



March 2009

Caring Times

The TTN Caring Collaborative Newsletter



The Next Chapter peer group (see "Stories from the Helping Front: Three Experiences").

To get help from the Caring Collaborative, email or call Laura Traynor

laura@thetransitionnetwork.org

(646) 823-6321

We welcome you to this first issue of *Caring Times*.

This newsletter, which will arrive periodically in your email, is meant to encourage a conversation between members of the Caring Collaborative. We want your comments and ideas, suggestions for future topics and your stories about how the Caring Collaborative has helped you. Our aim is to make the Caring Collaborative a valuable part of your life.

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Neighborhood group coordinators Anita Kane and Nora Bleich.

The Caring Collaborative now has over 200 members, with more than 65 of them participating in our four neighborhood groups, which are focused on the Upper West Side, the Upper East Side, Lower Manhattan and Brooklyn. These groups, open to all Caring Collaborative members, meet periodically to discuss health issues and are a way for TTN Caring Collaborative neighbors to get to know each other. If you'd like to join a neighborhood group, email group leaders Anita Kane or Nora Bleich. They will give you the times and locations for the next neighborhood meetings.

Anita Kane kanes@nyc.rr.com

Nora Bleich london28nyc@yahoo.com

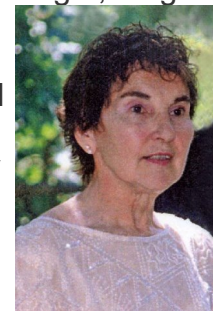
Stories from the Helping Front: Three Experiences

...Three Happy Stories from Caring Collaborative Members

All help from the Caring Collaborative is confidential; however, the people featured here have authorized the use of their names and pictures for this newsletter. We welcome your stories, anonymous or identified, for future issues.

Helga and Phyllis

Helga Shepard (*photo at right*): "I didn't expect to need any help after my colonoscopy. I'm active, I bike, I walk. But the doctor insisted so I thought, 'I'll get my feet wet with the Caring Collaborative' and I phoned Laura. I didn't give her much notice, but she came through for me. It was darn lucky she did! I was woozy coming out of the anesthesia - and very glad to see **Phyllis Haberman**, although we had never met before. Crossing the street, Phyllis said, 'Don't you want to take my arm' and I was so grateful. I'm a very self-sufficient type, but I needed somebody that day!"



Phyllis Haberman: "Laura sent an email - could somebody help

out tomorrow, giving the exact details. Helga and I live near one another and it fit my schedule, so I emailed back, "yes." She emailed me Helga's phone number and I called her. It's a pretty simple thing to do - and I like the feeling of helping someone. Helga is a very nice lady and she appreciated the company. We walked for a bit and were chatting and I thought to myself, 'She could use something to eat,' so we stopped at a local place and then I took her home.

Team Work - Rahla, Kate, Joan and Jennifer help Berte

Berte Schachter (*photo below*) says, "The women in my peer group, Next Chapter, began to talk about the Caring Collaborative from the very beginning. Eight of us live by ourselves and we decided that if anybody in the group ever needed help we would provide it. I was facing knee surgery and when you live alone this creates a whole set of anxieties separate from health issues. But having my group and my neighbors there for me made a big difference to my state of mind. When I scheduled the knee replacement I emailed: 'This is when I am coming home from the hospital, this is what I might need. When do you think you could help me?' **Rahla Gold** was just tremendous. She took me several times to PT and brought me a salad one day. **Kate Fisher** came a number of times after work, asking, 'What do you need?' and made me a bagel. **Joan Menschenfreund** took me to PT and offered, 'I'll come clean your cat box.' **Jennifer Rushton** came shopping with me. And everybody kept in touch - I'd gotten myself a new Blackberry and there was a lot of back and forth. Knowing that I had this supportive system helped me recuperate. If you have a really bad day, if something happens, you can call somebody." All the team are Caring Collaborative members and they kept track of hours and types of service given, which Rahla reported to Laura for the Time Bank.



Frieda and Claire - This time Frieda helps Claire

Frieda Marshall and **Claire Harmon** (*from right to left, below*) had another exchange of service - only this time Frieda helped Claire! Those of you who attended the Caring Collaborative orientation last fall will remember hearing Frieda talk about how Claire had helped her - and how they became friends. Now listen to Claire: "My second experience with Frieda made a big difference for me. I had a basal cell carcinoma that had to be removed from my forehead. It was a tiny spot and I told Frieda that I would surely be okay to get home alone. Frieda wouldn't hear of it. She insisted on coming for me and taking me home. My tiny spot ended up being a two-inch scar and the plastic surgeon had to go in three times to make sure everything was out. After she stitched me up, I called Frieda on her cell and she quickly came to pick me up in a cab because it was raining. I admitted that her help made me feel secure. After I went upstairs I immediately put an ice pack on my head but I called Frieda later to say that I was fine and to say 'thank you.'"



What If? Two Ways to Handle Emergencies

Deb Harkins relates the discussion about health emergencies that occurred in her peer group, Second Act. **Ellen Wright** forcefully raised the issue of What If? (What if you broke your hip and were lying on the floor and couldn't reach a phone? Who would think to check on you?) Because of a sobering incident in her building when a young girl died alone in her apartment, Ellen exchanged keys with three friends. They have a check-in plan: They email each other before a certain hour every morning. If there's no response, they phone. If there's no answer they have a key or the name of a relative to call.

