

ALZHEIMER'S FREE DIGEST

INSPIRE. ACKNOWLEDGE. INFORM

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Volume 1 | Edition 1

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Looking back, it's almost as if one day I was happy and living the life I'd chosen and the next my brother and I were my mother's permanent care giver.

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PROVIDING CARE FOR A LOVED ONE

What would you do if you were suddenly faced with a care giving challenge? A number of us are finding ourselves in this situation, including me. Helping a friend or loved one navigate life and health care can be complicated and frustrating.

FEATURE 4

FROM THE PUBLISHER



OVER TIME, I HAD GONE FROM JUST BEING THAT PESKY SON THAT LOVED HIS MOTHER AND AUNT TO BECOMING A FULL-TIME CAREGIVER, TRYING TO PROTECT HIS MOTHER FROM HURTING HERSELF OR ANYONE ELSE.

LOOKING BACK, IT'S

almost as if one day I was happy and living the life I'd chosen and the next my brother and I were my mother's permanent care giver.

Of course, there was more to it than that, it started off with, of course checking on her and my aunt daily by calls and visits. Surprising them with dinner, a few times a week, then progressed to being a nightmare after I realized what was really happening.

Yes, I was in denial!

Over time, I had gone from just being that pesky son that loved his mother and aunt to becoming a full-time care giver, trying to protect his mother from hurting herself or anyone else.

My whole world was in a whirlwind, my Aunt died and I found her body at her home on the floor, my mom was now in a memory care facility and I couldn't tell her that her sister had died.

I was dealing with great emotions and crucial deci-

There's more to care giving than meets the eye

by BUTCH GRIMES

sions.

Most days, I could hardly remember what day it was, it was so much going on.

Much of the time, for those who become care givers to a loved one with a disease such as Alzheimer's/Dementia, it isn't something planned out or prepared for.

Each moment is eventful and changes by the moment.

It all happened so quickly that I never stopped to think about my own well-being or the feelings of sadness, even anger I was experiencing from losing Momma and my aunt all at the same time.

Natural causes took my aunt and Alzheimer's/Dementia was taking my mother, slowly right before my eyes.

Some days I felt very confused but continued to run into the fire and never stopped.

My family has always been very close, I was always close to my parents, grandparents, aunt, and brother. Being the oldest and working very closely with my brother, I was the point person to watch over the family.

But it never crossed my mind that Momma would begin showing early stages of dementia in her 70's and become totally incapacitated by her mid-70's.

Fortunately, being self employed, has provided me the opportunity to give even more focus and attention to her needs.

Of course, we are never ready for all of this financially and especially mentally, but with good planning, It definitely has taken the edge off.

There were times, I neglected my mental health, my golf game went out the window, no fish in the freezer from my fishing trips, my frequent flyer miles were expiring.

I realized I was neglecting myself and was dealing with the enormous amounts of stress in unhealthy ways, such as staying up late, cooking & eating more at night, less sleep, in addition to all that running around to my mother's doctor's appointments, I missed a few of my own.

By the time, I made it to my doctor, I had gained additional pounds that affected my *boyish figure* and my blood pressure was much higher than normal.

Some Statistics for you

According to the National Alliance for Care giving and Evercare, 23% of family care givers caring for loved ones for 5 or more years report their health is in fair or poor condition. 47% of working care givers indicate an increase in care giving expenses has

caused them to use up all or most of their savings which in turn leads to additional stress and possible health issues.

Further, stress induced anxiety and/or depression disorders are among the most commonly diagnosed mental illnesses found in those caring for a loved one with Alzheimer's or dementia.

Things to Keep in Mind

- Keep it positive, positive thought is the best weapon for a calm mind
- Take a break and make time off for yourself to exercise or read a book, play golf, fish, ride your bike, go hike. Have more sex!
- Communicate with family and friends, or if that's not enough, try joining care giver support groups
- Take care of your own physical health as well and schedule regular medical check-ups
- Ask for help, you can't do everything by yourself
- Remember to laugh, there is no medicine that could be prescribed that's better for a healthy mental well-being

There's a good reason care givers of loved ones with Alzheimer's/Dementia have often been referred to as the second patient and if we don't look after ourselves then who will? Every day, I kept asking myself, *whosgonnatakecareofme*.

My doctor appointments were a huge eye opener and turning point for me.

From that moment forward, I started taking breaks, making it to the golf driving range, running, and then started spending more time with my close friends talking and sorting through all the emotional baggage and crap that I'd stuffed away for the last few months.

It wasn't a quick process but slowly things started to turn around and as I started to feel more balanced.

I began to feel as though I had more control over my life, which eventually led to feeling like *me* again.

Hence, creating www.whosgonnatakecareofme.com & advocating daily in my new Video studio for Alzheimer's/Dementia with the goal to help others deal with this dreadful disease.

Take time for yourself, you are no good to anyone if you are down and out!

Don't forget, Alzheimer's can surprise you.

ALZHEIMER'S DIGEST

FREE

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FINANCE

The hidden costs of Alzheimer's

ALZHEIMER'S DISEASE IS stealing the memories and quality of life of nearly 6 million people in the United States. But that's not all it's taking.

The financial toll of Alzheimer's and other forms of dementia is crippling. Sadly, very few families are prepared for the cost of care, or realize how little of that cost is covered by insurance.

Today, Alzheimer's and other forms of dementia take \$1 of every \$5 in Medicaid funds to provide care for persons living with dementia. Since Alzheimer's is the only major disease without a prevention, treatment or cure, and our country's population is aging, those numbers will only get worse. If no cure is found by 2050, it is estimated that \$1 of every \$3 in Medicaid funds will go toward dementia care.

We are not prepared for retirement – or Alzheimer's

But what about the financial impact on individuals and their families? Edward Jones Financial Advisor Connor Visser believes the vast majority of people are already unprepared for the cost of a healthy retirement. For those affected by dementia, the impact could be devastating.

Visser, who manages Edward Jones' Superior, Colorado, branch, says that the cost of just one year's care in a nursing home – estimated by the Department of Health & Human Services at \$85,775 for a semi-private room

(\$97,455 for a private room) – already tops the \$84,821 the average adult has saved for retirement*.

"The average nursing home stay is 2½ years, according to Health & Human Services statistics," Visser said, "but it's not uncommon for people to live in nursing homes for 5 to 10 years."

That would mean the typical family with a loved one in a nursing home is looking at roughly \$200,000 to \$250,000 in nursing home charges, although those costs could approach \$1 million in some cases.

Visser cited statistics from the Center for Retirement Research at Boston College which show nearly 40 percent of people over age 65 will require nursing home care.

Other care options also carry a hefty price tag

While many families opt for in-home care for their loved ones living with dementia, those costs can still be sizable, especially when considering that after diagnosis, people with dementia can survive as long as 20 years, although 4 to 8 years is more common.

The cost just for assisted living, which is a less intensive form of care, averages \$45,000 per year, according to the Genworth 2017 Cost of Care Survey.

