



Caregiver and Family News: Living Well in our Best Years

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Greetings,

We are pleased to offer the second edition of “Living Well in our Best Years”, a collaborative effort between the Aging and Disability Resource Center of the North and UW Extension.

November is National Family Caregivers Month, and the overarching message is “Take Care to Give Care”. It was important to us to have this edition out in time to recognize the time, energy and effort family caregivers spend performing the multitude of tasks and responsibilities associated with caregiving. Even more importantly, it is important to recognize that the health and wellness of caregivers is paramount in order to continue on with the caregiving journey.

Until next year, live well!

Carrie Linder
ADRC of the North Bayfield Office Manager

Elizabeth Lexau
UW-Extension, Family Living Educator



BenefitsCheckUp is a free service of the National Council on Aging. Many adults over 55 need help paying for prescription drugs, health care, utilities, and other basic needs.

There are over 2,000 federal, state and private benefits programs available to help. But many people don't know these programs exist or how they can apply.

BenefitsCheckUp asks a series of questions to help identify benefits that could save you money and cover the costs of everyday expenses.

After answering the questions, you will get a report created just for you that describes the programs you may get help from.

<https://www.benefitscheckup.org/>

What would you like to learn...? Is there a topic about aging or family caregiving you'd like to see covered in this newsletter? Call or email UW-Extension at: (715) 373-6104, x 2; liz.lexau@ces.uwex.edu

Convincing an Elderly Loved One to Accept Help

For many aging adults, the progressing years represent a series of increasingly hard-to-handle losses: loss of energy, loss of mobility, loss of hearing, loss of financial independence. These



losses gradually chip away at their sense of freedom and can deal a significant blow to their self-esteem.

Combine that with the fact that many well-meaning younger family members unwittingly offer help in a way that reminds their loved ones of their advancing age. Now that's a recipe for interpersonal conflict.

The pairing of an elder's low self-esteem, with condescending communication habits of younger adults is the main reason why older people refuse help and act out when their family members offer to lend a hand, according to Oregon State University professor, Michelle Barnhart.

"When we offer assistance to an aging person, sometimes we do so in a way that challenges their identity as an independent adult," says Barnhart. "Treating someone as a stereotypical 'old person' makes them say, 'I don't feel old, why are people treating me like this?' This can cause serious communication issues," according to Barnhart.

Barnhart and her colleagues conducted in-depth interviews with elders, adult children and caregivers in order to examine why aging adults so often reject outside assistance.

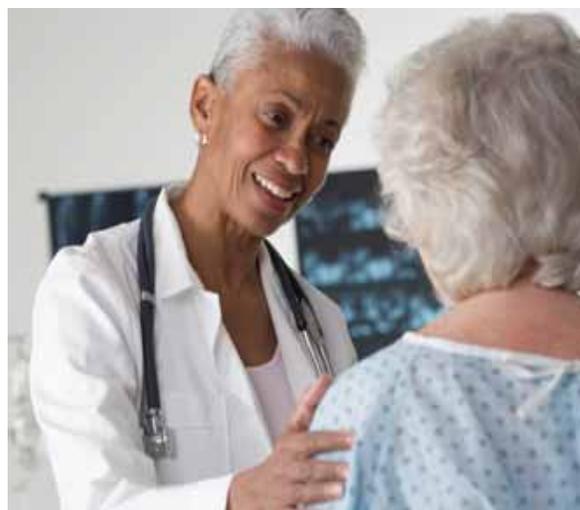
They discovered that, when an older adult's identity is threatened, he or she may lash out—engaging in potentially dangerous behaviors to prove their youth.

Four Ways Elders Retaliate When Younger Family Members Try to Help:

Hashing it out: Outright arguments are a common way for seniors to express their frustration at being categorized as old. During these exchanges, an elder will try to persuade others that they are not as old, or incapable, as they seem.

Proving themselves: Mark, one of the interviewees participating in the study, repeatedly offered to help Bea, his 82-year-old mother-in-law, with household maintenance that required a ladder because he was afraid that she would lose her balance and fall. Bea responded by rebuffing Mark's request, proudly telling him every time she used the ladder to do something.

