

URBAN AGING NEWS

Urban Aging L3C

FREE

Issue 6 | Fall/Winter 2016

Info, Insight & Inspiration for Metro Detroit's Maturing Adults

It's That Time Again!



Ring in the season: Seniors from the tri-county area attending Senior Power Days on Belle Isle agreed to help Urban Aging News ring in the holiday season by donning Santa hats at a recent Senior Power Days on Belle Isle event. The activities, open to all seniors in Wayne, Oakland and Macomb counties, are sponsored by the Michigan Department of Natural Resources and continue through Dec. 14. For more information, contact Stephanie Donaldson at steplenora@aol.com or 313.478.8257.

CONSIDER APPLYING FOR THE MEDIGAP SUBSIDY



Medigap is additional health insurance Medicare beneficiaries purchase from a private company to pay health care costs not covered by Medicare.

Coverage includes co-payments, deductibles and health care if you travel outside the United States generally covered under Medigap policies. However, it does not cover long-term care, stays in a nursing facility, nor dental or vision care.

If qualified, individuals can pay slightly less for this coverage through the Michigan Medigap Subsidy program. The program pays part of the monthly premium cost and the enrollee pays the rest. It is available to those with an annual income at or below \$17,820 for an individual and \$24,030 for a couple.

The subsidy is paid direct-

ly to participating insurers, which currently include Blue Cross Blue Shield, Blue Care Network, United Healthcare AARP Medicare Supplement and Priority Health. Check with your Medigap insurance provider to see if it has joined the subsidy program.

Enrollment runs through Dec. 15. Residents must re-apply each year. The monthly subsidy is \$40 for people age 65 to 75, \$65 for those 76 and up and \$125 for people under 65 with a disability.

To apply, visit www.michiganmedigapsubsidy.com, or call 1.866.824.9772 Monday through Friday from 8 a.m. to 6 p.m.; ask for an application, fill it out and send it back. ■

For more help, call your local Area Agency on Aging or the Medicare-Medicaid Assistance Program.

ANNUAL OPEN ENROLLMENT RESEARCH WORTH THE 'HEADACHE'



Donna Shellman
Regional Medicaid and
Medicare Assistance Plan
(MMAP) coordinator

With 76 options to consider when evaluating Medicare plans, it's no wonder most enrollees choose to keep their existing plan and avoid the headache of re-evaluation.

"If you need help evaluating all of the options, there are people to help you," says Donna Shellman, regional Medicaid and Medicare Assistance Plan (MMAP) coordinator. "Utilize the MMAP counselors! They are trained to help you sort through your options."

They don't make the decision for you, but they help you to narrow your options down to a few plans using the Medicare Finder tool at Medicare.gov.

Shellman says staying with last year's plan to avoid the research could be a costly mistake. "Premiums, co-pay-

ments, or the medications covered can change from year-to-year even if you stay with the same plan." ■

During this time period, those with Medicare can:

- Enroll in or switch their Medicare Part D Prescription Drug Plan. If you are not happy with your current plan, this is a good time to review options and make changes.

The plans are sold and managed by private companies and vary in terms of monthly premiums, annual deductions, drugs covered and prescription costs;

- Change from original Medicare to a Medicare Advantage Plan or switch back from a Medicare Advantage Plan;

- Switch Medicare Advantage plans.

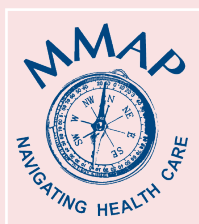
The annual Medicare Coordinated Election period, or more commonly known as Medicare Open Enrollment, continues through Dec. 7. Plans take effect Jan. 1, 2017.

For assistance sorting out the options, call MMAP at 1.800.803.7174 to be connected to a counselor in your community. Assistance is free for those with Medicare, their families and caregivers.

THE MEDICARE SHOPPING SEASON HAS BEGUN



Jo Murphy
Executive Director
of the Michigan Medicare/
Medicaid Assistance Program



Each year from Oct. 15 – Dec. 7, Medicare beneficiaries have the opportunity to enroll in a prescription drug plan for the new calendar year.

While individuals may stay with their current plan, the Michigan Medicare/Medicaid Assistance Program (MMAP) recommends reviewing options before making a decision.

Jo Murphy, MMAP executive director, wants people in Michigan to know, “This is the time to plan for your 2017 health care coverage.

