA's general information hotline
- ★ Al-Anon/Alateen website: <http://www.al-anon.alateen.org> 757-563-1600
- ★ Nar-Anon website: <http://www.nar-anon.org> 800-477-6291



## Managing Challenging Behaviors Knowledge Check

1. How can you help a Veteran who may be suicidal?
  - a. Suggest professional help, and then give him or her time to think about the idea.
  - b. Get professional help, even if the Veteran resists – call the Veterans Crisis Line.
  - c. Ask subtle questions about how he or she is feeling, to see if the Veteran will open up.
  - d. Leave him or her alone with a humorous book.
2. Describe how use of alcohol and prescription drugs for pain can negatively impact the Veteran's recovery:
  - a. May interfere with attention to physical rehabilitation and other recovery activities.
  - b. The combination of alcohol and opioid pain relievers, or benzodiazepine anti-anxiety medications, pose risks for function, impulsive behavior, serious overdose and possibly death.
  - c. May cause significant mood changes.
  - d. All of the above.
3. Which of the following is NOT an appropriate coping tool for the Caregiver of a Veteran who expresses a lot of anger?
  - a. Challenge him about his behavior, and stand your ground.
  - b. Find or create a support group.
  - c. Try not to over-react.
  - d. Try to re-direct the Veteran's focus.
4. Prescription drug abuse is not a problem among Servicemembers and Veterans serving in OEF/OIF/OND?
  - a. True
  - b. False

The answer key is located on page 167



## Notes

[illegible]



## Module 6: Resources



As a Caregiver, you may need to advocate for the Veteran or for yourself. Advocacy involves basic communication skills of listening to what other people have to say, and talking about what is important to you. In this final module, we will cover:

- ★ Being a partner with the health care team.
- ★ Privacy concerns.
- ★ Financial issues.
- ★ Legal issues.
- ★ VA, Federal and Community Resources.

## Being an Advocate for the Veteran

Advocacy involves knowing what you want in a situation, getting the facts, planning your strategy, being firm and persistent in a cooperative manner and maintaining your credibility by expressing your concerns as a partner in the Veteran's care, not through confrontation. Being an advocate for a Veteran also involves being aware of the benefits, programs and services to which you and the Veteran are entitled.

### The Veteran's Patient File

To be a good advocate, it is important to create and maintain a "patient" file. A patient file serves multiple purposes:

- ★ Keeps you organized.
- ★ Builds a history of the Veteran's situation.
- ★ Helps you plan.
- ★ Helps you be an effective member of the healthcare team.

Having a patient file will save you a great deal of time because you will have the Veteran's information at your finger tips. You can create this file using a simple three ring binder with dividers or maintain the information on a computer.

As with any tool it will only be effective if you keep it updated. Establish a schedule to keep the patient file up-to-date.

### What Should a Veteran's Patient File Contain?

The file should contain the following:

- ★ Insurance information.
- ★ Contact information (telephone numbers, addresses, email) for medical providers, nurses, case managers and other healthcare professionals.
- ★ Medications from both VA and non-VA providers.
- ★ Medical history.
- ★ Your observations.
- ★ Visit notes.
- ★ Questions for the next visit.
- ★ A pouch or envelope for storing loose documents.



## Making the Most of Healthcare Visits

Successful visits with the health care team don't just happen. You have to plan for them and be prepared during the visit.

### Before the Visit

It is important to bring a written list of questions, a notepad and a few pens when you meet with the health care team. It's easy to forget the issues you wanted to discuss during the appointment or what you were told by the provider.

1. Talk with the Veteran (when possible) and write down the questions you both have for the health care team.
2. Make a list of symptoms and changes since the Veteran's last visit
3. Put together a current list of all medications.
4. Confirm the appointment.