Preventing participation: When 89-year-old Abbie's cardiologist started addressing her two adult daughters instead of her during an appointment, she banned them from the exam room. "I wanted to grab him by the collar and say, 'Look, talk to me! I'm the patient!'" she says. "But that was easily corrected. They don't go in with me anymore."



Hiding indiscretions: After Abbie's daughters tried to get her to stop driving, she would pretend to follow their advice, while secretly driving her sister around.

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Memory Screening

A memory screen is a wellness tool that helps identify possible changes in memory and cognition. Currently 5.3 million Americans of all ages have Alzheimer’s disease. Many people experience signs of dementia however a memory screen can help guide services and referrals as the issue may not be related to dementia at all; side effects from medications, hearing/vision loss, depression and delirium can all take on the look of dementia as well. What many people do not realize is that Dementia is brain failure and it IS NOT a normal part of aging- it is a disease!

A memory screen creates a baseline for a person who may be experiencing some memory issues, so that the future changes can be noted. Early detection has been proven to be critical in treating memory issues. Just as blood pressure, cancer, diabetes or stroke screening contribute to prevention and better treatments, so do memory screens.

A person who participates in a memory screen will receive immediate results and have them for future comparison; it can also be shared with a physician.

This is a FREE and confidential service and takes only ten minutes. If you are unable to participate in any of the scheduled screenings, please contact the Aging & Disability Resource Center of the North to schedule an appointment. Appointments can be held at the ADRC office or in your home. On November 15, there will be several sites throughout the county for people to drop in and participate in a “Brain Wellness Check”, which is the memory screen.

Frequently Asked Questions About Memory Screens:

Q. Does the screening diagnose Dementia or Alzheimer’s?

A. No, it does not diagnose. The screen is a tool to detect signs and symptoms of dementia that depending on the results may warrant a follow-up appointment with a qualified professional. Resources are provided.

Q. Who will be conducting the screen and how do I know they are qualified?

A. The screen is completed by professional staff who are trained to provide memory screening.

Q. I have noticed changes in my family member and I think it might be dementia. I don’t know where to start or what to ask about. Would it be okay for me to talk to someone at your office?

A. Yes, we can provide information and resources at the ADRC. We can also complete the memory screen with your loved one and provide referral information.



FREE

4th Annual Brain Wellness Check

November 15, 2016

Have you had those days when your conversations start with...

"Where in the heck are my keys?"

"Did I tell you this already?"

"What was I going to say?"



It's time to find out how your brain is working for you!

- Get you brain health baseline
- Learn more about how to live a brain healthy lifestyle
- Get information and resources on programs and



Aging and Disability Resource Center of the North
Serving Ashland, Bayfield, Iron, Price and Sawyer Counties
(866) 663-3607 or Website: adrc-n-wi.org

ASHLAND COUNTY SITES

Essentia Health—Ashland (10am—2pm)

Enrichment Center—Ashland (10am—2pm)

Congressional UCC—Mellen (10am—2pm)

Bad River Wellness Clinic—Bad River (10am—2pm)

BAYFIELD COUNTY SITES

Washburn Library—Washburn (10am—2pm)

Bethesda Lutheran Church —Bayfield (11am—1pm)

Barnes Town Hall—Barnes (10am—Noon)

Drummond Town Hall—Drummond (1pm—3pm)

Loss and Grief in Caregiving

November is National Caregiver's month – a month to celebrate and honor all of you who are caring for your spouse, parent or friend. Over 25% of households in the United States are involved in caring for an older adult. Isn't it wonderful that so many people are dedicated to helping those they love? Being able to take care of your loved one in their older years is a joy and an honor.



But caregivers also know that their job is not always joyful, or easy! In fact, there is a lot of loss associated with caregiving. Some of the more obvious things that caregivers lose are jobs/careers, social interactions, free time and often their own well-being. Other losses are less clear, like when you are feeling sadness and grief but can't quite explain what it's all about. For example, you may feel like you have already lost your loved one even though they are still alive. This ambiguous loss is particularly difficult to overcome because it is often brushed aside as not being real. When losses are not identified and feelings of grief are not validated, depression often follows.