In Michigan we have:

- 21 stand-alone prescription drug plans (premiums range from \$14.60 - \$124.80);
- 121 Medicare Advantage Plans (103 include Medicare prescription coverage);
- Six Medicare Special Needs Plans;
- Seven MI Health Link Plans;
- 20 PACE (Programs of All-inclusive Care for the Elderly) Plans;
- Veterans may have a Medicare drug plan to cover drugs not provided by the Veteran’s Administration and still get their basic medications from the VA.

“MMAP has counselors that can help narrow down the large number of choices to the ones that will meet an individual’s personal preferences or needs. We want to help people make informed decisions,” Murphy said.

Each year, insurance companies can change their benefits. It is important peo-

ple with Medicare not only consider the price of their monthly premium, but also the plan formulary (drug list). Make sure prescriptions you take will still be covered and if there are any restrictions, like requiring prior authorization, quantity limits or step therapy.

Other considerations include the pharmacy you prefer, if you want the mail order option and whether you can get your prescriptions while traveling.

Many shoppers only look at the monthly premium, but others prefer plans that don’t have an annual deductible before their cover-

age begins, Murphy said. Some people want a plan that provides coverage in the “gap/doughnut hole.”

Low-income individuals may qualify for “extra help” paying for premiums and co-pays. For more information, contact the Social Security Administration.

To review the new 2017 Medicare prescription drug plans, visit www.medicare.gov and use the Plan Finder to compare options or call 1.800.Medicare, 1.800.633.4227, for telephone assistance.

Continued on next page

URBAN AGING NEWS

UAN is a free publication circulated throughout metro-Detroit.

For advertising, editorial contributions or distribution site requests, call (313) 204-5140.

Publisher.....Patricia Ann Rencher

EditorDebra Pascoe

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**The Medicare Shopping
Season has begun**
By Jo Murphy
Continued from page 3

Those seeking local assistance can call MMAP at 1.800.803.7174 and talk with a counselor who can assist with the research necessary to make an informed decision.



Now is the time to begin shopping. Early enrollment guarantees coverage Jan. 1, 2017 and makes the winter holidays simpler with this task crossed off your list.

Those needing help finding a Market Place Plan can visit www.enrollmichigan.org. This free service is funded by grants from the U.S. Department of Health & Human Services, the Administration for Community Living, the Michigan Department of Health and Human Services, the Michigan Health Endowment Fund and the Michigan Aging and Adult Services Agency. ■

MMAP does not receive funding from, nor is it affiliated with, any insurance company.



Have Questions About 2017 Medicare Plans?

Call 1-800-803-7174 to be connected with a local Michigan Medicare/Medicade assistance program. MMAP, Inc. is a free health-benefit counseling service provided to Michigan residents. Its goal is to help Michigan's Medicare beneficiaries find their way through the health benefits maze.

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USE HOLIDAY VISITS FOR WELFARE CHECKS

It's all in the approach

By Debra Pascoe
Editor

Ask, don't tell.

That's the key to ensuring the safety of loved ones during the holidays and year-round, so says Amanda M. Rist, RN, BSN and coordinator of the Injury Prevention/Outreach for Trauma/Surgical Services at the University of Kentucky.

"It's not shaking your finger and saying you have to do this," she said. "It's involving them in the process and getting their opinion."

While Rist says seniors know their limitations – be they physical mobility, vision im-

pairments or cognitive blips – they don't want to be ordered around. Asking for help can be difficult, she said, adding offering assistance is the best approach.

Don't push your way into their home laden with brightly wrapped holiday gifts and start ordering them to remove rugs that can be a tripping hazard, have grab bars installed in the bathroom or check the expiration dates on food products.

"The elderly are not typically receptive due to personal experience," Rist said, adding the help may be construed as intrusive. "There is a certain way to approach it. If they ask for help they may see it as a sign of potential loss of independence."

Continued on page 6



DON'T FORGET TO INCLUDE ELDER LOVED ONES

By Debra Pascoe
Editor

The holiday season isn't just for children. The big kids want to play, too.

And the best way to get those bigger kids motivated is by taking advantage of a grandparent's love for the grandchildren, according to Amanda M. Rist RN, BSN and coordinator of the Injury Prevention/Outreach for Trauma/Surgical Services at the University of Kentucky.

