

WHAT IS ELDER ABUSE AND NEGLECT?

June 15 is World Elder Abuse Awareness Day

Elder abuse "is a knowing, intentional, or a negligent act by a caregiver or any other person that causes harm or a serious risk of harm to a vulnerable adult." According to the National Center on Elder Abuse, the types of elder abuse are physical, sexual, emotional, financial abuse, neglect, abandonment, and self-neglect.

When an intimate partner or family member perpetrates elder abuse, it is considered domestic violence. Adult children are the most frequent abusers of the elderly in their homes... Other family members and spouses ranked as the next most likely abusers of the elderly.

Elder abuse in a domestic setting is a tremendously serious problem. "However, because it is still largely hidden under the shroud of family secrecy, elder abuse is grossly under-reported. Some experts estimate that only 1 out of 14 domestic elder abuse incidents (excluding the incidents of self-neglect) comes to the attention of authorities." The number of reported incidents increases steadily each year.

Many elder abuse victims are medically and/or cognitively unable to report abuse and neglect, while others fear retaliation, institutionalization, or abandonment. "Shame and embarrassment often make it difficult for older persons to reveal abuse...Religious or ethical belief systems sometimes allow for mistreatment of family members, especially women."

"A majority of states now mandate reporting of elder abuse... States also have different punishment schemes for failure to report. The majority of states now make the failure to report elder abuse a misdemeanor and may punish that failure with a fine and/or jail time. Those charged with the responsibility of reporting elder abuse are generally required to have a "reasonable belief" that an elderly person has been the victim of elder abuse. Institutional caregivers and their employers are also subject to penalties and sanctions for failing to report elder abuse." Beyond the moral and professional responsibilities of reporting abuse, it is important to know state laws.

Indicators of elder abuse and neglect regarding the patient are numerous, and may be emotional, behavioral, medical, financial and sexual. They may include, but not be limited to: unexplained and untreated bruises; signs of restraints; under or over medication; dehydration; malnourishment; sexually transmitted diseases and other physical indicators of sexual abuse; filthy clothing and bedding; depression, fear, anxiety; substance abuse; living situation not commensurate with financial situation; reports of missing possessions; induced isolation. (Continued...)

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Indicators of elder abuse and abuse by the caretaker may include, but not be limited to: conflicting reports regarding the elder's physical condition, care or treatment; indifference, anger, overbearing behavior, blaming the elder; non-cooperation with medical and service providers; justification for isolating elder; withholding affection; lack of spending for the elder's needs.

If someone is in *immediate danger*, call 911 or the local police for immediate help. If you suspect elder abuse, "The first agency to respond to a report of elderly abuse, in most states, is **Adult Protective Services (APS)**. Its role is to investigate abuse cases, intervene, and offer services and advice. Every state has at least one toll-free elder abuse hotline or helpline for reporting elder abuse in the home, in the community, or in nursing homes and other long-term care facilities. In addition, information and referral are also available from the national Eldercare Locator: 1-800-677-1116, and www.ncea.aoa.gov

Dale Kassan, ACSW, LMSW is Project Coordinator of the Education Dept., Nassau County Coalition Against Domestic Violence. For more information visit www.cadvnc.org or call the hotline at 516-542-0404

APRIL

"Foot Health Awareness Month"

A Guide to Common Foot Problems

We all encounter foot problems at one time or another. Following is basic information on such foot problems.

Foot Problem:

ATHLETE'S FOOT.

Prevention: Keep the area between the toes dry. Avoid bare feet in public showers and locker rooms by wearing flip-flops.

Care: Over-the-counter antifungal cream usually is effective. Athlete's foot powder may be used for maintenance.

Foot Problem:

BLISTERS

Prevention: Wear shoes that fit properly. Break in new shoes gradually.

Care: The blister may be washed gently with soap and water, patted dry, treated with an over-the-counter

antibiotic cream, and covered with a clean bandage during the day. Don't pop the blister.

