Whether you live along the eastern or southern coasts of the United States, along the Gulf or whether you’re hundreds of miles away and witnessing nature’s fury from a safe distance, there are lessons all of us need to learn about what to do when Mother Nature gets her ire up. There are basic realities of preparation and storm weathering to master that are involved enough when it’s just your immediate family that’s being protected. But when you’re a caregiver and responsible for someone who can’t otherwise help him or herself, the ante’s up considerably, if not in physical labor, then certainly in emotional toil and psychological angst.

Much of the time, those for whom we are caregivers live in our home, and so the physical act of preparing for a storm’s onslaught is not noticeably different than if that person were not present; however, it’s the intangibles that add to the stress. The worry and anxiety of how to help someone who can’t help themselves and of how to transport a disabled person to a shelter or into a car for evacuation should that become necessary can be overwhelming. But since knowledge is power, let this article serve as a tick list to help you check off the things that must be done to ensure your safety and the safety of those you love.

There are certain decisions that must be made ahead of time. Possibly the most critical is whether or not you will choose to stay in your home or evacuate, should the decision be optional. If you choose to stay, it is critical that you have everything on hand that you could possibly need. Also, you must determine the safest place in your home and have a plan in place so that each person will know where to go and what to do when the time comes. Windows and doors must be protected, loose objects like boats and outdoor furniture must be secured or stored and a plan must be in place for your pet. If you decide that leaving is in your best interest, you must make certain that your car is filled with gas, that someone else knows your evacuation plans and route and that all needed supplies are in a central location in place for your pet. If you decide that leaving is in your best interest, you must make certain that your car is filled with gas, that someone else knows your evacuation plans and route and that all needed supplies are in a central location for easy access.

Let’s face it; if you live in a hurricane-prone area, chances are that you will, at the very minimum, face the real threat of a hurricane at least once during the season. Since the best time to plan for an emergency is when there isn’t one, take time on a beautiful, sunny Saturday to gather most of the supplies you’ll need should a hurricane be imminent. Know, of course, that being prepared in advance requires vigilance. You’ll need to check the contents of your various kits when their use seems at hand to ensure that nothing has expired or gone bad. And it goes without saying that there are some things you simply can’t do until the last moment, so use those precious minutes just before the storm’s onslaught is not noticeably different than if that person were not present; however, it’s the intangibles that add to the stress. The worry and anxiety of how to help someone who can’t help themselves and of how to transport a disabled person to a shelter or into a car for evacuation should that become necessary can be overwhelming. But since knowledge is power, let this article serve as a tick list to help you check off the things that must be done to ensure your safety and the safety of those you love.

1. Make sure you’ve got a well-assembled first aid kit. it should include sterile adhesive bandages in assorted sizes, boxes of two- and four-inch sterile gauze pads, hypoallergenic adhesive tape, triangular bandages, several rolls of two- and three-inch sterile roller bandages, scissors, tweezers, needles, moistened towelettes, antiseptic, a thermometer, tongue blades, petroleum jelly or other lubricant, assorted sizes of safety pins, a cleansing agent or soap, latex gloves and sunscreen. In addition, the kit should include the following non-prescription drugs: aspirin or non-aspirin pain reliever, anti-diarrhea medication, an antacid, syrup of ipecac (so that vomiting can be induced if the Poison Control Center so advises), a laxative, activated charcoal (again, for use as indicated by the Poison Control Center), hemmorhoid medication, cough/cold/allergy medication, denture supplies (if applicable) and sanitary/incontinent supplies. Be sure that medicines for all the various age groups in your family are included so that everyone from children to senior adults will be protected.

2. A hurricane suitcase should be assembled with enough contents for each person in the family. A suitcase or large plastic tub should be packed with cash (even though its inclusion will be probably be a last-minute addition), a first aid kit like the one mentioned above, a flashlight & batteries, a battery-operated radio & batteries, a personal list of medications for each person, large towels & washcloths, blankets & pillows, paper towels, a change of clothes, sturdy shoes (closed toe/heel), socks, a manual can opener, large and small trash bags & ties, a plastic bucket with a lid, bar soap, liquid detergent, a toothpaste and toothbrush, toilet paper, tissues, disinfectant, rubber gloves, insect repellent, sun block, protective clothing/hat, wet wipes, cards, board games, toys and books.

