Welcome to the Case Manager’s Corner

By Linda Ziac
The Caregiver Resource Center
www.CaregiverResourceCenter.com

Tips for becoming a better educated healthcare consumer for yourself and your family.

Every day, The Caregiver Resource Center receives calls from individuals who feel overwhelmed by the challenges of life; whether it’s dealing with parenting, a healthcare issue, an aging parent, or the struggles of living with a disability. Often times these individuals aren’t sure what questions to ask, what rights they have, or where to turn for help.

The goal of The Case Manager’s Corner is to provide a venue where Linda Ziac can share tips and skills that Linda has acquired over more than 40 years as a licensed psychotherapist, board certified case manager and board certified dementia practitioner; while helping readers become better educated consumers for themselves and their families.

Each month, Linda will present a case that she’s worked on and the steps she’s taken with clients and their families, to positively impact their lives and overcome challenges. Please note that this information is provided in a way that helps protect the client’s privacy and confidentiality.

TODAY’S CASE PRESENTATION - MR. P

Today Linda would like to share a call she received from Bill, an adult child who lives out of state. Bill was concerned about what he saw as his father’s overall decline.

Keep in mind that things are not always as they appear. Using a metaphor, situations are often like an iceberg, with much of the information below the surface, and not readily visible.

Bill reported that his father had always been a very active, social with many friends, and a great sense of humor. All that changed dramatically over the past three month period of time.

Bill reported that his father Mr. P has been more confused, often repeating himself, losing weight, weaker, and having difficulty with balance, standing and walking.
Mr. P is an 86 year old male who lives alone and has a number of health issues including high blood pressure, cholesterol, and Parkinson’s disease.

Bill said that he was calling The Caregiver Resource Center because “My father’s Parkinson’s Disease is getting much worse.” Bill then requested help finding a good nursing home for his father.

**A SUMMARY OF LINDA’S ASSESSMENT AND WORK WITH MR. P**

Linda’s role as a certified case manager is to provide a client assessment while gathering “pieces of the puzzle” from many sources, including the client, family, and healthcare professionals, and then help create an appropriate care plan (road map).

When Linda arrived at Mr. P’s home, Linda saw a dining room table and kitchen table filled with prescription medication bottles; many that were long ago expired or discontinued by his doctor.

Linda suspected that what Bill saw as a rapid decline in his father’s health and abilities, was likely at least in part due to Mr. P not taking his medication as prescribed.

After arranging for Mr. P to see his neurologist, we learned that Mr. P was very under medicated, which meant that Mr. P was experiencing all the symptoms of a person with an “untreated medical condition”.

Often Mr. P would forget and skip his medication all together, or thinking that he forgot his medication, Mr. P would double dose (take twice the medication as prescribed).

Due to the fact that Mr. P was scheduled to take medication four times a day, we needed to come up with a customized plan to meet Mr. P’s unique needs.

**OUR PLAN**

Linda was able to work with Mr. P and his son to:

1. Bring in a registered nurse once a month, to set up 4 weekly pill boxes for Mr. P, with compartments for the four times a day that Mr. P needed to take his medication.

A review of Mr. P’s prescription medication bottles indicated that Mr. P had been missing as many as 60 medication dosages per month; enough to be causing the symptoms that Mr. P’s son Bill was reporting.

2. Linda created a medication book complete with one page per medication; including a photo of the medication, dosage, time of day to be taken, and instructions for taking the medication.

The book also included a copy of the prescriptions from the doctor listing all of Mr. P’s medications.

This book helped Mr. P remember what his medication looked like, and allowed Mr. P to feel comfortable that he was taking the correct medication, as prescribed.

3. We arranged for Mr. P to receive a phone call four times a day when he was scheduled to take his medication, as a medication reminder.
4. For the 1st month, Mr. P’s medication was checked weekly, to see if he was taking his medication as prescribed.

5. We also arranged for Mr. P to have a companion several hours a day, and physical therapy twice a week.

A PROGRESS REPORT ON MR. P

For the first 3 months of our plan, things went well with Mr. P not missing any medication with the phone call remi

nders. As a result of Mr. P’s success, he asked to return to monitoring his medication.

For the 4th month we set up Mr. P’s cell phone alarm to alert him 4 times a day when it was time for him to take his medication, instead of phone call reminders. We continued to keep all medication locked up except for the pillbox for that particular week.

At the end of the 4th month, Mr. P had missed only 2 medication dosages, both at the 10:00 pm time slot. This was a huge improvement over past occasions with as many as 60 missed dosages.

For the 5th month we kept our plan in place, but added a bed side alarm clock, which would go off at 10:00 pm as an additional medication reminder. Our review of Mr. P’s medication pillboxes for the 5th month showed no missed medication dosages.

We continued to have monthly medication review meetings and medication pours, as we continued to support and encourage Mr. P’s independence.

As suspected, once Mr. P was taking his medication as prescribed, he returned to his active life of attending a men’s group, playing cards with friends, and even an occasional game of golf.

THE VALUE OF CASE MANAGEMENT

Care for seniors and people with special needs often requires a multi-disciplinary team approach that encompasses many aspects of life such as:

• Health and Mental Health
• Activities of Daily Living (ADLs)
• Transportation
• Finances
• Social Opportunities
• Emotional Well Being
This process needs to focus on a person’s:

- Hopes and Desires
- Short and Long Term Goals
- Abilities and Needs
- Spectrum of Resources to address current and evolving needs

Case management is a collaborative process that consists of four steps:

1. Needs Assessments
2. Development of a customized Care Plan (road map)
3. Implementation & Monitoring of the Plan
4. Ongoing Review and Modification of Care Plans as client needs change

THE CAREGIVER RESOURCE CENTER

Each person is unique, and as a result, each person has unique needs. Some people may experience mental and physical limitations that limit their level of functioning, while others will remain relatively high functioning.

The Caregiver Resource Center’s role is to work with the client, their family and healthcare professionals to help assess, plan for and implement ways to allow for their greatest degree of health, safety, independence, and quality of life.

Some Benefits of Our Services

- Well respected company serving the community since 1990
- All services are individually designed to meet the unique needs of the client
- We are available 7 days a week by appointment, and 24/7 for emergencies
- Professional support & guidance
- Our services may be provided on-site in the home, doctor’s office, ER, hospital, assisted living facility, or nursing home

Photo from Microsoft

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*Please consult your health care provider for an appointment, before making any healthcare decisions or for guidance about a specific medical condition.*
Linda Ziac is the owner and founder of The Caregiver Resource Center. The Caregiver Resource Center is a division of Employee Assistance Professionals, Inc. which Linda founded in October 1990. The Caregiver Resource Center provides a spectrum of concierge case management and advocacy services for seniors, people with special needs and families.

Linda’s professional career spans more than 40 years in the health and mental health field as a CT Licensed Professional Counselor, CT Licensed Alcohol and Drug Counselor, Board Certified Employee Assistance Professional, Board Certified Case Manager, and Board Certified Dementia Practitioner. In addition, Ms. Ziac has 15 years of experience coordinating care for her own parents.

Linda assists seniors, people with special needs and their families; in planning for and implementing ways to allow for the greatest degree of health, safety, independence, and quality of life. Linda meets with individuals and family members to assess their needs, and develop a Care Team, while working with members of the Team to formulate a comprehensive Care Plan (a road map). Once a plan is in place, Linda is available to serve as the point person to monitor and coordinate services, and revise the plan as needed. This role is similar to the conductor of an orchestra; ensuring that there is good communication, teamwork, and that everyone remains focused on the desired goal.

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