Foot Problem:

BUNION (*excess or misaligned bone in the big toe joint*)

Prevention: Bunions caused by a hereditary condition cannot be prevented. Avoid tight or high-heeled shoes. See your doctor for treatment of arthritis in the area of the big toe joint.

Care: Apply a nonmedicated bunion pad on the bony bump. Apply and ice pack several times a day if the bunion becomes inflamed or painful. Acetaminophen (Tylenol) may help control pain. A podiatrist may prescribe padded shoe inserts (orthotics) or steroid injections.

Foot Problem:

CALLUSES/CORNS

Prevention: Be sure that shoes fit properly.

Care: Use nonmedicated corn pads or a pumice stone. Do not attempt to remove corns yourself.

Foot Problem:

FLAT FEET

Prevention: This can be hereditary or the result of years of wear and tear. Maintain normal weight to decrease stress on feet. Avoid high heels.

Care: Discuss with a doctor whether orthotics or an ankle brace might help when walking or exercising. Limit weight-bearing activities. Do non-weight-bearing activities such as swimming.

Foot Problem:

PLANTAR WARTS (*bumps, similar to calluses, that develop on the bottom of the feet*)

Prevention: None.

Care: Do not self-treat. You should see a doctor.

Reprinted from the Home Health Aide Digest. They may be contacted at info@hhadigest.com

Happy Easter
and a
Happy Passover

MAY

“Older Americans’ Month”

IMPROVING INTERGENERATIONAL COMMUNICATION

It's a sad thing if you lead your whole life and find at some point that you are not happy with the relationship you have with your children or grandchildren. However, if we can overcome our difficulties in controlling our feelings and set our sights on using strategies to enhance our skills with our offspring, we can achieve a vast improvement in our contentment.

Naturally, as parents we feel some obligation to help children when they are not as happy as we would like them to be. We can't really be happy if our children aren't. However, sometimes our efforts to deal with our children's unhappiness leads us to make some statements that are perceived as critical. When children present us with a problem, sometimes they are really not asking for advice. They just want us to listen and in listening we can often help them to relieve the stress and anxiety around the problem and then they can go on to solve it on their own. So unless they ask for specific suggestions, I usually advise not to make any such suggestions. We might ask, "Do you want some suggestions?," and then we should be guided by what they say. As you know from experience, often people don't take suggestions even when they are excellent. This is an area requiring great care. I have found in such situations it is usually better to just ask some questions to show interest and give support and encouragement.

Sometimes at a social event like Thanksgiving or Christmas with a group of our children present, it is natural for all the usual dynamics to come into play. At these events some children feel that they are the preferred one or some feel that they are the least preferred and they start to act up. They may try to manipulate us to get more favorable treatment and sometimes they put pressure on each other.

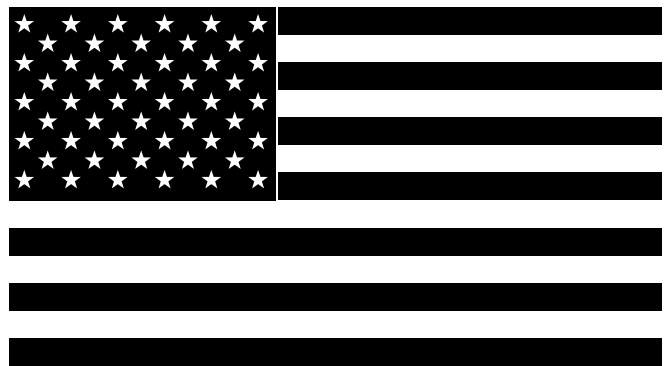
My wife has sent presents to our nephews for many, many years. My brother-in-law hasn't really reciprocated because his wife died a number of years ago and he feels it's the wife who often performs the mission

of gift giving. I admire my wife's maternal instincts. They have paid off because my nephews haven't forgotten the good will that my wife demonstrated towards them and they are very positive toward her. I am sure that if my wife wasn't as generous and loving toward her nephews, things probably wouldn't have turned out the way they did. The trick is to overcome your resentment at being ignored or not appreciated and to continue to do the right thing. Eventually this should pay off. People don't forget when they are treated well.