3. Non-perishable food should be assembled and should include crackers, jelly, nuts, canned vegetables, canned juice, canned fruit, powdered milk, bread, peanut butter, honey, canned & fully cooked meats, protein snacks, dried fruits and other non-perishable foods.

This program is supported by Senior Resources – Agency on Aging with Title III funds made available under the Older American’s Act.
A minimum three-day supply of water per person and/or pet should be purchased. Each person will require one
gallon of water per day, and each pet will require one quart of water per day. Additionally, kerosene, gasoline,
wood, pet food, pet medications, charcoal and matches should be gathered into one central location. If you have
a charcoal grill, it might come in handy for cooking if the electricity is out during or after the storm.

Develop a plan for your pet. If you’re leaving and taking the pet, make sure you have a pet carrier. If you’ll be
flying, be aware that only certain pet carriers are airline-approved. Also be aware that hurricane shelters do not
accept pets.

Put together a list of relevant phone numbers and put this in your hurricane suitcase. As a caregiver, know how
important it is to have a central location where important information and medication concerning the person for
whom you are caring is kept. This will be helpful to you not only in times of stress but will be extremely helpful should
others have to step in and help out.

The following things really can’t be done ahead of time, so use this list as a reminder of last-minute musts. Some of these
tasks can be done during the hurricane watch, the 36-hour designated timeframe before a hurricane is due to hit. Some
can’t be done until the warning period, the 24-hour designated timeframe before the hurricane is due to hit.

**During the Watch Period:**
- Obtain cash or travelers checks. Withdraw as much money as you’re comfortable carrying since it’s possible that,
  should the hurricane hit, ATMs won’t be working. Additionally, merchants may not be able to authorize credit card
  usage if the electricity isn’t working, and personal checks may not be accepted.
- Make sure your car has a full tank of gas and that oil/tire pressure has been checked. Be aware that in emergency
  situations like these, gas stations sometimes run out of gas and there can be long lines. Time yourself accordingly.
- Store all outside furniture and items that could be picked up by the wind. If you have a boat, make sure it is secured.
- Fasten all doors and windows, protecting them with hurricane shutters or plywood if possible.
- Gather important paperwork like wills, deeds, birth and marriage certificates, social security cards and insurance
  policies and place them inside a waterproof container that should be put inside your hurricane suitcase.
- If you’ll be leaving your home and going to a hotel, make sure you have a reservation as well as a reservation
  number. Know the best and safest route to take. A hotel can be a good solution for many who are caregivers since
  those for whom you are caring may be inconvenienced in such crowded surroundings where beds are
  simply sleeping bags or mattresses on the floor. Regardless of where you plan to stay, make sure that someone else
  knows where you will be.

**During the Warning Period:**
- Put all prescription medications and their instructions in the first aid kit. Make sure they are readily accessible.
- Lower blinds and close curtains and shutters. This will protect you if the wind blows in.
- Move important items away from the windows.
- Fill up the bathtubs with water.
- Fill any spaces in the freezer and refrigerator with milk jugs full of frozen water.
- Turn up the refrigerator to maximum cold, opening it only if necessary.
- If the power goes out, turn off appliances and lights so that the system is not overburdened when it comes back on.
- If you’re leaving, post the phone number and address of your destination prominently on an interior wall. Let
  neighbors and friends know where you are going.
- Leave your car radio on, tuned to a local station for news and updates.

All by themselves, hurricanes are a formidable force of nature. Coupled with the complexities of caregiving, weathering
them becomes an unenviable feat, though one navigated by multitudes of people each year. In the midst of the storm,
though, it is wise to remember the rainbow, for storms do pass.

