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Seniors And Proper Foot Care

From Hearthstone Senior Living

For a variety of reasons, foot problems tend to arise as we age. Feet lose cushioning over time, and the nails and skin can grow brittle and dry. Many seniors experience reduced overall blood flow, and this can delay the healing of foot sores. The best thing you can do for your feet is wear comfortable shoes that fit properly. It is particularly important to avoid high-heeled or tight-fitting shoes that put unnecessary pressure on the foot.

Foot Care & Seniors

The constant pinching and rubbing

from “fashionable” footwear are a leading cause of bunions, calluses, and corns. Feet may become wider as you age, so you should make a habit of having them measured before buying a new pair of shoes.

Another way to take care of your feet is to encourage good blood circulation. If you usually spend a considerable portion of the day in a chair, you can boost your circulation by exercising, stretching, and walking.

Avoid sitting too long with your legs crossed or wearing tight socks. And here’s yet another reason to refrain from tobacco use: Smoking narrows the arteries and can

hinder blood flow.

You can also avoid problems such as foot odor by washing your feet every day and drying them carefully (drying between your toes can also prevent other problems such as athlete's foot), and alternating what shoes you wear each day.

What are the foot problems seniors commonly face?

Here are a few common ailments, all of which can be prevented and treated.

- **Ingrown toenails.** This occurs when a sharp piece of nail pierces the skin surrounding the nailbed. Rather than trying to pull it off, carefully trim the nail straight across so that it is even with the top of the toe. Trimming regularly will also help prevent future issues. If you have an ingrown toenail that appears red and/or infected, you should see a doctor — especially if you have diabetes.
- **Heel spurs.** Putting too much pressure on your feet — by wearing shoes that don't give proper support, standing too long, or being overweight — can cause calcium deposits to form on your heel. These calcium deposits can lead to considerable pain and discomfort. You can give your feet a break with heel cups, heel pads, or other forms of support. If a heel spur continues to cause you pain and discomfort, make an appointment with your doctor.
- **When a toe doesn't have adequate room** to move, the knuckle can become inflamed and draw the toe back. Hammertoes are especially problematic for seniors because they can affect balance and raise the risk of falls. The remedy is simple: Wear shoes and socks that give your toes plenty of space.
- **Dry skin.** You can reduce the itching and burning of dry skin with moisturizers, preferably the kind with lanolin or petroleum jelly.
- **Corns and calluses.** As mentioned, wearing shoes that fit properly is the best way to prevent painful foot sores. If they do develop, you can pare them down by gently rubbing them with a callus file or pumice stone. You can

protect them from further damage with moleskin or nonmedicated pads. The medicated corn-removing treatments sold in drugstores may be tempting, but use extreme caution: They can damage healthy skin, which ends up causing even more pain. These products are especially dangerous for people with diabetes or other circulation problems. If you have one of these conditions, contact a doctor at the first sign of a callus or corn.

- **Athlete's foot.** This condition is not exclusive to athletes. This fungus thrives in moist, dark, warm areas, which makes the foot a compelling target. If you notice peeling, blisters, redness, and itching (particularly between the toes), quickly apply an athlete's foot powder or spray to the fungus. You can prevent athlete's foot by keeping your feet dry and clean and, whenever possible, wearing open-toe sandals or going barefoot. Please note that going barefoot can be hazardous if you have diabetes or other circulation problems.

How should people with diabetes care for their feet?

If you have diabetes, seemingly minor foot problems can pose major threats to your health. This disease often damages the blood vessels that carry blood to the feet, which means small wounds will heal at a slower rate and can even lead to gangrene.

In many cases, what started as a simple blister or corn becomes a life-threatening infection that forces foot or leg amputation. To further complicate things, diabetes can also numb the nerves in the feet, making it easier to overlook minor wounds as they fester and worsen.

For these reasons, people with diabetes must be extra vigilant about foot care, especially if they have had the disease for a number of years. Here are some tips for keeping your feet healthy:

- Always wear socks and shoes while walking around — going barefoot makes you susceptible to injuries that may not heal properly — and wear socks at night if your feet are cold. In addition, check that the inner lining of

your shoes is smooth, and carefully trim your toenails regularly.