Another tip, I find that when members of the family are at odds with each other, introducing another topic or trying to promote some kind of positive relationship between the two of them pays large dividends. For instance, if two of your children arrive at your house and they have been on a long journey and are irritable and hardly speaking, if you introduce a topic of some interest to them, they'll feel that you care about them. They usually respond and speak about the introduced topic. They're happy to have the tension reduced and to be put in a situation where they feel more comfortable.

Taking similar kinds of interests in the activities and interest of our children and grandchildren goes very far towards improving their positive perception of us. My grandchild was reading a book about Galileo and since I have an interest in astronomy, we spoke about Galileo's difficulties with the church, some of his discoveries, etc. My grandson was thrilled to learn of my interest in something that he was interested in and later on in the day we learned that his sister named one of her dolls after my wife. She wasn't going to be outdone when it came to buttering up the grandparents.

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HAPPY MEMORIAL DAY!



MAY

**HAPPY
MOTHER'S
DAY!**

**“National Osteoporosis
Awareness Month”**

OSTEOPOROSIS AND PHYSICAL THERAPY

Osteoporosis is a diagnosis that can have a negative affect on your lifestyle if nothing is done about it. Without intervention, fractures, spinal deformity, loss of mobility and chronic pain can result. An individual with osteoporosis can easily fracture a hip or wrist following a fall. In addition, fractures of the vertebrae can result from lifting the "wrong" way, lifting heavy objects or twisting and bending forward improperly. Poor posture is another factor that contributes to spinal deformity. Today, there are exercises that can help strengthen your bones.

Physical therapy for osteoporosis will help you learn ways to protect yourself from fracture, and manage musculoskeletal pain problems, restore mobility and function, and instruct you in an exercise program specific to your needs. You'll be taught new ways of doing everyday activities without putting yourself at increased risk of fracture. In addition, adverse side effects associated with osteoporosis, such as height loss and spinal deformities, can be avoided or minimized by learning to move in ways that protect your spine. Your risk for fracture can also be reduced by maximizing bone strength potential through a regular exercise program.

A physical therapy program targeted for osteoporosis educates you about this disease and gives you the personalized tools necessary to slow down the progression of bone loss, and to prevent future fractures.

Courtesy of St. Charles Hospital, located in Port Jefferson, New York. The hospital's centers of excellence include orthopedics, obstetrics and rehabilitation. For more information on St. Charles Hospital or their 9 outpatient physical therapy sites, call (631) 474-6977 or visit www.stcharles.org

LAUGHTER IS THE BEST MEDICINE



Two doctors and an HMO manager die and line up together at the Pearly Gates. One doctor steps forward and tells St. Peter, "As a pediatric surgeon, I saved hundreds of children." St. Peter lets him enter. The next doctor says, "As a psychiatrist, I helped thousands of people live better lives," St. Peter tells him to go ahead. The last man says, "I was an HMO manager. I got countless families cost-effective health care." St. Peter replies, "You may enter. But," he adds, "you can only stay for three days. After that, you can go to hell."

HAPPY FATHER'S DAY! JUNE 21st

A Testimonial about a Utopia Caregiver

I am writing to let you know how pleased I am with the services and care, given to my father, Robert by your employee, Vicky.

She keeps his apartment clean and sees to all of his needs as a caregiver. Because my father is legally blind, he needs someone who he can trust and someone who he feels comfortable with. Vicky is that person. He has complete faith in her and to my brother, sisters and me, that is very, very important.

I truly hope that Vicky will be with him for a long time, because she is a great aide.

Sincerely, J.G.

Correction

In the winter 2009 issue, we mistakenly listed the wrong phone number for United Lifeline and United Home Services. The correct number is 1-800-345-4571.

