You Did It!

Thank you volunteers for keepin’ it real by taking care of yourself. There will always be another vigil opportunity, another patient for companioning, another reflections project, and another project at the office. When you acknowledge your own limitations - by knowing when to stop, and not feel guilty for saying no to an assignment - you honor your own body. Compassion fatigue is an equal opportunity employer and does not discriminate against hospice volunteers. Thank you for protecting yourself against burnout by taking care of yourself! Our team is so appreciative to have happy, healthy volunteers. Thank you.
**Timely Tips and Reminders**

**Reminder:**
Companion, Reflections, and Pet Therapy Volunteers—remember your commitment to visit your patient once a week (unless otherwise specified) is very important. In order for volunteers to make a patient visit, a physicians order must be signed. Volunteers are a part of the patient’s scheduled plan of care. Volunteers must meet their scheduled frequency. If a volunteer misses their minimum number of ordered visits the patient’s physician is then notified. It is a BIG deal if you have committed to make a visit with a patient that week and you don’t go. It is also a BIG deal if you don’t submit your volunteer note within three days providing documentation of your visit. The Volunteer Coordinator is here to help make alternative arrangements when you are unavailable. Remember, volunteer visits are set according to patient need not volunteer availability or preference. Let’s be communicative and work together as a team so that we can provide excellent services to our patients.

**Reminder:**
Call AseraCare main office number immediately if your patient is in pain. Then, if you are at a facility also notify patient’s pain to their staff. Document this communication in your visit note.

**Tip:**
The actual use of the letters S= T= O= P= will no longer be used in volunteer documentation visit notes. Going forward, please DO NOT write S=...T=… Simply write a regular narrative using the STOP acronym as your mental guide.

**Tip:**
Program the AseraCare main office number in your cell phone 952-943-0009.

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**The Book Nook**
**Recommended Books, CDs, and Media**

**Caregiver Therapy** by J Keubelbeck & V. O’Connor. 80 pages. $4.95. This is one of the popular “Elf” books that in a short, engaging manner conveys helpful information on how to take care of oneself while taking care of others. Highly recommended by www.compassionbooks.com.

**The Caregiver’s Book: Caring for Another, Caring for Yourself** by James Miller, counselor and well-known author on the subjects of grief and hospice care. 80 pages. $14.95. Contains eight basic ideas on being a healthy caregiver, combined with inspiring quotations and beautiful artwork.

**The Grit and Grace of Being a Caregiver: Maintaining Your Balance as You Care for Others** is the DVD version of this book, offered at $24.95. The DVD is 36 minutes long and sets out clear definitions of the caregiver’s role. Both are available at www.willowgreen.com.

**Gifts of Caregiving** by Connie Goodman. Thirty-five famous and ordinary people share the gifts they have received as caregivers and show how care-giving deepens the life of the caregiver. Available at www.compassionbooks.com.
Helpful Hospice Hints
Self-Care for the Caregiver

Why it is important?
Caregivers are very important to the care of patients with a serious or life-threatening illness. More than 70% of people who die have had care from family caregivers. Caring for a loved one who is seriously ill can be very hard work. You can only do this work if you take time to take care of yourself. Self-care is about meeting your own needs so you feel able to be a good caregiver to your loved one. Providing this care can be very stressful for caregivers. Some helpful suggestions include the following.

Physical Needs
• Remember to take care of your own health.
• Keep your own doctor appointments.
• Schedule time to eat. Have at least 3 healthy but simple meals a day.
• Learn to make meals in advance. Ask friends/family if they could help with making meals.
• Ask how best to provide care to your loved one and prevent injuring yourself.
• Take time to rest, especially if sleeping has become hard for you.
• Avoid/limit the use of tobacco and alcohol as they make it harder to fall or stay asleep.
• Try to get some form of exercise in the day.
• Take time alone. This can include walking, reading, listening to music, baths, praying, gardening, etc.

Communication Needs
• Tell people about your worries. These people may be family, friends, or some of the healthcare providers working with you to help you care for your loved one.

• Be informed! Ask what signs and symptoms to expect from the patient so that you are prepared to deal with them.
• Get organized and set realistic goals for your day. Keep it real and be flexible. Set limits. Ask others to help with whatever you or your loved one needs.
• Always know about the hospice visits and any changes in that schedule.

Emotional/Spiritual Needs
• Keep relationships with family and friends to avoid feeling alone. If is difficult for you to get out, ask people to come to visit. Let people take care of you and allow your loved one to say thank you for all you do.
• Work with your team to provide time to get out of the home to enjoy social activities or attend support groups. When possible, keep doing favorite activities.
• Try to keep things simple.
• Talk about your fears about what is happening to your loved one. Also, talk about any concerns or frustrations you may have.
• Even though you are feeling stressed, tell yourself everyday you are doing a great job.
• Let your hospice/palliative staff know if you are feeling overwhelmed. Your team has ways to help, including nursing assistants and other resources.
• Attend to your spiritual needs by calling or visiting your clergy, church or synagogue.
• Keep your own “special space.” This can be your room, a chair, a table, etc. Someplace that is only yours where you can go to unwind.
• Seek additional professional help if you are feeling scared, helpless, lost, or depressed.
• Breathe and laugh.