*Providing a current medication list may help prevent drug interactions or other problems with medication from arising.*

### During the Visit

The provider may be directing their questions and conversation to the Veteran. This is their legal responsibility. Don't take over this relationship, but do correct misstatements, and add omitted information. Make sure that you summarize the next steps before leaving to make sure everyone is in agreement about what has to be done and by whom.

- ★ Describe symptoms and changes.
- ★ Ask questions.
- ★ Record provider/nurse's instructions.
- ★ Discuss recommendations.
- ★ Verify follow-up.



## After the Visit

It is important that you review the appointment with the Veteran, including how you both thought it went and the follow-up that was recommended. If medication was prescribed it is critical that it be filled.

- ★ Review notes with the Veteran (whenever possible).
- ★ Discuss the visit.
- ★ Fill prescriptions.
- ★ Update the Veteran's patient file.
- ★ Call for test results.
- ★ Make follow-up or referral appointments.



## Caregiver and Veteran Privacy Rights

### HIPAA (Health Insurance Portability and Accountability Act)

HIPAA provides privacy for a person's medical records. The Veteran or Veteran's durable power of attorney should sign a HIPAA release. The release allows specific people to view the Veteran's medical records.

If you receive your health care at a Veterans Health Administration (VHA) health care facility, VHA will create health records that contain your treatment and health information. VHA recognizes that health information is personal and therefore we are committed to protecting the confidentiality of your health information. In most cases, VHA may not use or disclose your health information without your signed, written authorization. You also have certain privacy rights, such as being able to request a copy of your VHA health information.

### What is Health Information?

Health information is any information VHA creates or receives about you and your past, present, or future physical or mental:

- ★ Health/condition
- ★ Health care
- ★ Payment for medical services

## How Does the VA Use and Disclose Health Information?

In most cases, as stated above, written authorization is needed for VHA to use or disclose your health information. However, Federal law allows VHA to use and disclose your health information without your permission for certain purposes, which includes the following:

- ★ Treatment
- ★ Payment
- ★ Health Care Operations

## What are Your Privacy Rights?

You have the right to:

- ★ Review your health information.
- ★ Obtain a copy of your health information.
- ★ Request your health information be amended or corrected.
- ★ Request that we not use or disclose your health information for certain purposes.
- ★ Request that we provide your health information to you in an alternative way or at an alternative location in a confidential manner.
- ★ Provide an accounting or list of disclosures of your health information.

## Complaints about Privacy Rights Violations

If you are concerned that your privacy rights have been violated, you may file a complaint with:

- ★ The VA health care facility's Privacy Officer, where you are receiving your care. Visit this Website for VA health care facility telephone numbers.  
<http://www.va.gov/directory/>
- ★ VA via the Internet through "Contact the VA" at <http://www.va.gov> or by contacting the VA Privacy Officer (10P) at 810 Vermont Avenue NW, Washington, DC 20420.
- ★ The U.S. Department of Health and Human Services, Office for Civil Rights (HHS OCR) (<http://www.hhs.gov/ocr>) or VA's Office of Inspector General (800-488-8244 or <http://www.va.gov/oig>).

Complaints do not have to be in writing, though it is recommended. You will not be penalized or retaliated against for filing a complaint.



For more details on how your health information is being used by VA, how to exercise any of your Privacy Rights, or for a copy of the VHA Notice of Privacy Practices please contact the health care facility Privacy Officer at the VA facility where you are receiving care.

You may also obtain a copy of the VA Notice of Privacy Practices at the following website, [http://www.va.gov/vhapublications/viewpublication.asp?pub\\_id=1089](http://www.va.gov/vhapublications/viewpublication.asp?pub_id=1089)

## Financial Issues

### How Can You Plan Ahead?

Talk to the Veteran about finances and his/her health. Make sure you know his/her wishes. The following guidance can assist you to organize the Veteran's financial affairs:

- ★ Gather together everything about income, expenses, property, investments, insurance and savings.
- ★ Keep the Veteran's financial papers in one place. For example, a file cabinet at home. If papers are in a bank safe deposit box, keep copies in the home file as well.
- ★ Tell a person you trust where your important papers are kept. If there is no one with whom you are comfortable sharing this information, ask a lawyer for help.