In-home healthcare average \$49,000 per person per year.

"It's important to recognize that the Genworth study focuses on 'basic costs' of care," noted Danelle Hubbard, director of Family Services for the Colorado

Chapter of the Alzheimer's Association.

"The reality is that anyone living with Alzheimer's who is in memory care will not be covered under the basic service rates, and the cost could well be double."

Medicare isn't the answer

"If people haven't saved enough for retirement, they probably haven't saved enough for long-term care," added Visser.

And Visser has seen too many people surprised to learn that Medicare, which is the prime source of healthcare for people ages 65 and over, is not the solution for long-term care, such as nursing homes, assisted-living facilities and adult daycare.

"Medicare typically covers up to 100 days of short-term care and a portion of costs, and the stay must be related to medical care," he said.

"You must check a lot of boxes for Medicare to cover costs."

Women carry a larger burden

Of the 40 percent of the population over age 65 that will spend time living in a nursing home, the Boston College research data shows that:

- Nearly 75 percent of nursing home residents are women
- Women over 65 require care for an average of 3 years (double that of men)
- 66 percent of long-term care recipients are women (women live longer than men and typically don't have a spousal caregiver)

"A couple's retirement portfolio must care for both people, and the cost of care for one could affect the surviving spouse's ability to live comfortably in retirement," Visser said.

U.S. House Passes Public Health Legislation

WASHINGTON, D.C. — The Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's Act (S. 2076/H.R. 4256), legislation championed by the Alzheimer's Association and the Alzheimer's Impact Movement (AIM) was passed by the U.S. House of Representatives today. Introduced in November 2017, by Representatives Brett Guthrie (R-Ky.), Paul Tonko (D-N.Y.), Chris Smith (R-N.J.) and Maxine Waters (D-Calif.), the legislation will improve the country's response to the growing Alzheimer's public health threat.

"On behalf of the more than 5 million Americans living with the disease and the 16 million more providing unpaid care, we are thankful to the bill's sponsors and the House for passing this important legislation," said Harry Johns, Alzheimer's Association and AIM President and CEO. "Addressing Alzheimer's as a public health issue will increase early detection and diagnosis, reduce risk and prevent avoidable hospitalizations, leading to better health outcomes."



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CARE TAKING



▲ **WORDS OF WISDOM.** Nobody likes to think about the possibility that he or she might someday need to rely on a loved one to communicate his or her wishes and make decisions.

When You're the Caregiver

What to do when faced with a challenge for a loved one

by **DIANA PIERCE**

WHAT WOULD YOU do if you were suddenly faced with a care giving challenge?

A number of us are finding ourselves in this situation, including me.

Helping a friend or loved one navigate life and health care can be complicated and frustrating.

Over the last several months, I've been meeting with members of Blue Cross and Blue Shield of Minnesota and listening as they share their heartfelt stories of what it means to be a caregiver.

My partnership with Blue Cross to share these stories will hopefully provide encouragement and foster understanding for those providing care for their loved ones.

The entire series can be found at Blog.BlueCrossMN.com.

In addition, here are some words of wisdom from the people I spoke with:

- Talk about the tough stuff **BEFORE** the going gets tough. Nobody likes to think about the possibility that he or she might someday need to rely on a loved one to communicate his or her wishes and make decisions.

So ask the difficult questions before it's an issue. Do you have a living will? Who will have the



▲ **DIANA PIERCE**

power of attorney?

Having these issues sorted out can reduce confusion during stressful situations.

- Put it in writing. In my personal experience, having my mother's health care directive gave me a sense of loving clarity and I knew the decisions she would want to make.

I had her directive and power of attorney with me at all times, even for routine doctor appointments.

- Find support. Care giving can start out with small tasks, building over time, or it can happen overnight.

It's important to know you

aren't alone.

Many of the people I interviewed in this series found support groups or counselling to be a great help. MinnesotaHelp.info maintains a list of support groups across the state.

- Get help. Quite often, siblings will split care giving tasks among themselves.

For example, a sibling who lives out of town might feel most useful managing finances while another who lives closer can help run errands.

There are other community resources, too, including the Senior LinkAge Line ((800) 333-2433), Minnesota Board on Aging's free information and assistance service. For more caregiver resources, please visit BlueCrossMN.com/caregiver.

Diana Pierce is a Twin Cities multimedia journalist. She was an anchor for KARE-11 from 1983-2016. In 2018, she launched "What's Next? with Diana Pierce," an online show that helps baby boomers discover new ideas for pursuing their passions and dreams as they approach their "what's next."

— North American Precis Syndicate

CHOOSING THE RIGHT CARE GIVER FOR YOUR LOVED ONES

Important Questions to Ask Your Home Care Agency

- How do you screen your caregivers for safety?
A responsible, credible home care agency in California always conducts a thorough screening and background check of its caregivers before sending them into a client's home. In addition to Home Care Aide (HCA) mandated certification and Department of Justice fingerprinting and background checks, the best home care agencies go further by screening for DMV driving records, drug testing, and abiding by strict minimum-age requirements.

- How do you train your caregivers and verify their skills?

Caregivers should have a solid foundation of training, such as how to use mechanical lifting equipment, basic knowledge of how to support clients living with Alzheimer's or Parkinson's disease, and how to assist with daily living activities such as bathing, grooming and hygiene. Ask if the caregivers are tested on scenario-based skills and if any personality tests are conducted to check for temperament under stress or condition-related situations, such as "sundowning."

- What is your performance record for on-time arrivals and no-shows?

How promptly do you communicate schedule changes to your clients? Ask the agency how it manages late arrivals and last-minute cancellations by caregivers. Does it guarantee a replacement? How does it communicate with clients and how often? What is its policy if there's an ongoing tardiness issue?

- How do you manage caregiver performance?

Ask how the agency motivates caregivers to provide the best care and client experience. Does it value and know its caregivers' track record and does it continually train caregivers to ensure it has the best talent?

For further facts and tips, go to www.joinhonor.com

LEGALby **ANDREA VAN LEESTEN****LET'S START TALKING ABOUT ASSISTANCE, ADVISE FOR FAMILY****PLANNING FOR THIS NEW LIFE JOURNEY THROUGH LEGAL TOOLS****WELCOME AND COME**

into the place for discovering what legal tools you may need to care for your loved ones, when they can no longer care for themselves.

It is a total surprise for you, I understand.

Let's start talking about how to get the assistance and advice that is needed even when your family members

have just been not prepared for this major life change.

Do you think you see a change in Mom, is it a slight one? How should you begin the conversation? Do you think Dad is forgetful about things he knew so well? Is his balance off a bit? Do you worry whether your parent can drive home alone? Do you worry whether your parent can handle daily tasks at home alone? Are your loved ones doing unusual activities, like giving money to strangers or leaving the home at night to wander? Are your loved ones acting difficult or hostile about these changes when you discuss them?