There’s an old Irish blessing we can all take to heart: “May God give you...for every storm a rainbow, for every tear a
smile, for every care a promise and a blessing in each trial. For every problem life sends, a faithful friend to share, for
every sigh a sweet song and an answer for each prayer.”

**Storms: Learn the Facts**
- A hurricane is a tropical cyclone with wind strengths that exceed 74 miles per hour and circulate counter-clockwise.
  While they are formed from simple complexes of thunderstorms, the water in which they are located must be at least
  81 degrees. It is the heat and moisture from the warm water that creates the energy of a hurricane, and without this,
  the hurricane will not survive.
- A series of thunderstorms in very warm water that reach a strength of 23-39 miles per hour is called a tropical
  depression, the first stage in the life cycle of a hurricane. A hurricane can live for two to three weeks.
- When sustained winds have reached a strength of 39-73 miles per hour, the tropical depression becomes a tropical
  storm. It can take from a half day to a couple of days to grow to this stage.
- A tropical storm becomes a hurricane when winds reach a sustained level of 74 miles per hour and there is a
  pronounced rotation around the central core.
- The dark spot in the middle of the hurricane is called the eye. The eye is the focus of the hurricane and the point
  around which the rest of the storm rotates.
- Surrounding the eye is the eye wall, the area of most intense rain and wind. Large bands of clouds and precipitation
  spiraling from the eye wall are called spiral rain bands.

The Saffir-Simpson Scale is used to categorize the strength of hurricanes.
A category one hurricane exhibits winds ranging from 74 to 95 miles per hour. These storms produce minimal damage. Power lines can come down, flooding can occur, and a four to six foot storm surge often accompanies the storm.

A category two hurricane exhibits winds ranging from 96 to 110 miles per hour. Inflicting moderate damage, these storms produce flooding and can bring tree branches down. A six to eight foot storm surge can accompany the storm.

A category three hurricane exhibits winds ranging from 111 to 130 miles per hour. Extensive damage occurs with minor damage to buildings. Flooding can wash away smaller structures on the coast and can occur up to eight miles inland. The accompanying storm surge is nine to twelve feet.

A category four hurricane has winds ranging from 131 to 155 miles per hour. Extremely dangerous, almost all doors and windows are destroyed in a storm of this magnitude. There is sometimes wall and roof failure. Lower floors of oceanfront buildings sustain major damage. Evacuations are ordered as far as six miles inland. Storm surges range from 13 to 18 feet.

A category five hurricane has winds that exceed 155 miles per hour. Inflicting catastrophic damage, buildings, roofs and structures are destroyed. Flooding occurs up to ten miles inland and the area is evacuated. Storm surges exceed 18 feet.

**10 Days or 14? Understanding COVID-19 Quarantine Guidelines**

CDC revises isolation rules based on mounting data about contagiousness of coronavirus

By: Rachel Nania, AARP


If you’ve tested positive for COVID-19, you no longer need a follow-up test that comes back negative to let you know it’s OK to be around other people again. A 10-day isolation period that starts at the onset of symptoms is sufficient, as long as your symptoms are improving and you are fever-free for at least 24 hours at the end of the 10-day stretch, new recommendations from the Centers for Disease Control and Prevention (CDC) detail.

The change in guidelines comes after a number of new studies show that most people are free of the virus and are no longer contagious 10 days after symptoms develop. Individuals who never experience symptoms of COVID-19 (asymptomatics), but who test positive for the virus, are also advised by the CDC to self-isolate for 10 days after taking a coronavirus test.

**Changes discourage needless testing**

Health experts are applauding the new CDC recommendations. In particular, the latest guidelines help to conserve testing materials and ease a testing backlog that has been building as new coronavirus cases continue to surge in the U.S.

For the last several months, health care providers have been testing some COVID-19 patients multiple times to ensure they are no longer contagious. This practice has become “a draw on resources,” especially among patients who test positive for the virus weeks after their symptoms disappear, says Michelle Doll, an associate hospital epidemiologist and an assistant professor of infectious disease at VCU School of Medicine in Richmond, Virginia.