You can find other HPNA Patient Teaching Sheets on end-of-life care at www.hpna.org/PatientEducation.asp

Approved by the HPNA Education Committee March 2007
Interview Insights

A-Team volunteer Patty Little has been an Aseracare caregiver for two years, choosing to serve primarily as a companion volunteer. Since coming to Aseracare Patty has worked with one vigil patient and three companion patients. Her companion patients have been with her for varying amounts of time, the longest being one year. In addition Patty was a volunteer to a patient who left hospice care because his health improved so she had to say good-bye for a different reason.

We asked Patty to share some of her experiences and insights on how she has learned to take care of herself while giving to those she knows will soon pass on. Many thanks to Patty for her time and suggestions.

In what way was the experience of having a companion patient pass on difficult for you?

Patty found that saying good-bye to her long-time companion patient of one year was a mixed experience. It was difficult because she had become close to her patient and had truly come to know her and care for her. After her death Patty missed her friend. As Patty put it, “There was a kind of hole” once the patient was gone. Yet it was also a comforting and positive experience because she knew the patient and her family well enough to know that the patient was ready to be released from her pain and declining quality of life and that the family was ready to let go.

What did you do for yourself that was helpful to you in dealing with the loss of your patient?

Patty noted two things she thought were helpful.

Attend the funeral. Patty was invited to the patient’s funeral and welcomed there by the family. Patty felt that attending the funeral helped her with closure and gave her an opportunity to let the family know how she felt about her companion and friend.

Take a break. Partly because of Patty’s own personal schedule, she wasn’t able to take a new patient right away. In hindsight Patty realized that this gave her time to “take a breather” after her patient’s death. Patty thought it helped her to take some time off before starting a relationship with a new hospice patient. It gave her time to reflect and regroup.

What do you do to keep your own life in balance and to prevent volunteer burn out?

Patty noted that she plans and schedules her hospice volunteering as a regular part of her life----and she looks forward to it.

She also said she gives herself permission to miss a visit if she has a vacation or personal or family plans and to not feel bad about it.

BURN OUT? WHAT BURN OUT?

I don’t think any of us will be surprised to hear that Patty has not found “burn out” to be a problem. Why not?

Because, as Patty says, she realizes that when she knows she is really making a difference in a patient’s life, sometimes just by being present with them in their journey, she also realizes she is not just giving, she is getting back “more than she gives!”

To My Hospice Volunteer, Whomever You Are

I love your smiling face and your kind and loving way. When you come to visit me, you brighten up my day. We’ve been together, you and I, for many pleasant hours. I love the way you show you care with cards and even flowers. We sit inside on winter days and you hold my hand and talk. But on sunny summer days, we go outside and take a walk. Whether listening to the birds sing, or praying The Lord’s Prayer, it always brings me peace and calm to know that you are there. Please know you made my day, Friend, every single time you came. And know I truly love you, but I do not know your name. Patty Little

Thanks to Patty for sharing her A-Team experience and beautiful poem, and for reminding us all that indeed, the more we give, the more we receive!!
Monday Night Monthly Meetings

June 7, 2010
7:00 p.m. - 8:00 p.m.

Location: Bloomington office
5001 American Blvd W.

Topic: Compassion Fatigue

Did you know compassion is considered in all the major religious traditions as among the greatest of virtues? In fact, compassion is the key component in altruism. So what happens when it’s missing? What happens to us and our patients when we burnout? Find answers to these questions and learn more about what it truly means to embody the age old compassion principle of “do to others what you would have them do to you.”

Class Objectives:

★ Learn about compassion at end of life.
★ Identify ways caregivers can show compassion to patients at end of life.
★ Identity ways caregivers can show compassion to family and caregivers.

Please RSVP to class by logging onto the PDV meeting invite.

All volunteers are encouraged to come.

Reminder: May Aseracare University. Please complete PH1011 Communicating with the Elderly. Volunteers should have already completed PH1013 Patient's Rights: The Right Thing to Do as of April 30th.
1. go to https://aseracarevolunteers.care2learn.com
2. click the icon box that says "Volunteers! Click Here."
3. login by entering your username and password (this is different from your HVA login information)

Quaint Quips & Funnies... to bring a smile

And finally, here are some humorous helpful hints on taking care of yourself on the home front.

A mouse trap placed on top of your alarm clock will prevent you from rolling over and going back to sleep when you reach to hit the snooze button!

In life you only need two tools: WD40 and duct tape.

If it doesn’t move but should, use the WD40.

If it should not move and does, use the duct tape.