Let's work together with getting the family involved as soon as possible.

Cooperation among family members regarding the care of the ill or incapacitated parent, aunt, uncle, brother is paramount.

The shock of realizing that your loved one has changed and the one you knew as that Go-To loved one is gone. He or she is not coming returning and you must step in, lean in and care for your loved one through the maze of this journey.

Agreements on where the loved one will live, who will care for the

loved one must occur. Does the loved one have money, how much money and where is it? If it's in a bank, who can access it to pay the bills and the health care providers? Estimate how long the money will last and then what is the plan? Plan to enjoy the loved one until their death.

So, let's start right now to see what we need to do to plan for this new lifetime journey. In the coming articles, I will walk with you through your life. I will ask the tough and sensitive questions to elicit answers that can help us plan so it's right for all of us. We are all impacted because of dementia and Alzheimer.

We all have relatives, friends, co-workers, church members who are impacted and who impact us. We must fight together, lets evaluate everything.

I want to point and guide you to the legal tools you need. You will become the tool master with your family and friends.

I'm looking for that person or persons to become the master pruner, to cut out old ideas and grow new ones.

The person who is willing to clear away the brush, to clear the

decaying branches and ideas that do not work for your loved one. This is an ongoing change. Your knowledge will help you to care for the family.

We will start with simple planning tools, the durable power of attorney for health care (the health directive) and the power of attorney for assets.

The initial tools will assist you under ideal circumstances and as a first response. When those tools no longer work, it's time to modify and change.

The plan that worked in the beginning may not work over time. Therefore, agreements are necessary as the main care givers change, age and burn out. Without planning and agreements, you may end up asking the Courts for help in caring for your loved one.

Please email me with ideas and questions, my experience in this area of the law will benefit you and me as we grow through this life journey. Let me walk through your life with you.

Andrea Van Leesten can be reached at avanleesten@vanleesten.attorney

WHOS GONNA TAKE CARE OF ME
dementia & alzheimer's

**It's time,
we talk about it.**

**Alzheimer's Dementia Radio
with Butch Grimes**

5 SENIOR HEALTH MYTHS

(NAPSI)—Every day, it's estimated, 10,000 Americans turn 65 years old. Some of these people, unfortunately, have misconceptions that can jeopardize their health. Major health myths and misconceptions regarding senior health include:

1. If I feel fine, I am fine. Chronic infections can last so long that the way they feel becomes the "new normal," when it shouldn't be.

2. Sleep isn't important anymore. Older adults need the same seven to nine hours of sleep they did when younger.

3. It's too late to start exercising. Check with your doctor and start slowly, but there's no reason why seniors can't get in some exercise (even if they've never done it before).

4. Drink water only when thirsty. You may need hydration before you even notice or before you feel like you need it.

5. Dry mouth is just part of aging. Maintaining proper oral hygiene is important at any age, and especially for denture wearers who, even with no teeth, benefit from a regular oral hygiene routine specially formulated for them, rather than simply accepting poor health.

Learn more at www.DrBDentalSolutions.com.

NEWS

Unlocking mysteries

New Brain Health Initiative Could Unlock Mysteries Of Alzheimer's, Dementia

SCIENTISTS ARE contemplating important questions about health, mind and age: Could your blood hold the molecular secrets to a fountain of youth, preventing age-related brain disorders?

Are brain aging and Alzheimer's disease caused by a failure of interconnected systems, triggering a dominolike cascade of disease?

Can targeting the red blood cells and blood vessels jointly keep your brain healthy and prevent dementia?

THE PROBLEM

As people live longer, Alzheimer's and other age-related dementias are on the rise, projected to reach more than 75 million people worldwide by 2030.

To date, no effective therapy has been developed for these disorders, which are not only deadly but exact a high financial and emotional toll on society.

THE RESEARCH

To find solutions, three large-scale research teams are exploring those questions as part of an initiative to merge research of the brain and the blood vessels to develop new understanding of—and, ultimately, better preventions and



^ **MINDFUL MYSTERIES.** Scientists are seeking answers to important questions about how to preserve your mind over time.

treatments for—age-related brain disorders such as Alzheimer's disease.

THE SCIENTISTS

To help, American Heart Association, the world's leading voluntary organization focused on heart and brain health, and The Paul G. Allen Frontiers Group, a division of the Allen Institute, launched the \$43 million research project to bridge

the science of vascular and brain health through revolutionary, out-of-the-box thinking.

Additional supporters include the Oskar Fischer Project and the Henrietta B. and Frederick H. Bugher Foundation.

The three teams, headquartered at the Salk Institute for Biological Studies in La Jolla, Calif.; Stanford University School of Medicine in Stanford, Calif.; and Universi-

ty Hospitals Cleveland Medical Center in Cleveland, OH, respectively, work to develop new solutions to the urgent problem of age-related cognitive decline. The researchers are:

- "Rusty" Gage, Ph.D., a neuroscience researcher and president of Salk, who will lead an eight-year project looking into new targets for therapeutic research and biomarkers of early-stage cognitive decline.

- Tony Wyss-Coray, Ph.D., a professor of neurology at Stanford, who will lead a four-year project studying how changes in the immune system affect cognitive health.

- Mukesh K. Jain, M.D., a cardiologist at University Hospitals Cleveland Medical Center and Professor of Medicine at Case Western Reserve University, who will lead a team of investigators on a four-year project investigating whether targeting red blood cells and blood vessels can prevent dementia.

THE HOPE

The research could yield transformational discoveries to better detect, treat and prevent cognitive decline.

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NEWS

Safety in the home

Warning Signs Your Aging Parents Need More Help

HOME CARE AGENCIES often see a surge in calls in late December and early January. Why? Many grown children head home for the holidays and notice their aging parents need some help.

"We usually see a surge in demand for care around the holidays as families get together and adult children notice changes in their parents' well-being and realize they need more support to remain safe and independent in their homes," said Austin Harkness, head of care for Honor, one of the fastest-growing home care companies in the country. Here are ways to tell:

TAKE THE SNIFF TEST

Breathe in that holiday hug. If you notice unclean clothes or an uncharacteristic body odor, that could signal that a parent is having trouble bathing, maintaining personal hygiene or keeping up with household chores such as laundry.

Next, follow your nose to the kitchen. Open the fridge. You'll notice pretty quickly if there's spoiled food—but your parents may not. The sense of smell diminishes with age, especially after 70. Many seniors can't detect unpleasant odors that would normally tell them it's time to toss last week's meat loaf.

If the sniff test reveals some olfactory oddities, it might not just be "normal aging." Diminished sense of smell can be an early indicator of Alzheimer's and Parkinson's diseases. If you sense something isn't quite right, help Mom or Dad to set up a doctor's visit to see



^ **STAY AT HOME.** A visit to your parents can be a chance to assess whether they need help at home to stay healthy and independent.

if there's something else going on.