- Examine your feet every day. Call your doctor immediately if you find a callus or corn, or if you have a blister, scrape, cut, or bruise that doesn't begin to heal within one day. Do not use over-the-counter solutions to remove corns.
- Keep the blood flowing. When your feet get tired, relax and put them up for a while. Flex your feet, wiggle your toes, and rotate your ankles for a few minutes, two to three times every day. Do not cross your legs for extended periods of time, and above all, do not smoke.
- Keep your feet clean. Wash them in warm water and dry them carefully every day. You can use a moisturizer, but don't apply it between your toes. Wear clean, soft, absorbent socks made of natural fibers such as cotton, and change them often.
- Take care of your diabetes. Keep your blood glucose in your target range with the help of your health care team.



7 Tips to Help Seniors Beat the Winter Blues

From Concordialm.org

During the winter months, many seniors find themselves feeling down. Whether it's due to the cold weather, shorter days, the holidays coming to an end or reminders of missed loved ones, seasonal sadness can often creep in during this time of year. While these feelings may be hard to dismiss, it's important to remember that every day is truly a blessing!

Are you or a senior loved one experiencing sadness this time of year? If so, we hope our tips below can help to brighten each day and make the most of the season. Please note that we encourage you to contact your doctor if your sad feelings last for several weeks

or if your symptoms keep you from living a healthy life.

- 1) **Brighten Your Home** - The vitamin D from natural light can help to improve your mood. Make it a daily routine to open your window coverings including blinds and curtains. Ask someone to help by trimming the trees or bushes that are keeping light from entering your home. If you still feel like you're lacking natural light, getting vitamin D firsthand by heading outdoors can also help - just make sure to dress warm!
- 2) **Anticipate an Event** - Whether you're looking forward to an upcoming party or celebration, planning

to redecorate for the spring or waiting for a package to arrive, anticipating some type of event can help to create positive feelings and excitement. If you can't think of something to look forward to, then create something! Invite your grandchildren or a friend over for a visit, plan an outing with a loved one or buy yourself a special treat.

3) **Stick to a Schedule**

- When experiencing the winter blues, it can be tempting to alter your schedule to avoid activities and socialization - and hibernate instead. For

example, if you prepared dinner at a certain time every day, try to stick to that same schedule. Or if you typically attend Sunday services at your church, don't skip it this time of year.

4) Eat a Balanced Diet - Eating a balanced diet is essential for older adults and is a natural way to boost your mood and energy. Provide your body with the right combination of proteins, carbohydrates, dairy products, fruits and vegetables. Avoid the temptation to chow down on unhealthy snacks, and instead, snack on complex carbohydrates and super foods such as hummus, blueberries and Greek yogurt.

5) Stay Active - Exercise, while im-



portant all year round, can be vital to lifting you up during the winter months. You can exercise indoors or dress in layers and take your exercise outdoors for some fresh air, if the temperature isn't too cold. Stretching, walking and lifting light weights are a couple of ideas to get you started. Maybe now is a good time to get a treadmill or stationary bike for your house!

6) Accomplish a Goal - If you've been putting off a task, whether big or small, now is the time to tackle it. Add it to your to-do list, and once it's finished, cross it off. This can help you feel motivated and may entice you to take on other items

from your list.

7) Socialize - Being around other people and/or talking to them can lift your spirits. Get together with friends or family or simply give them a call. Attending a church service or volunteering in the community are other great ways to be around people, spark conversation and shift your perspective. Don't forget that feeling sad during the winter is somewhat common among many seniors, so if you are sharing the feelings described in this article, please know you aren't alone. Always remember to consult with your healthcare professional if changing your exercise routine or diet, or if you are concerned about your sad feelings.

Drop-In Chefs Help Seniors Stay In Their Own Homes

From NPR

A healthy diet is good for everyone. But as people get older, cooking nutritious food can become difficult and sometimes physically impossible. A pot of soup can be too heavy to lift. And there's all that time standing on your feet. It's one of the reasons that people move into assisted living facilities.

But home chef companies provide an option. They send professional cooks into seniors' homes. In a couple of hours they can whip up meals for the week.

For more than a year, Chef Sina Sundby's been doing just that for 85-year-old client Jim Schulz, who lives in a suburb of Madison, Wis. Her starched white chef's jacket tops a pair of blue jeans, while her strawberry blond hair is tucked under the traditional floppy chef's hat. She's a blur, chopping and mixing while pans sizzle on the stove.

Schulz watches, but doesn't interfere.

"We chatter a lot when it's just the two of us," says Schulz. "And even if I don't say anything, she just keeps talking."

Schulz and Sundby both laugh. They know this story.

"I stepped out of the room once and I heard her talking and I said, 'Who are you talking to?'" Schulz says. "And she said, 'I'm talking to the food.'"