UTOPIA HOME CARE EMPLOYMENT OPPORTUNITIES in Home Health Care for Certified Home Health Aides, Nurses, Therapists, and Social Workers. **FREE TRAINING** to become a Certified Home Health Aide on Long Island, in New York City and in Connecticut. EOE

HOME HEALTH CARE SERVICES - Please call the numbers listed below for information, or visit our website at www.utopiahomecare.com
LI, NY 631-544-0462, CT 800-227-3449, NYC 718-429-5221, FL 727-821-3332, PA 610-375-1800, SC 843-553-6060

PROTECTING YOURSELF — AGAINST — IDENTITY THEFT

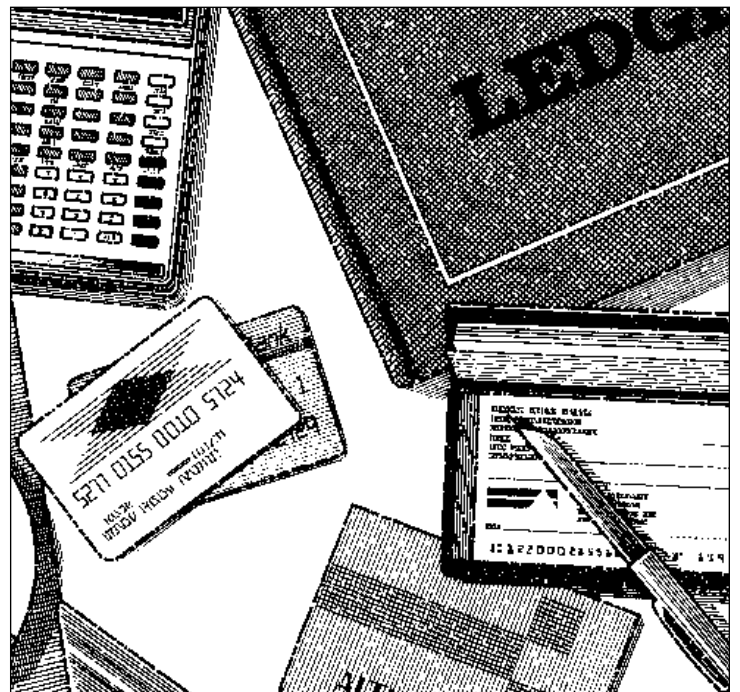
Identity theft is quickly becoming a worldwide epidemic. Every 79 seconds someone's identity is stolen. The following are some suggestions to minimize the damage to your personal funds and financial accounts, as well as your reputation:

- Protect your social security number and never give it on the Internet. Don't have it printed on your checks. To report Social Security fraud, call 1-800-269-0271.
- Check your bank statements and credit card bills as soon as they arrive. If you don't receive them contact the financial institution.
- When writing a check for a credit card bill write ONLY the last four digits of the account number on the "For" line.
- Copy the contents of your wallet (both sides) so you have all the information if it's lost or stolen.
- Destroy any pre-approved credit card offers you don't want to accept. Also, destroy any papers with your personal information that you are going to throw out.
- Beware of phishing e-mails. They may appear to be from legitimate businesses such as banks and credit card companies or even ebay. They ask for credit card information or your social security number to correct information on your account. Call the institution to verify the request. DON'T reply to these e-mails or click on any links.
- Check your credit reports and monitor your credit history. You can get a free copy of your credit reports every year from each of the three credit bureaus. If you are a victim of identity theft, placing a fraud alert can prevent an identity thief from opening more accounts in your name. You are entitled to a free copy after placing an alert. Each agency has a consumer fraud division. Contact them at Equifax 1-800-525-6285; www.equifax.com; Experian 1-888-397-3742; www.experian.com; Trans Union 1-800-680-7289;

www.transunion.com. Continue to check your credit reports, especially in the first year to make sure no new fraudulent activity has occurred.