HAVE A LOOK AROUND

Your childhood home may look the same as ever—but it may not work as well for older adults. As people age, their environment typically needs simple upgrades to keep them safe. You can significantly reduce fall risks by taping down throw rugs, removing extra furniture, securing electrical cords out of pathways and adding grab bars in the bathroom.

Pay attention to clutter as well. Stacks of unopened mail, broken appliances or drooping houseplants may also signal a need for help. Being unable to manage everyday activities can be a symp-

tom of depression or of cognitive impairment, which often presents like depression.

If you see any of the above warning signs, you may want to arrange for your parent to see a doctor and for family members or professional caregivers to stop by and help with projects and chores. Just knowing your parents have help and resources can relieve worry, both yours and theirs.

Listen Up

Is the TV or radio volume blaring? Are conversations repeated? Does Mom keep asking "what?" or just smiling and nodding instead of participating? Don't brush it off. Difficulty following conversations

may be a sign of hearing loss, cognitive impairment or both.

Seniors who begin losing their hearing are at greater risk of developing dementia over time since hearing is a brain function. Sometimes, hearing aids stimulate the sounds needed for the brain to restore organization and correctly process sounds.

MAKING SENSE OF YOUR SENSES

Talking to parents about warning signs you've noticed isn't fun. But do it anyway. Let them know you want to be involved to help them stay independent for as long as possible. Even if you live far away there's a lot you can do, such as scheduling appointments and finding help with transportation, chores and projects. Talk to nearby family members about how they can help out or set up a visit with a home care agency that can provide ongoing support.

Fear of losing independence keeps a lot of seniors tight lipped. If your parents are open and honest about their changing needs, consider it a generous holiday gift. They trust you'll know what to do with it.

"We see a big uptick in demand for in-home care around the holidays when adult children spot changes in their parents' well-being and realize they need more support to stay safe and independent," said Honor home care's Austin Harkness. <http://bit.ly/2RYEECB>"



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FEATURE



ALONE *in a* CROWD

Alzheimer's care giving is isolating — alone in a crowd of 16 million

courtesy of
ALZHEIMER'S ASSOCIATION

JOB OPENING: POSITION requires you to be on call 24 hours a day. Salary is zero. In fact, you will pay, on average, \$10,697 per year to do a job that will negatively affect your own health, and may shorten your life. Average time on the job: 8 to 10 years, although some hold the position 20 or more years.

Sound too good to be true? That's the job of an unpaid caregiver for a loved one with Alzheimer's or another form of dementia. In 2018, there are nearly a quarter of a million people working in this job, among the 16 million people in the U.S. doing the same work for love, not for money.

National Alzheimer's Disease Aware-



▲ **DOUBLE TROUBLE.** One in four respondents are “sandwich generation” caregivers, meaning they care for children under age 18 as well as an aging parent.

ness and Family Caregivers Month was deemed in the month of November, as proclaimed by President Ronald Reagan, because his wife, Nancy, became his caregiver when he was diagnosed with Alzheimer’s disease in 1994.

Following are a few interesting facts about those who are volunteer caregivers for loved ones living with dementia:

- Most are women. About two-thirds of unpaid caregivers are women.
- Women caring for women. Nearly two-thirds of those living with dementia are women.
- 18.4 billion hours. That’s how many unpaid hours of care giving were provided in 2017 to persons in the U.S. living with dementia by family and friends.
- \$232 billion. That’s the value of the hours of unpaid care giving (average \$12.61/hour).

o That’s a lot of hamburgers. That unpaid care giving value is more than 10 times the total revenue of McDonald’s in 2017 (\$22.8 billion).

- Depression is common. Between 30 and 40 percent of family caregivers for people with dementia suffer from depression compared with 5 to 17 percent of non-caregivers of a similar age.

A high-stress job. Nearly 60 percent of caregivers for those living with Alzheimer’s and other forms of dementia report “high to very high” levels of emotional stress, while 38 percent report “high to very high” levels of physical stress.

- It could kill you. A Stanford University study reported that caregivers have a 63 percent higher mortality rate than non-caregivers, and 40 percent of Alzheimer’s caregivers die from stress-related disorders before the person for whom they are caring.

- Experience not required. Half of all dementia caregivers (51 percent) report having no prior experience performing medical/nursing-related tasks, and often

lack the information or resources necessary to manage complex medication regimens.

- “No” is not an option. Survey respondents frequently said that they felt they had no choice in whether they could take on the caregiver role.

- Highly educated. About 40 percent of dementia caregivers have at least a college degree, if not more education.

- Not highly paid. 41 percent of caregivers have a household income of \$50,000 or less.

- Almost half tout the benefits. Despite the physical, emotional and financial strain, 45 percent of caregivers surveyed by the Alzheimer’s Association reported the experience was “very rewarding.”

- Most commonly expressed concern: “Nobody gets it.” Alzheimer’s caregivers frequently state that others – particularly those who are not caregivers themselves – do not understand the pressures and challenges facing those who are on duty essentially 24 hours a day due to

the unpredictable behaviour and sleeping patterns of the person with dementia.

- The toughest choice. The majority of caregivers admit that the toughest choice they have ever had to make is deciding when they can no longer provide care for a loved one and it is time to move him or her to an assisted living facility.

Care giving statistics

- Nearly 250,000 unpaid caregivers in 2017 for 71,000 people living with dementia.

- 282 million hours of unpaid care provided, valued at nearly \$3.6 billion.

“Caring for a loved one with dementia is, in many ways, the most challenging job a family member or friend will ever undertake,” said Danelle Hubbard, director of Family Services for the Colorado Chapter of the Alzheimer’s Association. “For that reason, caregivers are the focus of a sizable portion of the services that our Association provides.”

NEWS

Denying coverage?

Americans Overwhelmingly Reject Insurers' Efforts To Deny Patients Coverage

A NEW NATIONAL poll conducted by YouGov found that 91 percent of Americans believe insurance companies should not be allowed to deny coverage for people with chronic diseases whose premiums are paid by charitable organizations.

Known as "charitable premium assistance," the federally approved practice of patients applying for and receiving help from charities to pay insurance premiums has long been accepted.

Yet recent efforts by insurers to undermine the practice have left many people worried about their insurance coverage.

Across the country more than 74,000 dialysis and kidney transplant patients—who are overwhelmingly unable to work because of their illness—rely on help from the American Kidney Fund (AKF) to afford health insurance premiums.

The poll found that 76 percent of respondents believe insurers want to block charitable premium assistance "to increase the company's profits by not providing coverage

for people who are very sick."

"Consumers overwhelmingly reject efforts by the billion-dollar health insurers, their lobbyists and their legislative patrons to deny charitable assistance that pays patients' health insurance premiums," said LaVarne A. Burton, president and CEO of AKF.

"Consumers are smart enough to see through the insurers' false statements and to recognize insurer efforts to end or limit charitable premium assistance are clear evidence of insurers doing what they do best: trying to find every possible way not to pay for sick people's care," she said.

