

from the field of gerontological social work practice

## "BEST PRACTICES" MEETS THE REAL WORLD

Our September issue *Does Home Care Need an "Eden Alternative"?* discussed the challenges of personalizing care and building sustaining relationships between home health aides and the older adults they serve. An Op-Ed piece by Elise Feuerstein Karras set forth the many advantages of a case manager's participation in the first meeting between client and aide. As always we invited the reactions of our readers. We are pleased to print the following...

As usual, a very thoughtful piece on a most delicate and difficult provision of service. I do not disagree with what Elise is saying: these are issues which are critical, especially the fact that most of the aides are doing this very difficult job with little training in understanding the dynamics of illness, etc. Also is the issue of low wages and career steps and acknowledging that those doing this work are heroic in many many instances. Her suggestions are apt and needed.

What struck me was that all of the references to the elderly were female. We need to remember that there are many men in need of home care services, and that the issues for men while similar to women, have differences and require even greater sensitivity. Also, there are very few men doing home care work. (I had a man caring for my husband, which made him more comfortable.) I would like to hope that there are men willing to undertake this type of work, and that recruiting could be undertaken by some care services.

Until the funders acknowledge the importance of home care services and the acute training needs and vastly expand those good programs that do exist, we will continue to have ugly reports and sad examples which are all too familiar to us and are reported in the newspapers -- to everyone's distress and aggravation.

Helen R. Hamlin, MSSW, LMSW  
Main Representative to the United Nations,  
International Federation on Ageing

Thanks for your newsletter. While it certainly sounds ideal - promoting the bond between the worker and attendant or aide - it is beyond the parameters of the Community Agency to put into place. The Home Care agency has to administer the issues with worker and client and it would be quite difficult for a Community Social Worker to plan to be at the start of a client's home services - when the Community Worker has visits to make to initiate such services - and see these clients routinely, while doing ongoing intakes, etc. It places added burden on the Social Worker and is unrealistic. Just as the home care worker is low on totem pole, so is the low paid case manager. The Registered Nurse Supervisor is supposed to meet to go over the "Care Plan" with each new care recipient. (At least this is the case for the Expanded In-Home Services for the Elderly Program). For Medicaid, as you know, the same is to happen with the Registered Nurse Supervisor meeting with both the attendant and the client.

I think some prep work can be done with elders who do not know how to deal with a new figure in their lives. Some need to understand the very things you mention - how to speak to someone, assisting them, etc. Others are instinctively lovely and able to partner. But unless this is a fee-for-service situation, we cannot burden community workers any further.

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Manton Social Worker  
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for an upcoming conference sponsored by The Met Chapter of the New York State Society of Clinical Social Workers and co-sponsored by the Geriatric Mental Health Alliance and Fordham University Graduate School of Social Service

**“The Paradoxes of Aging: Psychotherapy with Older Adults”  
Saturday, April 12, 2008**

**Fordham University, Manhattan Campus**

### **Morning Keynote Speaker:**

Gerontologist and Psychiatrist, **Gene D. Cohen, MD, PhD**, Director of The Center on Aging, Health & Humanities at The George Washington University Medical Center and author of *The Creative Age*.

### **Afternoon Workshops on Common Practice Issues:**

Family Relationships, Addictive Behaviors, Self Development, Palliative Care, Psychotropic Medications

*More information and registration details will be mailed early in the new year.*