### Warning Signs the Veteran is Having Trouble with Finances

- ★ Unopened mail piling up and unpaid bills.
- ★ Mishandling money.
- ★ Calls from creditors.
- ★ Costly new purchases and hobbies.
- ★ Complaining about not having enough money.
- ★ Physically not able to go to the bank or pay bills.





## Deciding the Financial Tasks with which the Veteran Needs Help

It may be hard for the Veteran to give up financial tasks. You can start slowly by depositing checks and helping to pay bills. Later, you might set up an automatic bill payment account. For other tasks, you may need to hire a professional. For example, a lawyer, accountant or financial planner can help with the following:

- ★ **Budget planning**—financial planner/accountant.
- ★ **Talking with creditors or lenders**—lawyer.
- ★ **Filing taxes**—accountant.
- ★ **Managing investments**—financial planner.

## Legal, Medical, or Financial Planning

Below are ways to make sure that the Veteran's wishes are followed. Some of the medical forms can be completed with the assistance of a VA Social Worker or Case Manager.

*It is best to contact an attorney for advice about non-medical arrangements. An attorney can also help setup these arrangements.*

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See the next section for information about contacting an attorney.

## Durable Power of Attorney (POA)

Gives someone the right to act for another person, including his or her Veteran. This could include making financial or legal decisions. It could include writing checks to pay the Veteran's bills. It stays in place if the Veteran becomes unable to make decisions. Provide the VA with a copy of the Durable Power of Attorney for the Veteran's records.

## Durable Power of Attorney (POA) for Health Care

A limited version of a full durable power of attorney, described above. A durable power of attorney for health care gives someone the right to act for another person, including the Veteran, as it pertains to health care decisions only. Provide the VA with a copy of the durable power of attorney for health care for the Veteran's records. A VA Social Worker or Case Manager can assist you with completion of a durable power of attorney for health care



## Advance Directive

This is a written statement by the Veteran that outlines the type of end-of-life-medical care he/she desires in the event the Veteran is unable to provide consent for treatment. This document also provides for naming an individual authorized to make medical decisions if the Veteran is unable to make decisions for him/herself. A VA Social Worker or Case Manager can assist you with the completion of an Advance Directive form.

## Will

States how a person wants their assets distributed at death. A will identifies who is in charge of a person's assets. A will can include other things, such as gifts or funeral wishes.

## Living Will

A type of advance directive (see above) in which the Veteran indicates personal preference regarding future treatment options. The Veteran can specify the medical treatments or interventions such as the use of feeding tubes or respirators etc. which should or should not be used in the event the Veteran is not able to provide consent. A VA Social Worker or Case Manager can assist you with completing a living will.

## Living Trust

Gives instructions about a person's estate. An estate includes a person's property and funds. The trust appoints someone to handle the estate when the person is no longer able to manage their legal or financial affairs. Trust instructions state how assets should be distributed at death. A trust can avoid the expense and delay of probate. Probate is the process by which a court decides if a will is valid or invalid.

## Guardianship

In a guardianship, the court appoints someone to make decisions when a person is no longer competent to make financial, legal or health care decisions. The court also decides whether or not a person is competent to make these decisions. The family may need guardianship if other advance planning documents are not in place. This process can take some time. Each state has its own laws regarding guardianship, therefore it is important to consult an attorney about this arrangement. If you establish guardianship of the Veteran in one state and then move to another state, it is likely that this legal process will need to be repeated.



## Estate Planning

Estate planning is developing a plan for others to manage assets if a person dies or becomes incapable. Estate planning can include writing wills and naming beneficiaries. It can also include creating trusts and making funeral arrangements.