"The question is whether they've been able to find enough legislators who will take the insurers' side instead of protecting sick patients."

The poll showed that individuals are not inclined to vote for legislators who side with insurers.

A vast majority of respondents (88 percent) are less willing to vote for a politician who supports the industry's efforts.

What the Survey Shows

Among the findings:

- 91 percent of respondents felt private insurance companies should not be allowed to kick patients with chronic diseases off their health insurance just because the patients' premiums are paid by an organization such as a nonprofit charity.
- 87 percent of consumers support the government's current position of letting private charities help patients pay their insurance premiums, co-pays, and out-of-pocket costs when the patient suffers from a debilitating illness such as kidney failure.
- 71 percent of respondents think patients with a chronic disease should be able to choose their health insurance plan. This number dramatically exceeds those who think state and federal governments (17 percent) or health insurance companies (13 percent) should choose which health insurance a patient with a chronic disease can have.

Concluded AKF's Burton, "I believe people inherently understand

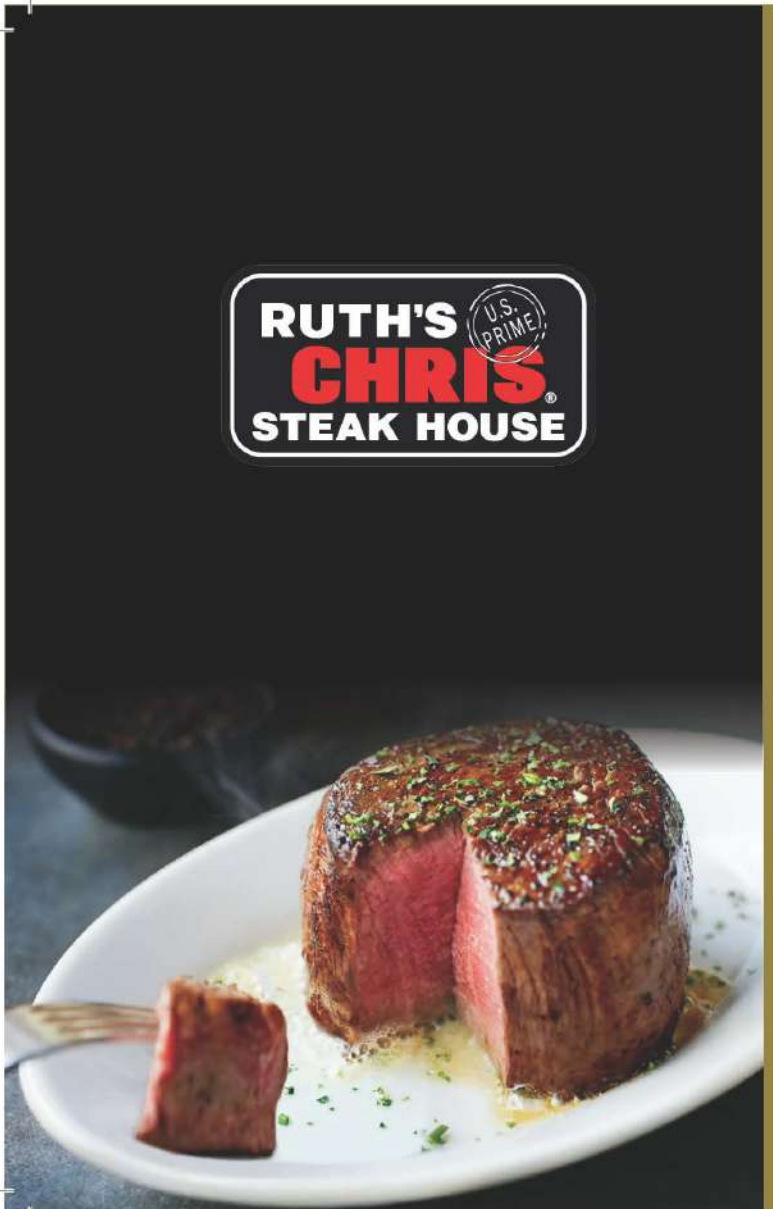
that if insurers are successful in their campaign against people with kidney disease, people with other chronic diseases will be easy next targets. We'll continue to protect patients by working with legislators and regulators at the national and state levels."

As the nation's leading independent nonprofit working on behalf of the 30 million Americans with kidney disease, AKF is dedicated to ensuring that every kidney patient has access to health care and that every person at risk for kidney disease is empowered to prevent it.

AKF provides a complete spectrum of programs and services: prevention outreach, top-rated health educational resources, and direct financial assistance enabling one in five U.S. dialysis patients to access lifesaving medical care, including dialysis and transplantation.

Learn More

For further facts, visit www.kidneyfund.org/therealstory.



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NEWS

Long-term health, security

Eight Tips For Caregivers To Help Ease The Risky Business of Caregiving

MILLIONS OF UNPAID, family caregivers may be putting their own long-term health and financial security at risk when providing support for relatives or friends who need help taking care of themselves.

Research from nonprofit Transamerica Institute® finds that 69 percent of caregivers gave little or no consideration to their own financial situation when deciding to become a caregiver, and 55 percent say their own health takes a back seat to that of the person they are caring for.

“Caregivers play a vital role in our society. It is imperative that we raise awareness of the issues and risks they face and offer meaningful solutions that can help them better manage their responsibilities,” said Catherine Collinson, CEO and president of Transamerica Institute. If you are among the growing number of family caregivers, these eight tips can help you maintain your own well-being while caring for your loved one.

1. Take care of your own health and wellness. Your physical health is important, too. Eating well, getting enough sleep, exercising, and taking breaks can all help increase your energy, reduce stress and improve your mood. Remember your own medical checkups and let your doctors know of any changes to your health.

2. Share caregiving and non-caregiving responsibilities. Share caregiving with family members and friends, or seek out community resources, such as adult day programs or transportation ser-



^ **A VITAL ROLE.** Caring for loved ones can be easier—and even more rewarding—if you heed a few hints.

vices. Ask for help with your own day-to-day responsibilities that caregiving makes difficult; it may be easier to find help with those activities than with caregiving.

3. If employed, strive to stay in the workforce while caregiving. Consider all your options before reducing hours, job responsibilities or quitting your job. Taking time out of the workforce could make it difficult to return to work and to find a job at the same level of pay.

4. Ask if your employer offers programs or benefits to help caregivers. Many employers offer the ability to work remotely, flexible hours and compressed workweeks, which can make it easier to juggle work and caregiving. Ask if your employer offers an Employee Assistance Program (EAP), which may include referrals to services for caregivers and care recipients.

5. Learn about the Family and Medical Leave Act (FMLA), a federal law that requires covered employers to provide their eligible employees with protected, unpaid work leave for qualified medical and family reasons. It can help employees balance their job with caring for a family member with a serious health condition. To learn more about FMLA and whether you are eligible, visit dol.gov/whd/fmla, and consider consulting your employer's HR department.