Inviting the grandparents – or any elderly person – to attend a school play or choir performance is a great way to get them excited about the season and out of the house.

"I think every grandparent wants to be a part of their grandkid's life," Rist said. "They'd be more excited about that rather than going to the store with you."

Rist suggested taking your elder loved ones along when the children make their annual pilgrimage to see Santa. You may also both get some holiday shopping done, too.

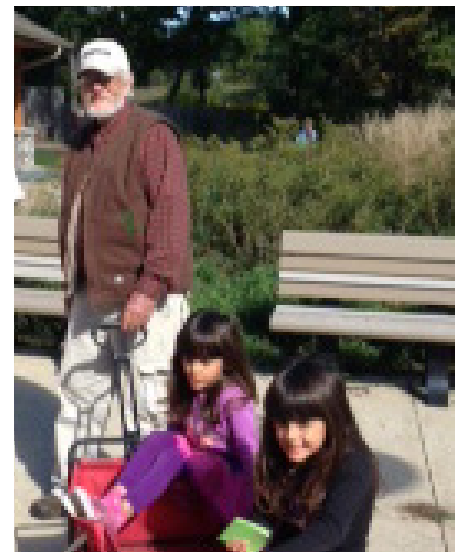
But remember, for the elderly, shopping to you drop is no fun.

Rather than dealing with crowds at the local mall, peruse the weekly newspaper or online advertisements together, Rist said.

"The holidays are also a good opportunity to think about others by participating in activities like singing carols at a nursing home or assisted living center or even serving a meal to those in a homeless shelter," she said.

And if you meet resistance?

"Just tell them, 'We want you to be a part of the holidays. What can we do for you to make it easier?'" she said. ■



Fred Sheer enjoys his granddaughters, Sophia and Lilly Scheer, all of Allenton, and a beautiful day at the annual Fall for Nature Craft Show at Stony Creek Nature Center. He even got some exercise toting the girls around the exhibits in their wagon.

Holiday Welfare Checks
Continued from page 5

"Pose it as a question. Don't tell them what to do, but give them options and give them the facts. They are adults and they are independent and they should be allowed to make their own decisions. But make it an informed decision."

Rist suggests letting your loved ones know you want to help because you care and are concerned about their well-being. Tell them why that throw rug is a hazard. Explain if they fall, they could potentially lessen their independence.

"Quality of life can be lost," she said. "It's better to be proactive than reactive."

And while Rist suggests family members and caregivers give their loved one's dwelling an annual once-over to identify potential problems, such as a loose step, general welfare checks should be done when the opportunity presents.

Use that holiday visit or a shopping trip as an opportunity to check for expired food in the fridge, verifying medications are properly labeled and daily pill storage boxes are filled.

Ask if and how you can help.

Don't tell.

WHEN A WINDOW OPENS, DON'T JUMP OUT



By Debra Pascoe
Editor

and I had a dozen questions for her, not so much about the publication per se, but about my own aging parents.

Kismet or just luck?

The more I learned about Pat and her mission to support and educate caregivers and older adults, the more excited I became about this opportunity. It gave me access to her vault of information, her fabulous credentials and the ability to learn alongside other caregivers.

quickly declined.

Good often comes from bad

It's no secret I am not my father's favorite. I have "a big mouth," I have been told for 54 years. True. But for a short time, I think I was higher on the list. I became his advocate when he entered rehab after the first seizure. I listened to him; I took notes on a grocery receipt that later became known as "Dad's list of demands." The first? "I wanna see my cat." Done. The rest of the list? Ninety percent accomplished.

I was out of journalism for three years and I missed it badly.

Then came an email from Urban Aging News publisher Patricia Rencher.

Pat told me of this publication

I had at best a working knowledge of the toll aging takes on us and our loved ones. But I had to learn fast after my father had a stroke and my mother's health worsened due to the stress. The stroke was followed by a series of seizures and dad's health

But what better than being almost No. 1 was when his real No. 1 returned.

Continued on page 14

URBAN AGING NEWS

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CARE ACT RECOGNIZES, SUPPORTS CAREGIVERS



‘By teaching caregivers about patient needs at home, what to do and what to watch out for, patients will be safer at home.’

Shawn Bennis, RN
Henry Ford Health System
Family Caregiver Coordinator

If you are one of approximately 2 million family caregivers in Michigan, you'll be happy to know it has become the 25th state to adopt legislation providing much-needed recognition of and support for family caregivers.