- Don't give ANYONE your pin numbers. Memorize your number or change it to one you can remember. Don't keep it in your wallet or purse.
- If you're traveling have your mail held at the post office or by someone you trust.
- You can file a complaint with the Federal Trade Commission (FTC) using the online complaint form at www.ftccomplaintassistant.gov or by calling 1-877-ID-THEFT (438-4338).
- If you become a victim, report it to the police immediately.

Linda Titcomb is President of Daily Money Management Inc. who offers personal affairs assistance. Her expertise and advocacy have assisted seniors and those with disabilities for over ten years. For more information please call 631-623-6431 or e-mail info@dmoneymanager.com



HIDDEN BENEFITS FOR VETERANS

There are more than 20 million veterans alive today and yet, according to the Veteran's Administration ("VA"), less than 1/3 of them are currently accessing benefit programs offered by the government.

WHO IS A VETERAN?

A veteran is a person who served as a member of the Army, Navy, Air Force, Marine Corps, or Coast Guard, or as a commissioned officer of the Public Health Service, the Environmental Science Services Administration or the National Oceanic and Atmospheric Administration. The veteran's service must have been full time service, and their discharge must have been "other than dishonorable."

AVAILABLE BENEFITS

There are two (2) basic monthly benefit programs for veterans:

- 1) Service-connected "compensation", and
- 2) Non-service connected "pension".

In addition, veterans with a service-connected disability may also receive health care and pharmacy benefits.

SERVICE-CONNECTED COMPENSATION

For a veteran who suffered an injury or disease while on active duty, he/she may be eligible for a monthly compensation payment. The veteran must first receive a disability rating from the VA which determines how much the veteran is entitled to each month as compensation. It is also important to note that the VA does not consider the veteran's income or assets when determining eligibility for service-connected disability compensation.

NON-SERVICE CONNECTED PENSION

To be eligible for the non-service connected pension benefit, the veteran must be disabled, unless over age 65 when there is no disability requirement. Also, the veteran must have served during a period of war. Designated wartime service periods include:

- World War II- December 7, 1941 to December 31, 1946
- Korean War- June 27, 1950 to January 31, 1955

- Vietnam War - August 5, 1964 to May 7, 1975
- Persian Gulf War - August 2, 1990 to a date to be determined by Presidential proclamation.

The veteran must have served 90 consecutive days of active duty (if before 1980, or 24 months of continuous active duty if after 1980) with at least 1 day during a declared period of war as shown above. There is no requirement that the veteran's service had to be in a combat zone, or even that the veteran left the United States.

Unlike the service-connected disability compensation program, the pension program is a "means tested" program for which the veteran must qualify financially.

When considering an application by a veteran (or veteran's surviving spouse) for non-service connected pension, the VA will look at the veteran's household income (ie, that of the veteran and his or her spouse) as well as their assets. The residence of the veteran is an exempt asset and income can be offset by unreimbursed medical expenses.

AID AND ATTENDANCE

The most common form of pension benefit is "Aid and Attendance". This is an increased monthly benefit based upon the veteran's need for assistance with activities of daily living (including dressing, eating, toileting and bathing) and provides the largest possible monthly payment (up to \$1,949/month for a married veteran).

Aid and Attendance can provide a monthly benefit to allow a veteran to help pay for care at home or even an assisted living facility. There are several resources available to veterans and their families. The VA has a website located at www.va.gov. In addition, most counties have a veteran's service agency to assist veterans with potential benefits available. Veterans can also seek counsel from attorneys or others in the community, however, it is important to note that in order to provide advice to a veteran about benefits, the person must be accredited with the Veteran's Administration.

For a free brochure on Veteran Benefits, contact Vincent J. Russo & Associates, PC at 1-800-680-1717 or visit our website at vjrusso.com

Frank L. Buquicchio, J.D. is a Partner of Vincent J. Russo & Associates, PC, Long Island's Signature Elder Law, Special Needs and Estate Planning Law Firm with four offices located in New York. He is an accredited attorney with the Department of Veterans Affairs.