6. Keep your own long-term financial security top of mind. As a caregiver, it is especially important to budget, keep track of expenses and save for the future. Save for retirement either through your employer's 401(k) or similar plan, or in an IRA. Avoid taking loans or early withdrawals from those accounts.

7. Explore programs that

provide financial assistance to caregivers. Some states have programs for Medicaid recipients to help pay nonprofessional caregivers, such as Cash & Counseling and In-Home Supportive Services (IHSS). Veterans may be eligible for the Veterans Directed Home and Community Based Services (VD-HCBS) program. If the care recipient has a long-term care insurance policy, find out if it enables you to receive payments and what requirements or certifications you would need to receive payments. You may also be able to claim the care recipient as a dependent for tax purposes.

8. Remember patience. Caregiving takes patience, both in being realistic about what you as the caregiver can do, and in communicating with and assisting the care recipient. Relationships often change when the need for caregiving arises—from adult children reversing roles with their aging parents, to shifts in roles between spouses or partners. Patience is even more important when the care recipient has any cognitive decline.

Additional tips and resources can be found in nonprofit Transamerica Institute's "Comprehensive Guide for Caregivers." This free guidebook provides tools for assessing when care is needed, suggestions for planning for care and navigating health insurance coverage, possible options for financial support for caregivers, and ways to care for the caregiver. It can be downloaded at www.transamericainstitute.org/caregivers-research.







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REAL ESTATE



by LISA PUERTO

*DON'T BE AFRAID
OF THAT IMPORTANT,
SENSITIVE CONVERSATION*

'IT'S TIME TO TALK ABOUT IT'

AS OUR LARGEST demographic ages right before our eyes, it is with a solemn priority we ignite an urgency of planning for the future.

An estimated 10,000 seniors turn 65 every day, and factoring their health and retirement income, we have a dire need to be paying attention to what is happening to our senior citizen community.

As a millennial real estate

Professional, whose platform is founded on educating the youth and young adult community on real estate literacy, the intergenerational conversations amongst our predecessors is just that more important.

The sensitive intricacies of life show us that all life events triggers a real estate need: new job, job loss, relocation, divorce, marriage, new baby, college graduate, and now seniors needing to downsize.

A downsize may involve relocating to a smaller property, and specifically one with no stairs.

Or transferring ownership to the next Gen?

What does it look like to pass the torch of property ownership to the next Generation, albeit X, Y, or Z?

Well, that can take on many

forms, depending on the needs of the family, who may decide to sell, or not.

This is a conversation that can and should happen before it's — too late.

As in too late, when grandma or grandpa no longer have sound mind or health to discuss their desires or plans for their personal property, and often times multiple properties.

As in too late, when mama and papa no longer can take care of each other, much less themselves.

Our real estate team is a huge advocate of estate planning and transferring property into a Living Trust.

Certainly, I will disclaim that I am

➤ SEE **REAL ESTATE**, PAGE 9

THE JOURNEY

ALZHEIMER/DEMENTIA

with Butch Grimes



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Daddy, Uncles & Aunts.*

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www.whosgonnatakecareofme.com

INTERNAL MEDICINE



by DR. SHERRIL RIEUX

UNDERSTANDING THE DIAGNOSIS OF DEMENTIA

PROGRESSIVE DISEASE GETS WORSE WITH TIME

DEMENTIA

Dementia is the loss of cognitive function. Meaning you lose the ability to think, remember and reason.

It varies from mild to severe.

Approximately half of all those 85 years and older have some level of dementia.

Dementia is the broad term of which Alzheimer

and vascular dementia are sub-categories.

The dementia we see in middle age adults is generally caused by frontotemporal disorders.

There are 5 such subcategories distinguished by radiological findings such as Lewy Bodies, strokes etc, genetic testing, and neuropsychological testing.

Physicians use several tools to diagnose dementia.

The most important is a medical history from patient, family or caregiver and physical exam.

A priority of the exam to confirm another treatable disease is not being overlooked.

In addition, there are radiological test, genetic test and pathological test. There is not one single blood test to diagnose dementia.

Dementia is a progressive disease meaning it gets worse with time. As of today the current medications for dementia may delay progression to a small degree.

Physicians and medical providers strive to prevent dementia. Controlling blood pressure and diabetes, physical exercise, healthy sleep, drinking water and brain exercises in combination do

just that.

Prevention looks like this:

- Self-monitoring blood pressure and knowing your A1c, being compliant with medications and follow up with your doctors are important.
 - The goal for Physical Exercise is 60 minutes per day. Walking, line dancing and Pilates all benefit. Moving throughout the day is most important.
 - Seven to eight hours of sleep per night. Allow your brain to rest and help your body prepare for the next day.
 - Drinking at least eight glasses of water per day. Cleans out toxins. Feeds your organs including your brain.
 - Brain exercises such as puzzles, word games and a good card game all help to stimulate neurons in the brain to work faster and better.
- Dementia is not part of the normal aging process. Yet we are seeing more and more of our families, friends, and communities suffering with dementia.
- The more we know the better able we are to prevent, recognize and care for those around us.

DEMENTIA IS NOT PART OF THE NORMAL AGING PROCESS. YET WE ARE SEEING MORE AND MORE OF OUR FAMILIES, FRIENDS, AND COMMUNITIES SUFFERING WITH DEMENTIA.

WE LIVE DESIGN

u•nique design studios proudly supports **Who's Gonna Take Care of Me!** and would like to thank all the hard working men and women dedicated to making the world aware of this growing disease.

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◀ FROM REAL ESTATE, PAGE 8

not an attorney, so please consult a legal professional when reviewing or deciding on a Trust.

With that being stated, I make it a point to my interns and peers to be an advocate for an overdue conversation with family members who own real estate.

Now is the time to sit at the dinner table to plan out, 'what's going to happen when...' And being very matter-of-fact, we know the 'when' is an inevitable.

As real estate professionals serving our local communities, too often we see the detrimental effects in loss of wealth transference when the conversations of estate planning never happen.

It is the unfortunate debates and arguments over what to do with the matriarch's home, or patriarch's home...and even more sentimental: the family home.

To lessen the blow, consider what to say beforehand.

The conversation should include a checklist of items to be discussed and planned, and certainly it may not be decided on all in one day. In fact, there should be serious considerations about what happens next.

For example, sitting at the table with big mama and papa, should include but not be limited to the following:

- Do they have life insurance?

What type of policy is it and is it still active?

- Who are the beneficiaries?

Note: Proceeds from a life insurance policy can assist with paying off any existing mortgages on the property

▪ Where are the mortgage statements (if any), property tax bills, and property insurance declaration page?

These should be easily accessible, and if not contact a Real Estate Professional to assist with accessing some of these documents on records:

▪ Is there a will or Living Trust in place? Note: A will is contestable in court and subject to Probate Code, while a Living Trust (Revocable/Irrevocable) is not subject to Probate and acts as its own entity)

▪ Who is the family accountant or CPA to discuss tax implications of property transfers and sales

This list serves as a start and if support is needed, bringing a team of professionals who have been sourced with references should prove to be an advocate and one of your greatest assets during this sensitive time of passing on a legacy to the next Gen.