I'm sure all caregivers will agree that they have experienced various losses as a result of their caregiving role. Most of these losses are unavoidable and must be faced. Grief is the emotional process of working through these losses. Grief can be experienced in many different ways. Some common re-

sponses to grief are anger and frustration, shock and denial, disorganization, helplessness and fear, guilt and regret, sadness, and fatigue. The most important thing is that the caregiver recognizes their losses and how they are responding, and then allows themselves to grieve.

How does a person grieve? Let yourself express all of the emotions you are feeling. Find a good friend, therapist or support group where you feel safe to share your feelings. Find a private time and space to gather memories and savor that which was lost. Write in a journal. Take care of your health. Stay in touch with friends. Say "goodbye" to life as you knew it and say "hello" to your life as it is now.

The phrases "work through your grief" and "learn to let go" are common, giving the impression that the sadness and pain of your loss will end one day. But some grief and sadness will

never completely go away. Living under the impression that you can somehow make your pain and grief disappear may be setting yourself up to fail. Dealing with loss is not forgetting that which you have lost, but learning how to integrate those losses into your life and move forward. It has been said, "You never get over a loss; you just get different."

One last suggestion to all of you hardworking caregivers: Give yourself a pat on the back for all that you do. Treat yourself to lunch with friends, a few hours doing your favorite hobby, a manicure or massage. You have definitely earned it. And remember, you are admired by many for your dedication and selflessness. Keep up the good work!

Jane Mahoney

**Older Americans Act
Consultant-
Caregiving Specialist**

**Greater Wisconsin Agency on
Aging Resources**

Convincing an Elderly Loved One to Accept Help

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As a caregiver, your challenge will be to make sure your loved one is safe, healthy and getting the care they need, without overstepping your boundaries, which

could cause resentment and resistance.

Here are some Tips for Taking Charge, Without Taking Over:

Ask what they need: If a loved one believes asking for help was their idea, they may be more likely to accept it. If you start by lending a hand with just those things your loved one admits to needing help with, they may be more receptive to future suggestions you have regarding their need for outside assistance.

Show respect: Respect is the foundation on which all good relationships are built. Ask your loved one's permission before rushing in to "save the day." Even if you really want to sit in on a family member's appointment, inquire about their feelings first. If they don't want you with them in the exam room, wait outside and talk to their doctor about your concerns once the appointment is over.

Let them contribute: Even if a loved one does allow you to assist them with a particular task (for instance, folding the laundry), let them pitch in. Doing so may make the process less efficient, but being able to contribute can renew an elder's sense of purpose and worth.

Remember: safety should always be your ultimate aim. If you have to assume total control of a task to make sure your loved one doesn't get hurt, it is okay to do so without hesitation.

This article, courtesy of AgingCare.com, is one of a series of articles included in the eBook, *Family Caring for Family*. Download your free copy at www.AgingCare.com/ebook.

14 Strategies for Controlling Stress

- Use available respite and healthcare resources. Taking a break, and ensuring your loved one is well cared for is a top way to reduce stress.
- If you need financial help, don't be afraid to ask family members to contribute a fair share.
- Say "no" to requests that are draining and stressful, such as hosting holiday meals.
- Forgive yourself for imperfections. There is no such thing as a "perfect" caregiver.
- Identify what you can and cannot change. You may not be able to change someone else's behavior, but you can change the way you react.
- Set realistic goals. Break large tasks into small steps you can do one at a time.
- Prioritize. Make lists. Establish daily routines.
- Keep in touch with family and friends and make time for yourself.
- Join a caregiver support group. If your loved one has a particular condition, such as Alzheimer's or dementia, look for a group targeted to that.
- Make time to be physically active on most days, even if it's a short walk. Eat a healthy well-balanced diet and get enough sleep.
- See your doctor regularly for checkups.
- Keep a sense of humor. Practice positive thinking.
- Find out about caregiving resources in your community. Your ADRC is a great, free resource.
- If you work outside the home, consider taking a break from your job. Employees covered under the federal Family and Medical Leave Act may be able to take up to 12 weeks of unpaid leave per year to care for relatives.

By Marlo Sallitto, Agingcare.com



Caregiving and the Holidays: from stress to success!