## Joint Accounts

Joint accounts allow another person to handle someone's affairs. These can be checking, investment or other accounts.

## Other Important Financial Planning Terms

**Bank Representatives**—Bank representatives provide advice on ways to access the Veteran's accounts to pay bills. They can help set up a joint account.

**Accountants**—prepare tax forms. They can help you organize the Veteran's financial records.

**Fiduciaries**—The VA appoints fiduciaries for Veterans who are rated incompetent to manage their financial affairs. These fiduciaries are given a position of trust to handle the VA funds of another person.



## Helpful Tips

- ★ Ask someone at your local VA Medical Center about forms and financial planning resources.
- ★ Get references before hiring someone to help with finances. From time to time, check the work of hired assistants' to make sure they do an honest and responsible job.
- ★ Review financial plans regularly and update documents when needed.
- ★ Check VBA's Website: <http://www.vba.va.gov> for additional information.

## Remember

- ★ Plan ahead for managing the Veteran's finances.
- ★ Include the Veteran as much as possible in financial decisions and tasks.
- ★ Gather and organize the Veteran's financial information.
- ★ Qualified experts can help you manage the Veteran's finances.

## Legal Issues

If possible, use an attorney familiar with disability cases or Veterans' issues. Community legal aid agencies offer help at low or no cost. The bar association in your state and community can refer you to an attorney. First visits often include a small fee. Look in your local phone book to find these agencies or visit the American Bar Association website at [http://www.americanbar.org/portals/public\\_resources.html](http://www.americanbar.org/portals/public_resources.html).

## VA and Community Resources for Caregivers

For assistance with information and referrals about any of these programs described below, please contact a Caregiver Support Coordinator, VA Social Worker, or Case Manager at your local VA Medical Center. For Caregivers of a Veteran that need assistance, please contact your Primary Healthcare Team or Social Worker at your local VA Medical Center. They will direct you to the right person for information and assistance on resources to support you and the Veteran that you care for at home. You can also find more information at the Caregiver Support website <http://www.caregiver.va.gov>.

### Caregiver Services and In-Home Care

**Adult Day Health Care (ADHC) Centers**—provides and organized program of services during the day in a group setting which supports the Veteran's independence and promotes social, physical and emotional well-being. Programs offer a variety of activities designed to meet the individual needs and interests of participants. While Adult Day Health Centers are open 5 days a week, the Veteran can choose to participate 1-2 days a week or you may utilize this service for respite on a regular basis.

**Home-Based Primary Care**—delivers routine healthcare services to your home, including primary care, nursing care, medication management, nutrition, physical rehabilitation, mental health, social work and referrals to VA/community services. This program helps ease the worry of bringing the Veteran to and from a medical center for routine medical appointments when they have medical issues that make it difficult to travel.

**Skilled Home Care**—VA purchased care provided in your home, including nursing services and physical, occupational, or speech therapies. The Veteran must be homebound, meaning he/she has difficulty traveling to and from appointments in order to receive these services at home.

**Homemaker and Home Health Aide**—assists the Veteran with personal care needs, such as eating and bathing, which can be very stressful and time consuming for you. When services are arranged with your local VA Medical Center, the home health aide



will come to your home on a regular schedule to allow you time for yourself or to accomplish other household tasks.

**Home Telehealth**—enhances and extends care management and access to a care coordinator by using technology in your home. It is usually offered if you live a certain distance from a VA Medical Center. Home Telehealth may include education and training or on-line and telephone support groups.

**Respite Care**—provides you with a much-needed break from your daily routine and care responsibilities so you're better able to maintain your own personal needs. Every Veteran whose condition requires a Caregiver is eligible for up to 30 days per year of respite care. It is offered in a variety of settings including at your home or temporary placement of the Veteran in a VA Community Living Center, a VA contracted Community Residential Care Facility, or an adult day health care facility. Respite care may be provided in response to a Caregiver's unexpected hospitalization, a need to go out of town, or a family emergency. Take advantage of this opportunity to refresh. It is important for you as a Caregiver and for the Veteran you care for.