At the Second Act peer group the focus is on middle-of-the-night distress calls. Deb notes, "We are compiling people's vital medical and crisis contact information so we will be ready for that unforeseen hazy call from the emergency room. Not everybody wants to participate. For those who do, the info is meant to give the Second Acter who gets a distress call the information she'll need to be helpful: Call relatives, call doctors, call her Health Care Proxy, give the hospital doctor a list of the medications she's taking, bring her clothes from the apartment, etc. In the three years we've been meeting, we've become a family of sorts and so we're creating an emergency caring circle within our peer group."

The Caring Collaborative congratulates Second Act and encourages all peer group members to consider how they could help each other in emergency situations.

Answer Woman: Questions You've Asked

Answer Woman welcomes your questions. Please send them to the editors, Jane or Lynn, listed on the title page.

Can service performed within a peer group dovetail with the Caring Collaborative?

Absolutely! We encourage peer group members to join the Caring Collaborative. It's free! And it's simple. As a CC member you can benefit from the extensive services available, including the ability to talk with CC members who've experienced a variety of medical conditions. You can still express a preference for peer group members to help you, or make side arrangements within your peer group, But, it's important that you inform the Time Bank Manager, Laura, of the hours given and received so we can track the success of the services we're offering.

Who has access to the information I've provided about medical conditions I've experienced?

Only the Project Manager, Laura Traynor, has access to this information. For instance, when a member who has recently been diagnosed with breast cancer calls Laura for a referral to a member who has experienced this condition, Laura will contact the member and ask her to contact the woman with the new diagnosis. This sharing of information will only be done with the clear expectation of confidentiality on both sides.

My doctor appointment may last several hours and I'm usually kept waiting. Is it appropriate for me to ask for a CC member to accompany me and help me take notes?

Yes, that's what our members are here for.

Why are we required to report services given and received to the Time Bank manager?

This is a pilot project under a foundation grant. We need to be accountable and document the extent to which our services are being used. This will help as we move to the next step in exploring ways our Caring Collaborative approach can be used in other settings and institutions.

What if I have chest pains at 2:00 a.m.? Can I call the CC for someone to take me to the emergency room?

No, the CC is not a 24-hour service. Calls to the project manager will be returned within 24 hours, but lead time is required to coordinate services. Please give as much lead time as possible.

How can the Caring Collaborative help in emergencies?

Some CC members are forming "buddy" groups of two to four members who are ready to help each other in emergencies. We encourage members of our neighborhood groups and TTN peer groups to discuss this approach.

We're in the News



The media is paying attention to our pioneering work. Recently we were featured in the *Wall Street Journal* and on Jane Gross's highly popular *New York Times* blog, "The New Old Age." We're scheduled for coverage on ABC-TV's *World News Tonight* in the near future and have been featured in the professional journal, *Nursing Spectrum*.

Charlotte Frank, Project Director: The spark behind the Caring Collaborative.

Speaking with . . . Laura Traynor

Laura is our "go-to" person at the Caring Collaborative -- our Project Manager/Timebank Manager, whom you email or phone when you need help. And we couldn't be in better hands. With more than 15 years of experience in health

care policy and innovation, Laura is a perfect fit for us. Her work spearheading new approaches to community partnerships that promote accessible, quality services for older people is particularly relevant. On top of her impressive professional credentials she's warm, caring, inquisitive and a keen listener - attributes that are essential for Laura's pivotal role in matching volunteers with members who request services.

It may seem unusual for a young woman (Laura is 46) to be interested in the health concerns of older women, but she's clearly in the forefront of one of the most vital issues of our time. As Laura sees it, "I redirected my own career path toward aging issues because I see the opportunities ahead. As the Caring Collaborative illustrates, new products and services will be needed for "baby boomers," the first generation that expects to live into their 80s and 90s." She cites Marc Freedman at Civic Ventures who notes that we've been good at extending life, giving people extra time, with little thought to what they will do with that extra time.



Perhaps Laura's interest in health issues dates from a diagnosis of Hodgkins disease, cancer of the lymphoma, that she received when she was only 26. At the time, her doctor said she was "lucky" because Hodgkins was one of the few cancers for which doctors had developed successful protocols. Laura says, "This was my first taste of how difficult it is to navigate the health care system. At that time it was somewhat cold and it's only gotten worse." After many years in remission, Laura is still vigilant about getting the battery of medical tests that monitor the situation. "Health care is as personal as it gets," she states, with the clear voice of experience.

Just before coming to the Caring Collaborative, Laura worked at the Brookdale Center for Healthy Aging and Longevity, a division of Hunter College, where she pioneered partnerships that make quality health services available to older people. Laura was involved with strategic planning for four Brookdale units - research, the law institute, certificate education and the training institute. This experience is particularly valuable for the Caring Collaborative as we look at our next steps in developing our services and reaching out to other organizations that may benefit from our experience.

Laura's interest in aging is manifest in her varied activities in the field. She leads a multidisciplinary group called AgeForce that brings together professionals in policy, research, technology, marketing and nursing to seek fresh approaches to workforce issues.

Laura is also involved with a Website for boomers called ImagineAge. She calls it a "sort of Facebook but with more practical tools." Laura's graduate work looked at the social capital that resides in communities, with a specific interest in women entering retirement. Her Master's thesis (State University of New York) is titled Advancing the Status of Women in Society; The Role of Baby Boomer Women.

It's not all-work-and-no-play for Laura. She lives in the idyllic New York suburb of North Salem with her husband, Keith, and their two daughters, Catherine, 14 and Caroline 11. In her rare off hours she likes winter sports, hiking, swimming-- and kickboxing.

Avoid family burnout - call the Caring Collaborative!

TTN Caring Collaborative
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