For many caregivers the holiday season gives rise to stress, frustration and anger, instead of peace and good will. Caregivers may feel resentful towards family members who they feel have not offered enough assistance. Managing care for someone who has a cognitive impairment may leave caregivers feeling that they will not be able to participate as fully as they would like in family gatherings. Already overwhelmed with caregiving tasks, stressed-out caregivers may view holiday preparations as more of a drain of precious energy than a joy.

Following are some suggestions that may help make the holidays more enjoyable for you and your loved ones. Keep in mind that the holidays can, in fact, provide unique opportunities to seek better communication, connection and support from family and friends.

An opportunity for communication It's hard to know how much to communicate about a loved one's decline in cognitive functioning and personal care needs. Whom do you tell? How much do you tell? Although it is understandable to have reservations about discussing a loved one's impairments, honest communication about the realities of the caregiving situation offers others the opportunity to respond with assistance. Sharing the truths of your situation may help reduce some of the feelings of isolation and lack of appreciation common in caregivers.

Holiday greetings and a brief note Some caregivers have had success in writing a brief note describing the person's condition and enclosing it in a holiday greeting card. This can be a nonthreatening way to inform distant or uninvolved relatives about the realities of the caregiving situation. If written in a tone that's not accusatory or guilt-inducing, family members may be more forthcoming with assistance or, at least, have a better understanding of the effort you are putting into providing care.

Let sleeping dogs lie? It is common for caregivers to be disappointed with family members who they feel are not "pulling their weight" in caregiving responsibilities. If this holds true for you, and your goal is to enjoy the holidays, you must decide how much and when to communicate this disappointment. Consider clearing the air before the holidays or perhaps resolve within yourself to put those feelings on hold, with the intention to discuss the matter after the holiday season passes. In the meantime, enjoy the holiday!

Be clear about your energy level Let family members know that your caregiving duties are keeping you very busy and that you only have so much energy for holiday preparation and hosting duties

Accept the need to adapt Caregivers often have to adapt their traditional role or experience of the holidays. This may mean allowing another family member to host more time-intensive festivities. You may need to modify the amount of time away from home to match the comfort level of your impaired loved one. You may also have to choose which events to attend based on which would be the simplest, least exhausting and most enjoyable for the person for whom you provide care—and for you.



The visit room Don't expect the person with cognitive impairment to be able to adapt to all situations; you may need to adapt the environment to their needs. See if you can arrange to have a room in the house designated as a quiet place. Many people with dementia find multiple conversations and background noise disturbing. To avoid this anxiety, the person may benefit from time in a quieter room with less stimulus where family members could take turns visiting with them.

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Preventing Financial Abuse and Exploitation of Older Adults



While the news often highlights phone or postal scams, the vast majority of financial abuse cases involving older

adults in Wisconsin involves family members. Some have called elder abuse "the crime of the century". Maybe you have concerns about someone whose family member may be taking advantage of them, for example a daughter using a father's savings for her own use.

Offering help in a situation like this can be complicated. When confronted about it, the older person may fear consequences should their family member be investigated. The older person worry about the information going public and may also depend on that family member for meals, transportation, medical appointments, and even living arrangements. Unfortunately, sometimes a family member uses that "fear of the unknown" to continue to abuse.

If you, or an older person you know, is being taken advantage of or abused, there is local help available. Reporting any kind of elder abuse or neglect in Wisconsin can be done with a simple phone call and your identification will be kept confidential.

By state law every county in Wisconsin has a lead elder abuse agency; in Bayfield County it is the Human Services Department. The reporting process includes the person taking the call asking for your name and number so they can follow up with you if necessary. They will ask a few simple questions like the reason for the call; what details you can provide that back up your suspicions.

Don't worry if the situation turns out not to have needed intervention or an investigation. It is better to make the call then risk something happening that could have been prevented.