### Injury Specific Resources

**VA's Blind Rehabilitation Service**—supports blind and low vision Veterans in regaining their independence and quality of life to enable their successful integration into family and community life. The Blind Rehabilitation Program also supports family and significant others to better understand visual impairment and foster the provision of appropriate support, to assist in enhancing home environments and to reduce Caregiver burden. More information about the program can be found at:

<http://www.va.gov/blindrehab>



**VA's Spinal Cord Injury and Disorders Services**—supports and maintains the health, independence, quality of life and productivity of individuals with spinal cord injury and disorders throughout their lives. These objectives are accomplished through rehabilitation, sustaining medical and surgical care, patient and family education, psychological and vocational care, education and professional training. VA has the largest single network of spinal cord injury care in the nation. More information about the program can be found at: <http://www.sci.va.gov>



**The Prosthetic & Sensory Aids Service (PSAS)**—provides comprehensive support to optimize health and independence of the Veteran. Services include prosthetics and orthotics sensory aids, medical equipment and support services for Veterans. More information about the program can be found at: <http://www.prosthetics.va.gov>

**Vet Centers**—The Veterans Network of 232 community-based Vet Centers are located in all fifty states, the District of Columbia, Guam, Puerto Rico and the U.S. Virgin Islands. The Centers provide readjustment counseling for combat Veterans or family members. Call toll free during normal business hours at 1-800-905-4675 (Eastern) and 1-866-496-8838 (Pacific).

To locate the Vet Center closest to you go to <http://www.vetcenter.va.gov>, which contains eligibility requirements and a map where a Veteran or Servicemember can locate the center closest to him/her.

**Vet Center Services include:**

- ★ Individual counseling.
- ★ Group counseling.
- ★ Marital and family counseling.
- ★ Medical referrals, assistance in applying for VA benefits.
- ★ Employment counseling.
- ★ Substance abuse assessments.
- ★ Referral to community resources.





## Resources & References

### Veterans Service Organizations (VSOs)

A complete listing of all **chartered and non-chartered VSOs** is available on VA's website at: <http://www.va.gov/vso/>

**Family Caregiver Alliance (FCA)** offers a Caregiver support group at: [www.Caregiver.org](http://www.Caregiver.org). This site provides information on services, research and advocacy for families caring for loved ones with chronic health conditions. The Alliance can also be reached at 415-434-3388 or 800-445-8106, or e-mail [info@Caregiver.org](mailto:info@Caregiver.org)

**National Alliance for Caregiving** is a non-profit coalition of national organizations focusing on issues related to family caregiving. For more information visit <http://www.caregiving.org>

**National Family Caregivers Association (NFCA):** This site provides education and support for those caring for relatives with chronic illnesses or disability. Call 800-896-3650 or visit: <http://www.nfcacares.org>

**National Resource Directory:** The National Resource Directory is an online partnership for wounded, ill and injured Servicemembers, Veterans, their families, and those who support them. The website has information on national, state and local services and resources that support recovery, rehabilitation and community reintegration. 1-800-342-9647 or visit <http://www.nationalresourcedirectory.gov>



## Support Resources Knowledge Check

1. Who can you contact to find out what resources are available at your local VA Medical Center?
  - a. VA Social Worker.
  - b. Case Manager.
  - c. Caregiver Support Coordinator.
  - d. All of the above.
  
2. Help is not available from your local VA Medical Center or Vet Center to assist you with the Veteran that you care for?
  - a. True.
  - b. False.
  
3. Which resource would you contact to find respite care?
  - a. Vet Center.
  - b. Family Caregiver Alliance.
  - c. Caregiver Support Coordinator.
  - d. A lawyer.
  