Under the Caregiver Advise, Record, Enable-or CARE Act -hospitals are now obligated to provide basic information, instructions and training to identified family caregivers when their loved ones are hospitalized and as they transition home.

Hospitals must now:

- Provide patients with an option to designate a family caregiver on medical records upon admission;
- Notify that person if the loved one is being discharged to another facility or back home;
- Explain medical tasks and give caregivers the option of instruction and a demonstration of those tasks.

“By teaching caregivers about patient needs at home, what to do and what to watch out for, patients will be safer at home,” says Shawn Bennis, R.N., Henry Ford Health System’s family caregiver coordinator. “No one is at their best when in the hospital. Having another set of eyes and ears when instructions are given helps alleviate uncertainty that often arises when the patient is back home.

“The law will ensure that hospital staff will include the caregiver when giving discharge instructions.”

Bennis says instructions and education to caregivers can be provided in person or over the phone.

“While HIPAA requires us to keep information private, when the patient names their caregiver, the hospital staff is able to share relevant medical information with that person. Hospital staff will only share what is necessary to continue care at home,” adds Bennis. ■

Free CARE Act wallet cards for caregivers and care recipients are available for downloading at https://action.aarp.org/site/SSurvey.jsessionid=1C-2D1E13EF63825B6CADB3BC7946AA97.app267b?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=42996.

Mail requests to: 309 Washington Square #110
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MAKE VISITING A CAREGIVER SUPPORT GROUP A NEW YEAR'S RESOLUTION



Marilyn J. Lawson
Family Caregiver
Consultant

Caregivers need support and information and the easiest way to get both is by meeting experienced caregivers at a caregiver support group.

"Many people think caregiver support groups are either 'crying or ranting sessions'. There's some of that, but sessions are mostly about learning and sharing information. It's probably the easiest and fastest way to get educated about local resources," says Marilyn Lawson, owner of Elder Care and Caregiver Solutions, L3C.

"It's an opportunity to gain new insights as others talk about their experience as well as the wealth of information that group lead-

ers bring. Typically, there's no charge and support groups can range from disease-specific to dial-in if you don't or can't travel," she adds.

Lawson's company specializes in long term care Administration and was established to educate families about resources available to the elderly and their family caregivers. ECS provides case management services, facilitates caregiver support groups, makes group presentations, and facilitates "reminiscence and recall sessions" to help families create legacy booklets.

Lawson can be reached at 313.289.9672 or email EldercareSolutions@outlook.com. The following non-exhaustive list offers a few area elder care support groups. Check with your loved one's doctor's office or a disease-specific organization for more support group listings.

New Evening Dial-In Support Group.

Meets the fourth Wednesday of the month from 6 – 7 p.m. To register or for more information, call 800.272.3900.

For dementia patients and their caregivers:

Bloomfield Township Senior Service

Second Monday of the month from 2–3:30 p.m.
For more information, call 248.723.3530.

Beaumont Health Botsford Campus

Mondays from 6–7:30 p.m.
For more information, 248.471.8776.

For general caregiving:

Henry Ford Macomb Hospital Medical Pavilion
Fridays from 10:30 a.m.

12:00 p.m., Room 10 on the Fourth Floor.
For more information, call 586.263.2237.

Henry Ford Health System St. Clair Shores

Meets monthly Monday evenings.
For more information, call Shawn Bennis, 313.874.4838.

Westminister Church of Detroit Campus

2nd Monday of the month at 1 p.m. and 6 p.m.
The church is located at 17567 Hubbell at West Outer Dr., Detroit.



Paula Duren, PhD, of Universal Dementia Care, facilitates the "Caregiving is More than a Notion" lunch and learn seminar at Crowell Recreation Center where caregivers share strategies and learn tools for caring for their loved ones with dementia. An upcoming session is scheduled for Wednesday, Nov. 9 at the Farewell Recreation Center, 2711 Outer Drive, Detroit. For details, visit universaldementia.org. Attendance is free, but an RSVP is required. Call 248.509-4387 or email info@universaldementia.org.

DON'T FIGHT, MEDIATE



"Elder Mediation," according to program director Antonia Harbin, J.D., "is also a valuable tool to reduce the chances of elder abuse and neglect."