Because of the strict confidentiality of the elder abuse reporting system, once initial contact is made you may not hear from the elder abuse agency again. This is because any investigation or follow-up is not allowed to be shared outside of the confines of the state reporting system. Here, the caller needs to trust the expertise of adult protective services social workers who regularly investigate cases of abuse



One of the best ways to stop financial or any kind of abuse of older adults or adults with disabilities is to understand what it is. Abuse - per Wis. Stat. §46.90 (1) - can mean any of the following:

- **Physical abuse** - intentional or reckless infliction of physical pain or injury, illness, or any impairment of physical condition.
- **Emotional Abuse** - language or behavior that serves no legitimate purpose and is intended to intimidate, humiliate, threaten, frighten, or otherwise harass the individual to whom the conduct or language is directed.
- **Sexual Abuse** - sexual contact or intercourse with another person without consent.

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Preventing Financial Abuse and Exploitation of Older Adults

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- **Treatment without Consent** - the administration of medication or the performance of psychosurgery, electroconvulsive therapy, or experimental research on an individual who has not provided informed consent, with the knowledge that no lawful authority exists for the administration or performance.
- **Unreasonable Confinement or Restraint** - the intentional and unnecessary confinement of an individual in a locked room, involuntary separation from his or her living area, use of physical restraints, or the provision of unnecessary or excessive medication. (Note: This does not include the use of these methods or devices if they conform with state and federal standards governing confinement and restraint.)



If you suspect this is happening to someone in your community, it is important to report it even if you can't confirm your suspicion. Call Bayfield County Department of Human Services at 715-373-6144; press "0" and ask to speak with the Aging & Disability Services worker.

Thank you for caring about vulnerable adults. While the saying may be: "It takes a village to raise a child," it also takes a village to assure older adults are able to live free of abuse and neglect.

Adapted from an article by Jayne F. Mullins, Elder Abuse Program Lead, GWAAR 7/12/2016



Caregiving and the Holidays...

(continued from p.6)

Share your wish list-

- **Respite:** some caregivers ask family members for time off from caregiving duties as a gift. If this is not possible, perhaps they would consider paying for a home care worker or a stay at a respite facility.
- **Home repairs:** Do light bulbs need changing or grab bars need installation? Tasks such as these may be the perfect way for a family member to help out.
- **Care for you!** How about a gift certificate for a massage, facial or manicure? How about an opportunity to spend the day fishing or a walk in the outdoors?

Book your homecare worker early! Speak with your home care worker or home care agency early about your holiday plans!

Schedule one-on-one time Make a point of setting time aside to enjoy the person you care for. The best activities are those which take advantage of long-term memory. Try looking through photo albums or unpacking holiday decorations.

Reflect on rewards It may feel rewarding to know that you are fulfilling a promise you made to the person for whom you provide care. Your caregiving may be an expression of living up to your personal ideals or religious beliefs. You may also be experiencing a great deal of growth as you learn new skills and meet challenges in ways you never imagined possible.

A little thank you goes a long way After the holidays, consider writing a thank you note to family members or friends who spent time with your loved one. Emphasize the positive impact their visit had. This may reinforce positive feelings and diminish discomfort they experienced. They may be more encouraged to visit again or be more supportive of your efforts.

Adapted from: Family Caregiver Alliance National Center on Caregiving <https://www.caregiver.org/caregiving-and-holidays->

Medicare Part—D Annual Enrollment Period

By the GWAAR Legal Services Team (for reprint)



Each year from October 15 through December 7, there is an Annual Enrollment Period (AEP), also known as the Open Enrollment Period, for Medicare Beneficiaries to change their Part C and/or Part D plans.

During the AEP, a person can make any of the following changes:

- Join a Part D plan (if not already enrolled);
- Drop a Part D plan;
- Switch to a new Part D plan;
- Drop a Medicare Advantage plan and return to Original Medicare;
- Join a Medicare Advantage plan with or without drug coverage.

Changes made during the AEP will be effective on January 1, 2017. Even if Medicare beneficiaries are happy with their current Part D plan, they should still re-evaluate that drug plan to determine if it will best meet their needs for 2017. Because Part C and Part D plans are privatized, they are allowed to change the terms of coverage every year. New Part D plans become available, and some Part D plans stop offering coverage in the state. Even if a plan continues to offer coverage for the following year, its monthly premium, formulary, pharmacy network, deductible, and copay amounts could all change!

It's important that Medicare beneficiaries review their Annual Notice of Change (ANOC), which arrives in the mail on or before September 30th. This document notifies Medicare beneficiaries of the changes to their Part D plan that become effective January 1, 2017.