"I do talk to the food," says Sundby, proudly.

Schulz's conclusion: "That's what

makes it so good, it listens to her."

The food is also good because Sundby knows what Schulz likes.

So this week's dinners will be Salisbury steak with mushroom gravy, crab cakes with remoulade sauce and asparagus, chicken divan with fresh spinach and chicken pot pie with vegetables. And a twist.

"Jim likes biscuits," explains Sundby. "So instead of the pie dough, we're gonna do biscuits."

Schulz never made this kind of stuff for himself. When it comes to the kitchen, he's mastered the art of boiling water. His wife was a good cook, he says. But she died 14 years ago. So he ate whatever he could buy frozen and shove in the microwave.

"I was anemic, I'd lost a lot of weight, and it was [because] my diet was lousy," he says.

But Schulz says that according to his doctor, that's no longer a problem. "The last time I saw him was three months ago," says Schulz. "And he said, 'We can go a lot longer [between appointments], you're doing so well.'"

According to some estimates, there are hundreds of thousands, maybe even a million seniors living in their own homes who are malnourished. In long-term care facilities, up to 50 percent may suffer from malnutrition. This leads to increased risk

for illness, frailty and falls.

The number of seniors out there who aren't eating properly is shocking.

Part of the business plan is keeping these services affordable. In addition to the cost of the food, the client pays \$30 an hour for the chef's time. That's usually a couple of hours a week of cooking and cleaning up the kitchen. There's also a \$15 charge for grocery shopping. So clients pay on average \$45 to \$75 a week.

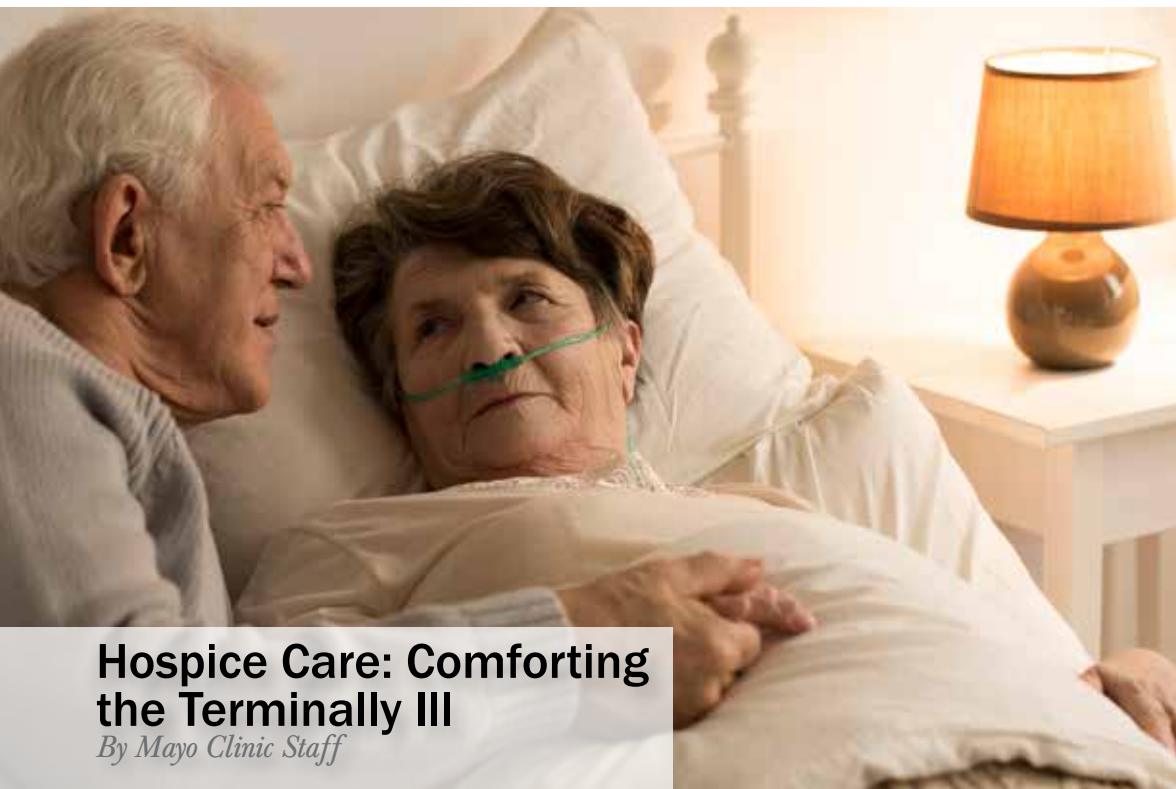
And while there are lots of personal chefs out there and services that deliver meals for seniors there are few services

specifically for older adults that prepare food in their homes.