SUPPORT GROUP DIRECTORY

Alzheimer's Los Angeles is dedicated to supporting families and caregivers. Our Support Groups are FREE, led by a trained group facilitators, completely confidential and are held throughout Los Angeles County in multiple languages.

Telephone Support Groups

All service areas

Facilitator: Dr. Linda Ercoli
Facilitator: Yael Wyte
310-794-3914

Santa Clarita Valley

- Newhall
Santa Clarita Senior Center
Facilitator: Etta Martin
661-259-9444
- Newhall
Santa Clarita Senior Center
Facilitator: Monique Castillo
818-830-4835
- Newhall
Oakmont of Santa Clarita
Facilitator & Contact: Mary Dembkowski
661-993-3240
Facilitator: Deborah Dicorradro
661-993-2004

San Fernando Valley

- Agoura Hills
Meadowbrook Senior Living
Tami Podell
818-357-1123
- Burbank Joslyn Senior Center
Francisca Reynoso
818-398-1475
- Burbank Leeza's Care Connection
Contact: Wendy Saltzburg
818-847-3686
- Calabasas
Silverado Senior Living Calabasas Memory Care Community
Jennifer Watson
818-317-3421
- Canoga Park
Canyon Trails Assisted Living and Memory Care
Dinora Toj
323-930-6247
- Encino
Hope Connection
Jo Christner
818-788-4673
- Glendale
Glen Park Healthy Living
Facilitator: Annie Cardillo
818-242-9000
Facilitator: Paula O'Sullivan
818-296-4097
- Granada Hills
Aegis Living of Granada Hills
Facilitator: Brittany Kramer
Contact: Ron Borzcon
818-776-1183
- North Hollywood
Private Home
Nadia Cantuña
818-720-4482
- Northridge
Brookdale Northridge
Gabriel Diaz
818-886-1616
- Northridge
Sommerford Place of Northridge
Jennifer Watson
818-317-3421
- Pacoima
Little Tokyo Service Center – Japa-

nese-American Community Center
Facilitator: Isabelle Miyata
Contact: Lois Okui
818-899-1989

- Panorama City
Kaiser Permanente
Lisa Luna
818-788-5862
- Reseda
Jewish Home for the Aging – Eisenberg Village
Jennifer Watson
818-317-3421
- Reseda
Jewish Home for the Aging – Fountainview
Facilitator: Jennifer Watson
Contact: Susan Leitch
818-757-4490
- Sylmar
LA Caregiver Resource Center (LACRC)
Lake View Terrace Library
Lucila Torres
855-872-6060
- Tujunga
Verdugo Hills Family YMCA
Facilitator: Bernice Sanders
Contact: Gaby Najera
818-583-4744
- Van Nuys
ONEgeneration Adult Day Care
Denise Kee-White
818-708-6376
- West Hills
Meridian Senior Living
Vana Pensuriya
818-264-0970
- West Hills
Sunrise Senior Living
Stephanie Bien
818-701-9550
818-991-8282
- Woodland Hills
Woodland Hills Caregiver Group
Karin Marin
818-734-9991
- Woodland Hills
The Commons at Woodland Hills
Jennifer Watson 818-317-3421

San Gabriel Valley

- Glendora
La Fetra Senior Center
Jill Bakker
626-774-1419
- Pasadena
Alzheimer's Los Angeles Memory Club at Huntington Hospital
Kristen Tachiki
626-397-8145
- Pasadena
Alzheimer's Café / Pasadena Senior Center
Facilitator: Jenny Delgado
Facilitator: Renee Concialdi
Facilitator: Amber Bolanos
626-584-8130
- Pasadena
CAPS Adult Day Care Center
Mimi Brown
626-351-5427
- Pasadena
Pasadena Senior Center
Mei-chi Kuo
213-821-6920
- Pasadena
Terrace at Park Marino
Carolyn Wong
626-798-6753 x303
- Rosemead
California Mission Inn
Yvonne Kuo
213-821-6919

Metro Los Angeles

- Beverly Hills
Nessah Synagogue
Nancy (Nahid) Rafi
310-874-5110
- Beverly Hills
Sunrise Senior Living Beverly Hills
Ann White
310-247-4479
- Los Angeles
Silverado Senior Living Beverly Place
F: Thomas Baird
323-825-4304
- Los Angeles
Male Caregiver's Support Group – Alzheimer's Los Angeles
Dave Sitzer
213-293-9408
- Los Angeles
Adult Children Support Group – Alzheimer's Los Angeles
Zina Paris
323-930-6212
- Los Angeles
Alzheimer's Los Angeles Memory/Grad Club/Alumni Club
Alicia Villegas
323-930-6289
- Los Angeles
APHCV – Los Feliz Health Care Center
Perla Santos
323-644-3880 x341
- Los Angeles
Little Tokyo Service Center – St. Francis
Xavier Chapel
Kiyoko Kaneda
213-473-3035

West Los Angeles

- Culver City
Culver City Senior Center
Zina Paris
323-930-6212
- Culver City
Kaiser Permanente Culver Marina Medical Office
Ed Holly
310-915-4567
- Culver City
Meridian Culver City
Reggie Rodriguez
559-349-3466
- Los Angeles
Kaiser Permanente – West LA Medical Center
JB Saunders
323-857-3784
- Los Angeles
OPICA Adult Day Health Center
Facilitator: Anne Galbraith
Facilitator: Elizabeth Lira
310-478-0226
- Los Angeles
St. Sebastian Catholic Church
Facilitator: Dr. Xavier Cagigas
Facilitator: Enrique Gracian
310-825-4304
- Los Angeles
West LA VA Medical Center – group for Veterans or Caregivers of Veterans
Jessica Alva
310-478-3711 x41652
- Santa Monica
UCLA Medical Center Santa Monica
Facilitator: Dr. Kathleen Tingus
Facilitator: Catherine Jones
Contact: Monica Moore
310-794-3914
- Santa Monica
Sunrise of Santa Monica
Facilitator: Julie Liker
Contact: Denese Taylor

310-922-5659

- Santa Monica
WISE & Healthy Aging
Facilitator: Nick Eisner (am)
Facilitator: Blaine McFadden (pm)
Contact: Phyllis Amaral
310-394-9871
- West Los Angeles
Hope Connection
Jo Christner
818-788-4673
- Westchester
Westchester Senior Center
Loli Ramezani
310-649-3317
- Westwood
Belmont Village of Westwood
Dena Schwimmer
323-451-9313
- Westwood
UCLA – Mary S. Easton Center / Alzheimer's and Dementia Care Program Support Group
Facilitator: Barbara Hament
Facilitator: Monica Moore
310-794-3914