The most effective way to choose a Part D plan is by going on the www.medicare.gov website and using the "planfinder" tool. The planfinder asks a person to enter his or her zip code, prescription medications, and preferred pharmacies. Based on this information, the planfinder will list the plans that would be most cost effective for that person.

Unfortunately, research shows that fewer than 10% of Medicare beneficiaries are enrolled in the most cost-effective Part D plan. Name recognition or looking at a plan's monthly premium alone are not good ways to choose a plan. If a person is unsure how to pick and evaluate a plan, the person can utilize the following resources:

- Case manager or social worker
- Board on Aging and Long-Term Care Part D Helpline (ages 60+) at (855) 677-2783
- Board on Aging and Long-Term Care Medigap Helpline at (800) 242-1060
- Disability Rights Wisconsin Part D Helpline (ages 18-59) at 800-926-4862
- Elder Benefit Specialist

In Bayfield County, your Elder Benefit Specialist is Sheila Mack. You can contact her at 715-373-6144, ext. 179.

In Ashland County, your Elder Benefit Specialist is Amy Janecek. You can contact her at 715-682-7004, ext. 140, on Tuesdays and Wednesdays; or at 715-682-4414, ext. 2, on Mondays, Thursdays, and Fridays.

Wisconsin's Silver Alert Program: What You Need to Know

Who is eligible for a Silver Alert?

A Silver Alert may be issued for any missing person who is over age 60 and is believed to have Alzheimer's, dementia or another permanent cognitive impairment that poses a threat to the individual's health and safety.

What criteria have to be met in order to issue a Silver Alert?

The following criteria have to be met in order for a Silver Alert to be issued:

- There is a reasonable belief that the missing person's disappearance is due to the individual's impaired cognitive condition.
 - The Silver Alert request is made within 72 hours of the individual's disappearance.
- There is sufficient information available to disseminate to the public that could assist in locating the missing person.

How do I access Silver Alert?

Silver Alert is accessed through your local law enforcement agency. Your first step when a loved one is missing is to contact your local police department.

How can I make Silver Alert work for me?

- Maintain a recent picture of the person in electronic form that can be used to help find the missing person.
- Keep a recent picture of the car the person may be driving. Note any markings on the car that could make it easier to identify (dents, vanity plates, bumper stickers).

How will Silver Alerts be distributed?

Silver Alerts may be broadcast through television and radio, digital billboards, and lottery display terminals. Alerts also may be displayed on highway digital messaging signs through the Wisconsin Department of Transportation.

Can I receive Silver Alerts?

Anyone can receive Silver Alerts at no cost. Alerts can be sent to you either by fax, e-mail or text message. Register at www.wisconsincrimealert.gov.

Additional ideas to ensure a senior with dementia remains safe:

- Consider including your name on bank and cell phone accounts. By doing so, you can authorize law

enforcement to locate and track your loved one through the wireless carrier or by monitoring bank transactions.

- Install an app on your computer or cell phone that allows you to track where your loved one's cell phone is located at any time.
- Purchase a personal GPS unit that can be carried or worn.

Provided by the Alzheimer's and Dementia Alliance of Wisconsin.

For additional information please contact the ADRC of the North at 1-866-663-3607.



It's not the hard part of caregiving!

When someone you love needs care, it's natural to want to be the one to provide it. But when caregiving becomes difficult, talking with people who understand can help. Find support by joining the **Family Caregiver Call-In**. You'll talk with caregivers and experts who share resources that can help you better care for your loved one – and yourself.

Family Caregiver Call-In.

**It's FREE, available statewide,
and easy to participate.**

Step 1: Call 1 (877) 416-7083 to reserve your spot on the call and to get the call-in phone number

Step 2: Dial in on the 2nd Tuesday of each month from 1:00pm - 2:30 pm.

**For more information,
contact Lynn Scheinoha at the
ADRC of the Lakeshore 1-877-416-7083**

**For additional Bayfield County caregiver support
programs, contact
Ann Marie Mackin at the ADRC of the North
1-866-663-3607 Ext. 224.**



What do all the terms mean?