"It is an extremely useful tool to avoid the costly, intrusive legal system and focuses on current matters rather than issues of the past," Harbin said.

"to-do list" for each individual participant, making it easier to proceed with next steps and future decision-making.



When family conflict jeopardizes the dignity, well-being and even the safety of your elder loved, consider Elder Mediation.

Provided by the Great Lakes Legal-Elder Mediation depart-

ment, families can now utilize this advanced area of mediation that focuses on protecting the older adult by resolving conflict between their family, their caregivers, or their care team when communication becomes difficult.

The mediation process is facilitated by a neutral conflict resolution expert who helps families identify decision-making strategies. At the end of mediation, an agreement is drawn up to include a task and

Fees are set at a reduced rate based on the older adult's income. Fees can be divided among the participating parties.

To learn more, call: 313.937.8282. ■

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HOLIDAYS A GOOD TIME TO CHECK LOVED ONE'S SAFETY, WELL-BEING

**By Jennifer Lacasse,
R.N., B.S.W**

It's that time of year. The holidays are approaching and we look forward to visiting parents, grandparents and extended family, especially if we live far away.

Many of our visits will be with older loved ones in their homes. This is the perfect time to observe and look in on our aging family members to ensure their safety and well-being is stable.

One way is to see your loved one is getting the proper mental and physical treatment by having them observed by a geriatrician.

Geriatrics differs from standard adult medicine because it focuses on the unique needs of older adults. Often, because geriatricians are in short supply, primary care doctors treating older adults may sometimes have a hard time distinguishing between disease and the impact of normal aging.

Doctors specializing in geriat-

ric medicine evaluate changes in the patient's daily function, including appetite, weight loss, medications, memory, mood, hygiene and increased difficulty managing food preparation, grocery shopping, driving and disorganization and an inability to manage the care of their home.

The staffs at Beaumont Hospital, Grosse Pointe and Royal Oak consist of board-certified physicians, nurses and social workers who specialize in treating specific problems related to older adults. Evaluations are partially covered by insurance, but a flexible payment plan is available.

Beaumont Geriatric Centers, with the referral from a primary care physician, can conduct a thorough three-day evaluation to determine an older adult's mental and physical state.

Information gathered through the assessment is communicated to the referring physician with recommendations for further medical care.

Dr. Christine Chelladurai D.O., a board certified, fellowship

trained geriatrician and internal medicine doctor, heads the Beaumont Geriatric Evaluation Center, 23715 Little Mack, Suite 100, in St. Clair Shores. She is also medical director of ShorePointe Nursing Center, also in St. Clair Shores.

The evaluation center takes a team-oriented approach, is a primary care partner and has an RN social worker on staff.

Visits are covered by Medicare and most additional insurance plans.

Appointments can be made for new patients within 30 days and evaluations are scheduled Mondays and Fridays. Call at 586.447.8021 Monday through Friday to set up an appointment.

We wish you and your loved ones a safe and happy holiday season! ■

Lacasse is a geriatric clinical nurse specialist for Beaumont hospitals and works at the Beaumont Geriatric Center.



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2017: MAKE BRAIN HEALTH A PRIORITY

By Dr. Shelytia Cocroft

The holiday season is a time of great joy and celebration with friends and family. It can also be a great opportunity to step back and think about improving your health and well-being.

An important step is increasing awareness of brain health and healthy brain behaviors. While maintaining brain health is of concern to the older population, research suggests older African Americans should make it a priority.

The prevalence rates for cognitive impairment and dementia

- Alzheimer's disease in particular - are higher among African Americans.

As we celebrate, encourage friends and family to join you in making brain health a holiday tradition. Check with a doctor before making any changes to diet or physical activity levels.

1. Work your brain and body

Take time each day to exercise your brain and body. List-making, word puzzles and reading are great ways to train your brain. If possible, and weather permitting, take a walk.

Walking gets circulation going and is a wonderful stress reliever. If walking is not an

option, put on your favorite music and move to the beat as you do household chores.

2. Eat healthy

Include vegetables and fruits in holiday menus. Green, leafy vegetables, like spinach and greens, and fresh fruits are delicious additions. Baking and broiling are the healthiest ways to prepare food and consider options other than salt for adding flavor.

3. Sleep well

The holidays can be a stressful time, so try to get 5 to 7 hours of uninterrupted sleep per night for optimal brain health. If changes in sleep habits are noted, contact your doctor immediately.

