

## Actions reaching at the heart of families

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As care partner and care receiver, your sense of role gains and role losses warrants reflection on "how to negotiate" about the different types of requested care, in order to reduce the pressure on each other and to have time to take care of both of you. It is also important to continue this reflection on "how to ask help and to whom". Afterwards, we suggest you lay out an up-to-date portrait of the needs of the person living with Parkinson's and prepare a planning timeline calendar on the allocation care to be provided in order to make life easier for everyone.

### 1- Ask for help

We invite you to be aware about your responsibilities as a care partner. It is important to take the time to reflect on "how to ask for help" while taking into account the abilities of the people around you and what they have to offer (time, skills, etc.). A family reunion can also help everyone work together. Proper communication (clear messages addressed to the right person) will help avoid some conflicts and promote the well-being of the person living with Parkinson's and also of the care partner and the family.

Taken from: <http://centreavantage.ca/ressources/aidants/aidant-au-quotidien/rerelations-familiales/#> (French version only)

You can also consult: <https://www.parkinson.ca/about-parkinsons/care-partnering/> (page 17)

### 2- To have a clear picture of the care to be provided by the care partner and other people

With an "up-to-date" portrait of the needs of the person living with Parkinson's, you can ask yourselves what care should be provided by the care partner, what care can be delegated and to whom. By completing the following tables, divided into five categories of care, you will have an up-to-date portrait to target the needs of the person living with Parkinson, which needs can be assumed by the care partner or other family members or other external resources.

Description of the needs to be met	Needs to be addressed (check the appropriate boxes and specify if necessary)	Time required to meet each need of the care receiver	Sharing of care (write the names in the last 2 columns)		
			Care partner	Family, friends and neighbors	External Resources
<b>1. SUPPORT FOR AUTONOMY</b>					
Get out of bed					
Get in bed					
Get dressed and undressed					
Feeding at mealtime					
Mobility and transferts					
Supervision of medication intake					
Others :					

Table based on: Guide du Saguenay/FADOQ on L'APPUI's website inspired by the Guide d'accompagnement à l'intention du proche aidant/Conseil des aînés et des retraités de la MRC Appalaches (January 2011)

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<b>2. HYGIENE CARE</b>					
Take bath or shower					
Washing hair, comb and style					
Shaving					
Brush teeth or dentures					
Nail care					
Others :					

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<b>3. HOME LIFE</b>					
Housekeeping					
Clothing care					
Groceries					
Shopping					
Meals					
Spring cleaning Outdoors work					
Others :					

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<b>4. MANAGING DAY-TO-DAY BUSINESS</b>					
Payment of bills					
Forms to fill out (income tax return, service requests, etc.)					
Administration of properties and assets					
Others :					

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<b>5. RESOURCE AND SERVICE MANAGEMENT</b>					
Seeking information and support					
Planning and coordination of services					
Booking of appointments					
Monitoring of rehabilitation activities					
Managing of unforeseen events					
Others :					

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### 3- Planning calendar of care management and other services

After you have considered the distribution of requested care provided by family members, friends, neighbours and external services, we invite you to draw up a personalized calendar to meet the needs of the person living with the illness. Here is an example.

Situation: **Mr. Steven** has moderate Parkinson's and lives alone in an apartment.

Support: His son **Samuel** lives nearby, and his daughter **Julia** lives further away. Mr. Steven can also count on his friend, his doctor and healthcare team, the pharmacist and the community local service centre (CLSC) for helping with bathing, cleaning and laundry, meals on wheels. View a schedule model below.

EXAMPLE Hours	MONDAY 16 november	TUESDAY 17 november	WEDNESDAY 18 november	THURSDAY 19 november	FRIDAY 20 november	SATURDAY 21 november	SUNDAY 22 november
7:30-11:30	Lise/Meals on wheels Food delivery	Jack/CLSC Help/Bathing 10:30 AM	Fred/Laundry & housekeeping 10:00 AM	Julia/Daughter Book medical appointment for dad	Pharmacy/Dispill delivery		Julia/Daughter Zoom 11:00 AM
11:30 AM-1:PM							
1:00-5:00 PM	Samuel/Son With dad for medical visit 2:00 PM		Julia/Daughter Phone meeting with dad 4:00 PM		Jack/CLSC Help/Bathing 1:00 PM	Mary/Friend Visit	
5:00-9:00 PM				Samuel et son fils/Visite			
Night (in case of emergency) Phone #	Julia/Daughter Phone #	Samuel/Son Phone #	Julia Phone #	Julia Phone #	Samuel Phone #	Julia Phone #	Julia Phone #

We invite you to fill out and personalize your planning calendar of care management on the following template.

## Calendar of care management and other services

Breakdown of hours	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>Night (in case of emergency) Phone #</b>							