In our day-to-day lives we are exposed to numerous terms, abbreviations & acronyms - not to mention an entirely new "language" if you text. It's often challenging to understand all the terms that are thrown at us daily. Professionals use a variety of terms and sometimes forget that not everyone knows the meaning. The following list is a sampling of some of the most frequently used terms and acronyms related to caregiving.

ADRC (Aging and Disability Resource Center) According to the Wisconsin Department of Health Services, "ADRCs are the first place to go to get accurate, unbiased information on all aspects of life related to aging or living with a disability. ADRCs are friendly, welcoming places where anyone -- individuals, concerned families or friends, or professionals working with issues related to aging or disabilities -- can go for information specifically tailored to their situation. The ADRC provides information on a broad range of programs and services, helps people understand the various long term care options available to them, helps people apply for programs and benefits, and serves as the access point for publicly-funded long term care."

ADLs (Activities of Daily Living) Activities of Daily Living include dressing, bathing, and eating and all the necessary activities required to function on a daily basis such as cooking meals, managing finances and completing housework.

Adult Day Care An Adult Day Care facility provides services during business hours Monday through Friday in a group setting. A variety of activities are provided for socialization, physical and mental stimulation. Utilizing an Adult Day Care is a great way for you, the caregiver, to take some time for yourself and have peace of mind that your loved one is safe, engaged and cared for.

Advance Directives An advance directive is a legal document that allows you to communicate your health care wishes. The advance directives used in Wisconsin are the Power of Attorney for Health Care and the Living Will. Both are excellent documents to complete. They allow you to "speak for yourself" and allow your wishes to be known in the event you are no longer able to.

CBRF (Community Based Residential Facility) CBRFs are staffed group living settings that provide room, board, supervision and other supportive services to 5 or more adult residents. They are intended for people who cannot live alone but do not require a nursing home level of care.

MOW (Home Delivered Meals or Meals on Wheels) This service delivers hot, nutritious meals to people who are homebound. A great way to get the nutrients both you and your loved one needs without having to take the time to prepare the meals. Many people are surprised by how good these meals really are!

Respite or Respite Care Respite care provides a temporary break from the responsibilities of caregiving. Respite care is provided in-home, at Adult Day Care centers or in a care facility (such as a CBRF). It benefits both you the caregiver and your loved one. By taking some time for yourself, you are able to recharge.

SNF (pronounced "sniff" - Skilled Nursing Facility) Also known as nursing homes or long term care facilities, these facilities provide medical care to persons who reside in them. Most provide both short term (rehabilitative) and long term care and are staffed with Registered Nurses, Certified Nursing Assistants, Physical, Occupational and Speech Therapies.

Supportive Home Care. Supportive home care provides in-home non-medical care. Services include (but are not limited to) housekeeping, meal preparation, companionship and assistance with personal cares. Utilizing supportive home is a great way for caregivers to run errands and keep their own medical appointments.

So many programs, services and resources are available to assist on your caregiving journey. If you would like to meet with someone to discuss services and options that can assist you, please call the Aging and Disability Resource Center of the North at **1-866-663-3607**

We'd love to hear from you!



Hours of operation:
8:00-4:00 Monday through Friday
Phone Number: **1-866-663-3607**

Visit the ADRC office:
117 E 5th Street ~ Washburn, WI 54891
Appointments are not necessary, but are helpful.

Website: www.adrc-n-wi.org
Email: ADRC@bayfieldcounty.org

Bayfield County Extension Office
U.S. Department of Agriculture
Cooperative Extension Service
Courthouse, P.O. Box 218
Washburn, WI 54891

NONPROFIT
U.S. POSTAGE
PAID
PERMIT NO. 28
WASHBURN, WI

Change Service Requested



Hours of operation:

8:00-4:00 Monday through Friday

Phone Number:

1-866-663-3607

Visit the ADRC office:

117 E 5th Street

Washburn, WI 54891

Appointments are not necessary, but are helpful.

Website: www.adrc-n-wi.org



University of Wisconsin-Extension

Bayfield County – UW Extension

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Washburn, WI 54891

Phone: 715-373-6104

Fax: 715-373-6304

Office hours 8 AM – 4 PM.: Monday – Friday

Website: <http://bayfield.uwex.edu/>

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