4. Socialize

Human contact is good for the brain, body and spirit, so stay connected. Take a walk with a friend, organize a family game night or volunteer at church or local community center. ■

Dr. Shelytia Cocroft earned her Ph.D. in Medical Sociology from Wayne State University. Her research area is brain health in the African American community. Her dissertation research, "Cognitive Health and African American Elders Study: Knowledge, Attitudes and Practices" was funded by the National Institutes of Health.

SENIOR GIFT IDEAS

Shopping can seem a daunting task for seniors who seem to have everything.

But there are a number of ideas that can make your elderly loved one safe, warm, active and happy. The following is a list of suggestions offered by DailyCaring, a website dedicated to providing “practical tips for families caring for older adults.”

- Heated blankets can keep them warm as well as ease aching joints;
- Adaptive shoes, slippers and clothing can be found online;
- Themed canes;
- GPS devices;
- Roller walkers;
- Purchase a simple CD player and add CDs of their favorite music;
- Coloring books keep them creative.

For those with Dementia:

- Adaptive utensils to make cooking and eating less cumbersome;
- Fiddle cushions give restless hands something to do;
- Stuffed animals offer comfort and can become a pet.

Give the gift of time. Here are a few projects to get started:

- Make simple fixes around their home to ensure safety;
- Add a no-install grab bar where help is needed;
- Customize their I-phone case with artwork Perhaps provided by the grandchildren;
- Turn the fridge into a photo wall using magnetic frames;
- Create a custom photo blanket using online resource.



Dementia Fiddle Cushions

Dementia fiddle cushions are great sensory items for residents living with dementia. They can often help people focus, relax and promote a sense of well-being.



SPEAK UP!

Call APS Day or Night

If you suspect abuse, exploitation or self-neglect, Adult Protective Services staff will investigate allegations within 24 hours.



855-444-3911

Continued from page 6

My sister was estranged from my parents for many years—not without good reason. I told her about dad's health and she was in a quandary. Should she visit? I told her, "What's the worst that can happen? He kicks you out."

He and my mother embraced her and she and her husband are now mom's BFF's and dad's No. 2 and No. 3 caregivers.

Live and learn

Had I known Pat then, the process would have been easier. We may have entered into family mediation (see related story in this issue) and I would have known what to do and what to ask those in charge of my dad's well-being.

I am happy to say he has been seizure free for a long time (I can't say how long—mom's superstitious.)

Join me on this road to better caregiving and access to the best services available to ourselves and our loved ones.

Even better, purchase a subscription to Urban Aging News for yourself, your loved one and those that care for him or her.

I am. That's two off my list. Best of the holiday season to you and yours.

Debra Pascoe is the editor of Urban Aging News and welcomes your feedback. If you have a story idea, email us at urbanagingnews@yahoo.com.



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November 5, 2017
Locations: TBD



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www.detroitcaregiversupport.com
For exhibit table info, call: 313.204-5140

NEWS BRIEFS



The Detroit Historical Society, through its Detroit 67: Looking Back to MOVE FORWARD community engagement project, seeks diverse voices to share their recollections of the 1967 Detroit Riots. Interested parties can request a one-on-one interview online at Detroit1967.org, or by calling the project hotline at 313.885.1967.

Illinois-based Oak Street Health, which specializes in serving patients with Medicare coverage, is opening two clinics in Michigan. They are located at 18610 Fenkell in Rosedale Park and 13667 Eureka Road in Southgate. For more information, call 313.723.0000.

Senior Thursdays @ DIA @ 1 p.m. The first Thursday of the month features a guided gallery tour; the second a talk; the third an art-making activity; and the fourth a film. In months with a fifth Thursday, a second gallery tour is offered. Free admission and free bus transportation can be provided for groups of 25 or more. For details: call 313.833.1292 or email: GroupRequests@dia.org. Reservations are not required for individuals.

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Lend a hand

If you or someone you know would make an excellent health advocate for seniors, join the Seniors Helping Seniors program. Training and a stipend are provided. Leave your name and number for Janice Burnett at: 313.833.7080.



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Tackling Everyday Issues for Seniors and Their Caregivers...
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Every Saturday, 10:00 a.m. to 11:00 a.m. on WCHB 1200 AM
Hosted by Paul Bridgewater
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