According to new research, all of those persistent positive tests were likely a result of “leftover virus fragments,” and not an indication that the virus was still present and transmissible, explains William Schaffner, a professor of preventive medicine and infectious diseases at the Vanderbilt University Medical Center in Nashville.

“These are, if you will, dead soldiers. So there’s no point in doing all these follow-up tests anymore, because they just provide potentially confusing results,” Schaffner says. Having a more standard, science-based recommendation on when patients can rejoin others in their household means “you can get people off isolation more promptly,” he adds.

**Exceptions to the 10-day rule**

There are a few exceptions to the CDC’s new recommendations — the first being for people who have a weakened immune system due to a health condition or medication. Doll says the virus is “a little bit more unpredictable” in immunocompromised patients, and that “they can shed virus for longer periods of time.” The CDC says immunocompromised individuals may need to stay home and away from others for more than 10 days, but that they should talk to their health care provider for additional guidance.

Also: People who have been exposed to somebody with COVID-19 face a longer self-isolation period than people who test positive for the virus. The CDC says anyone who has close contact with someone who has COVID-19 should quarantine at home for 14 days after exposure.

“The reason for that is because there is a little bit less predictability in terms of the incubation period for this virus and when you might get sick if you were exposed to somebody,” Doll says. The extra four days help to account for the time it takes for symptoms to develop, or if they never develop, for the virus to run its course.

**Symptoms may persist long after infection**

Just because you are no longer contagious doesn’t mean you will be completely without symptoms. Studies show that recovery time for COVID-19 can last longer than the virus.

A new report from the CDC, for example, found that 35 percent of symptomatic adults who tested positive for COVID-19 but who were not hospitalized for the illness had not returned to their usual state of health 14 to 21 days after testing. Even young, healthy adults struggle to recover quickly from an infection. Nearly 1 in 5 surveyed adults 18 to 34 years old with no chronic medical conditions had not returned to their usual state of health 14 to 21 days after testing positive.

The key to coming off isolation is to make sure your symptoms are improving. If they do not, touch base with your doctor. Warning signs that require immediate medical attention include trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake and bluish lips or face.

Finally: If you experience a symptom of COVID-19, such as fever or fatigue, but do not get tested to confirm a coronavirus infection, it’s still a good idea to stay away from other people for 10 days just to be safe, Schaffner says.
Latest SCAM Circulating – “Message from ACL Agent”
One of ACL’s Regional Administrators received a call from a Pastor of a church in Southern CA whose members had received a call from a “supposed ACL Agent” and/or received a message via FB. The Pastor was contacting ACL to make us aware and identify if it was legit. Here is what the Pastor shared: His congregation had been targeted with calls from the “Federal Government” telling them that if they were a caregiver, a new COVID Program for Caregiver support would give them $25,000 in exchange for a $500 retainer fee. They didn’t have the $500 so called the church to see if they could borrow it and pay it back when their grant came through. ACL has no such program and no such “agents.”

CAREGIVERS SUPPORT GROUP
[You Are NOT Alone!]

2020 Schedule

All support groups have been postponed until further notice.

If you have any questions please speak with Robin at 860-887-3561 ext. 124

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When:
Mondays: 10am, Tuesdays: 3pm, Wednesdays: 10am, & Fridays: 2pm
*Starting Wednesday, March 18, these will be offered on a week-by-week basis.

To join Hartford HealthCare’s Virtual Meeting Room,
Call: 860.972.6338. Access code: 19623#.

Facilitated by:
Hartford HealthCare Center for Healthy Aging’s
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For more information, please call 877.424.4641. No RSVP needed.
We hope you find the August edition of our Caregiver newsletter informative.

Senior Resources currently produces a monthly caregiver newsletter. We are looking for feedback on any ideas you may have for future editions.

Please contact Robin Brewer with any ideas/suggestions or if you wish to be removed from our mailing list.

Robin Brewer: RBrewer@seniorresourcesec.org or 860 887-3561 x 124.

To read previous editions of this newsletter please visit: www.SeniorResourcesEC.org/stay-informed/caregiver-newsletter