4. Which of the following is not part of being an effective advocate?
  - a. Knowing what you want in a situation.
  - b. Planning your strategy.
  - c. Confronting the health care team.
  - d. Being firm and persistent.
  - e. Getting the facts.



5. How can you be an advocate for yourself? Pick three.
  - a. Contest a parking ticket you think unjust.
  - b. Reach out for help with your caregiving responsibilities.
  - c. Accept everything you are told is correct.
  - d. Tell your family you need a respite.
  - e. Don't tell your doctor that you are a Caregiver for a Veteran.
  
6. What are some things you can do to take care of yourself? Pick three.
  - a. Be extremely independent.
  - b. Get an annual checkup.
  - c. Get respite breaks.
  - d. Give up hobbies and friendships so you can focus more on caregiving.
  - e. Have the Veteran's financial and legal papers in order.
  
7. How can you be an advocate for the Veteran? Pick three.
  - a. Create and maintain a patient file.
  - b. Do not participate during doctor visits.
  - c. Have documents that allow you to access the Veteran's health care information.
  - d. Create a list of symptoms that develop between medical appointments and give it to the provider.
  - e. Fill the Veteran's prescriptions but you do not ask about potential side effects and interactions.



8. What are three things you can do to have a successful visit with the Primary Care Team? Pick three.
- a. Take charge of the conversation.
  - b. Bring an updated medication list to the visit.
  - c. Mention some changes you've noticed during the time since the last visit, describe them in general terms.
  - d. Write notes on some empty paper you have in your wallet/purse.
  - e. Ask questions.

The answer key is located on page 167



## Notes

[illegible]

## Notes

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



## Answer Keys and Final Self Assessment

### Answer Keys

Module 1: 1.c, 2.c, 3.d, 4.d, 5.c

Module 2: 1.a/c, 1.b/a, 1.c/d, 1.e/f, 1.f/b, 2.b, 3.a, 4.b, 5.d, 6.b

Module 3: 1. a, 2. a, 3. c, 4. d, 5. b, 6. a, 7. b, 8. d, 9.e, 10.e.

Module 4: 1.d, 2.b, 3.e, 4.b.

Module 5: 1.b, 2.d, 3.a, 4.b

Module 6: 1.d, 2.b, 3.c, 4.c, 5.abd, 6.bce, 7.acd, 8.bce

### Instructions for Final Self Assessment

Submission of this Final Self Assessment will be used to certify your successful completion of the training program. Once you've filled out this Final Self-Assessment Tool, it can be submitted in the following ways:

- ★ Via e-mail to [NVCTP@easterseals.com](mailto:NVCTP@easterseals.com)
- ★ Via fax to (202) 706-7555
- ★ Via mail to Easter Seals NVCTP, 233 S. Wacker Drive, Suite 2400, Chicago, IL 60606

Should you have any questions, please contact Easter Seals NVCTP staff at (866) 423-4981 or [NVCTP@easterseals.com](mailto:NVCTP@easterseals.com).



## Final Self Assessment

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

1. For healthy eating, which of the food groups should you limit in your diet?
  - a. Dairy
  - b. Protein
  - c. Saturated Fats
  - d. Vegetables
  
2. Which of the following activities will NOT help Caregivers be physically healthy?
  - a. Watching more TV.
  - b. Exercising regularly.
  - c. Planning nutritious meals.
  - d. Sleeping 7-8 hours each night.
  
3. What steps can Caregivers take care to support their emotional health?
  - a. Asking for respite (taking a break from care).
  - b. Learning and using stress management techniques.
  - c. Joining a support group.
  - d. All of the above.
  
4. All of the following are true of journaling EXCEPT:
  - a. Journaling is writing down one's experiences, thoughts and feelings.
  - b. Journaling can include poetry and drawing.
  - c. Journaling requires proper grammar and spelling.
  - d. Journaling provides the Caregiver with a record of her/his change and growth overtime.