South Los Angeles

- Los Angeles
National Council of Negro Women Building
Facilitator & Contact: Jeanie Harris
Facilitator: Sharon Melancon
323-296-2975
- Los Angeles
St. Paul's Presbyterian Church
Facilitator: Lois Hines
Facilitator: Andrea Michelle Bracken
323-295-2062
323-637-3170
- Los Angeles
USC Davis School of Gerontology
Jenny Peterson Grace
855-872-6060
- Los Angeles
First AME Church
Mrs. Bobbe Akalona
855-872-6060

East Los Angeles

- Cerritos
Cerritos Senior Center
Lisa Miyahata
562-916-8550
- Downey Remita Health
Elisa Gaytan
562-904-6777
- Huntington Park
Alzheimer's Los Angeles – Huntington Park Public Library
Angie Moran
323-859-8810
- Los Angeles
Alzheimer's Los Angeles
Dinora Toj
323-881-0586
- Montebello
Beverly Hospital Women's Care Center
F: Sandy Acosta
C: Alice Baldwin
800-618-6664
323-725-5032
- Santa Fe Springs
Gus Velasco Neighborhood
Lucila Torres
855-872-6060
- Whittier
Oakmont of Whittier
Vickie Pearson
562-693-8222
- Whittier
Whittier Place Senior Living
Tina Hernandez

SUPPORT GROUP DIRECTORY

714-856-3909

South Bay

- Gardena
Southbay Caregiver Support Group
Akiko Takeda
310-819-8659
- Inglewood
Rogers Park
Linda Peterson
310-412-4368
- Long Beach
Brittany House
Colleen Rozatti
562-421-4717
- Long Beach
Faith Presbyterian Church
Terri Furlow
562-427-8048
- Long Beach
Long Beach Memorial Medical Center
Facilitator: Jim Kelly
Contact: Dinora Toj
323-930-6247
- Long Beach
Namaste Center for Spiritual Living
Paty Piar
562-795-5762
- Long Beach
Skills4Care
Facilitator: Paty Piar
Contact: Robert Skidmore
562-413-1061
- Long Beach
Grace First Presbyterian Church
Yvonne Kuo
855-872-6060
- Manhattan
Beach American Martyrs Church & Homewatch Caregivers
Facilitator: Dick Williams
310-292-0996
- Palos Verdes Peninsula
Palos Verdes Peninsula Center Library
Lauren Spiglanin
310-383-1877
- Palos Verdes Peninsula
Mary and Joseph Retreat Center
Lucila Torres
855-872-6060
- Redondo Beach
Beach Cities Health District
Facilitator: Rosalie Rapas
Contact: Officer of the day
310-374-3426 x138
- Redondo Beach
Beach Cities Health District – Memory Club
Facilitator & Contact: David Hart
Facilitator: Tara Guden
310-792-8666

- Redondo Beach
The Neurobehavioral Healthcare Center
Dr. Lauren Keats
310-855-3288
- San Pedro
Harbor Terraces Assisted Living
Lauren Spiglanin
310-383-1877
- San Pedro
The Salvation Army Sage House Adult Day Care Center
Sherrie Similton
310-832-6031
- Torrance
Always Best Care
David Hart
310-792-8666
- Torrance
Family Conect Memory Care
Lauren Spiglanin
310-383-1877

Inland Empire

- Apple Valley
Valley Crest Memory Care
Renee Savage
760-242-3188
- Big Bear Lake
Senior Citizen Center of Big Bear Valley
Sokura Solario
(909) 584-0323
- Chino
Pacifica Senior Living Hillsborough
Facilitator: Ahley Goodley
Facilitator: Jennifer Helboorn
909-386-6068, 909-548-2100
- Chino Hills
Pacifica Senior Living Chino Hills
Lloyd Mustin
909-270-0866
- Chino Hills
Chino Valley Community Church
Facilitator & Contact: Lloyd Mustin
Facilitator: Lisa Laufer
909-270-0866
- Chino Hills
Oakmont Senior Living
Lloyd Mustin
909-270-0866
- Claremont
Claremont Joslyn Senior Center
Facilitator: Angelika Pittet
Facilitator & Contact: Lydia Bouroumand
909-621-9900 x238 or 909-399-5488
- Claremont
Claremont Place
Facilitator: Angelika Pittet
Facilitator: Lydia Bouroumand
Contact: Tricia Elliker
909-447-5259 or 909-399-5488
- Claremont

- Claremont Club
Laura Van Dran
909-921-1033
- Claremont
Pilgrim Place Health Services
Laura Van Dran
909-921-1033
- Claremont
Sunrise of Claremont
Lloyd Mustin
909-270-0866
- Corona
Brookdale Corona
Joy Rivera
951-898-6991
- Loma Linda
Linda Valley Senior Living
Antonia Lopez
909-799-3117
- Mentone
Rose Garden
Justina Cardenas
909-794-1040
- Rancho Cucamonga
Alzheimer's Los Angeles & Home Instead Senior Care
Sharon Jones
909-476-9030
- Rancho Cucamonga
Sunlit Gardens
Kelli Garfield
909-215-2142
- Redlands
Blossom Grove
Mechelle Alona
909-335-6660
- Redlands
Plymouth Village Retirement Community
Connie Garrett
909-793-1233 x1620
- Redlands
Sommerford Place Assisted Living
Debra Walls
909-793-9500
- Riverside
Care Pathways
Karen Armijo
951-867-3800
- Riverside
Care Connexus Adult Day Services
James Slater
951-509-2500
- Riverside
Pacifica Senior Living
Jill Johnson-Young
951-360-1616
- Riverside
Sunrise Senior Living – Canyon Crest
Facilitator: Paul Velen
Contact: Mary-Ellen Taber
951-686-6075

- Mentone
Welbrook Senior Living
Michelle Thompson
951-200-3110
- San Dimas
Brookdale Senior Living
Maria Monedero
909-394-0304 x233
- Upland
Oakmont of San Antonio Heights
Anthony Villegas
909-981-4002
- Upland
St. Anthony's Catholic Church
Laura Van Dran
909-921-1033
- Victorville
Home Instead Senior Care
Sharon Jones
760-843-5655 or 909-476-9030
- Victorville
Sterling Commons
Debra Newlin
760-245-3300

SW Riverside County

- Beaumont
Beaumont Senior Center (Albert Chatigny)
Veronica Ramos
909-799-3117, 909-266-2672
- Hemet
Desert Hills Memory Care Center
Facilitator: Jane Farmer
Contact: Chantelle Hudson
951-652-1837
- Sun City/Canyon Lake
Canyon Lake Community Church
Facilitator: JoAnn Wickerath
Contact: Beverly Haney
Facilitator: 951-679-7736
951-244-1877 x200 (church)
- Sun City/ Menifee
Care Connexus Adult Day Care
Jim Slater
951-509-2500
- Temecula
Rancho Community Church
Facilitator: Sylvia Garcia
Facilitator: Lyn Euzenas
951-303-3986



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