Less than two hours after arriving at Jim Schulz's house, Sina Sundby is packing the food she made into single-portion containers, ready for the microwave. Aromas of chicken, mushrooms, biscuits, asparagus and chocolate chip cookies linger.

"When she leaves, I'm exhausted," says Schulz.

But he's got a week's worth of nourishing dinners to build up his strength for his chef's next visit.



Hospice Care: Comforting the Terminally Ill

By Mayo Clinic Staff

If you or a relative has a terminal illness and you've exhausted all treatment options, you might consider hospice care. Find out how hospice care works and how it can provide comfort and support.

Hospice care is for people who are nearing the end of life. The services are provided by a team of health care professionals who maximize comfort for a person who is terminally ill by reducing pain and addressing physical, psychological, social and spiritual needs. To help families, hospice care also provides counseling, respite care

and practical support.

Unlike other medical care, the focus of hospice care isn't to cure the underlying disease. The goal is to support the highest quality of life possible for whatever time remains.

Who can benefit from hospice care?

Hospice care is for a terminally ill person who's expected to have six months or less to live. But hospice care can be provided for as long as the person's doctor and hospice care team certify that the condition remains life-limiting.

Many people who receive hospice care have cancer, while others have heart disease, dementia, kidney failure or chronic obstructive pulmonary disease.

Hospice care decreases the burden on family, decreases the family's likelihood of having a complicated grief and prepares family members for their loved one's death. Hospice also allows a patient to be cared for at a facility for a period of time, not because the patient needs it, but because the family caregiver needs a break. This is known as respite care.

Most hospice care is provided at home with a family member typically serving as the primary caregiver. However, hospice care is also available at hospitals, nursing homes, assisted living facilities and dedicated hospice facilities.

No matter where hospice care is provided, sometimes it's necessary to be admitted to a hospital. For instance, if a symptom can't be managed by the hospice care team in a home setting, a hospital stay might be needed.

Who's involved in hospice care?

If you're not receiving hospice care at a dedicated facility, hospice staff will make regular visits to your home or other setting. Hospice staff is on call 24 hours a day, seven days a week.

A hospice care team typically includes:

Doctors. A primary care doctor and a hospice doctor or medical director will oversee care. Each patient gets to choose a primary doctor. This can be your prior doctor or a hospice doctor.

Nurses. Nurses will come to your or your relative's home or other setting to provide care. They are also responsible for coordination of the hospice care team.

Home health aides. Home health aides can provide extra support for routine care, such as dressing, bathing and eating.

Spiritual counselors. Chaplains, priests, lay ministers or other spiritual counselors can provide spiritual care and guidance for the entire family.

Social workers. Social workers provide counseling and support. They can also provide referrals to other support systems.

Pharmacists. Pharmacists provide

medication oversight and suggestions regarding the most effective ways to relieve symptoms.

Bereavement counselors. Trained bereavement counselors offer support and guidance after the death of a loved one in hospice.

Medicare, Medicaid, the Department of Veterans Affairs and private insurance typically pay for hospice care. While each hospice program has its own policy regarding payment for care, services are often offered based on need rather than the ability to pay. Ask about payment options before choosing a hospice program.

The National Hospice and Palliative Care Organization offers an online provider directory.

To evaluate a hospice program, consider asking:

Is the hospice program Medicare-certified? Is the program reviewed and licensed by the state or certified in some other way? Is the hospice program accredited by The Joint Commission?

Who makes up the hospice care team, and how are they trained or screened? Is the hospice medical director board certified in hospice and palliative care medicine?

Is the hospice program not-for-profit or for profit?

Does the hospice program have a dedicated pharmacist to help adjust medications?

Is residential hospice available?

What services are offered to a person who is terminally ill? How are pain and other symptoms managed?

How long does it take to get accepted into the hospice care program?

What respite services are available for the caregiver or caregivers? What bereavement services are available?

If circumstances change, can services be provided in different settings? Does the hospice have contracts with local nursing homes?

Are hospice costs covered by insurance or other sources, such as Medicare?

Remember, hospice stresses care over cure. The goal is to provide comfort during the final months and days of life.



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