5. All of the following are good ways for Caregivers to cope with stress EXCEPT:
  - a. Deep breathing and other relaxation techniques.
  - b. Humor.
  - c. Drinking more than one serving of alcohol each day.
  - d. Staying in touch with friends.
  
6. Understanding the assessment of the Veteran's ability to perform ADLs will allow the Caregiver to:
  - a. Be knowledgeable about the rehabilitation needs of the Veteran.
  - b. Plan for home modifications and/or assistive devices that will be needed.
  - c. Obtain training needed to enable the Caregiver to assist the Veteran with specific tasks.
  - d. All of the above.



7. To help reduce the risk of falling, which of the following would you NOT do:
  - a. Reduce the Veteran's level of activity.
  - b. Remove throw rugs.
  - c. Install grab bars near the toilet, bathtub and shower.
  - d. Clear walkways and paths.
8. Falls in the home are the leading cause of head injuries.
  - a. False
  - b. True
9. How well your shoes fit has nothing to do with tripping or falling.
  - a. True
  - b. False
10. The most effective way to control the spread of disease and infection is:
  - a. Washing your hands correctly.
  - b. Wearing gloves.
  - c. Wearing a face mask.
  - d. None of the above.
11. The early stage or sign that a pressure sore or ulcer is developing is the appearance of red areas on the skin that do not go away even after the pressure is removed.
  - a. True
  - b. False
12. You should wear gloves whenever you might be exposed to blood or body fluids.
  - a. True
  - b. False



13. What should be on a medication list? Pick three answers.
- a. Dosage
  - b. Start and stop date
  - c. Name of the Veteran's power of attorney
  - d. Name of drug – generic/brand names
  - e. Insurance information
14. In an effective pain management program, goals for the Veteran include everything below EXCEPT:
- a. Improved quality of life and function.
  - b. Increase self-management that helps persistent pain.
  - c. Reduced need for pain medications.
  - d. Lower pain level.
  - e. Increased emotional distress.
15. Caregivers can help the Veteran who has chronic pain by: Select all that are true
- a. Engage the Veteran in enjoyable activities that may distract from the pain.
  - b. Understand the treatment plan and ask questions.
  - c. Focus only on tracking pain levels.
  - d. Provide medications exactly as prescribed.
  - e. Believe the Veteran's report of pain.
16. What should you do if the Veteran is saying to you and others that there's no reason for living any longer?
- a. Call the Veterans Crisis Line: 1-800-273-8255, press 1.
  - b. Reassure him/her that things are not that bad.
  - c. Have the Veteran call a buddy to talk things over.



17. The use of alcohol while taking prescription drugs for pain can pose risks for function, impulsive behavior, serious overdose and possibly death
- a. True
  - b. False
18. What steps will assist the Caregiver and Veteran to be ready to make the most of visits to the health care team? Pick three answers.
- a. Talk with the Veteran (whenever possible) and write down the questions you both have for the health care team.
  - b. Explain why you missed your last appointment.
  - c. Make a list of symptoms and changes since the Veteran's last visit.
  - d. Put together a current list of all the Veteran's medications.
  - e. Nothing, the health care team has all the Veteran's health information.
19. The Health Insurance Portability and Accountability Act provides for which of the following?
- a. Allows the VA health facility to share your health information with other private healthcare facilities.
  - b. Allows the VA health facility to share your complaints with hospital leadership.
  - c. Protects the privacy of your personal health information.
20. Which of the following is not part of being an effective advocate?
- a. Knowing what you want in a situation.
  - b. Planning your strategy.
  - c. Confronting the health care team.
  - d. Being firm and persistent.
  - e. Getting the facts.





## Notes

[illegible]



**VA Caregiver Support Line**  
1-855-260-3274 toll-free

Monday through Friday, 8:00 – 11:00 pm ET  
Saturday, 10:30 am – 6:00 pm ET

[www.Caregiver.va.gov](http://www.Caregiver.va.gov)

