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for Seniors and
Their Caregivers...
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Hosted by Paul Bridgewater

President & CEO, Detroit Area Agency on Aging



Detroit Area Agency on Aging

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Personal Tragedy Becomes Professional Mission

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The mission of Urban Aging News (UAN) is to gently nudge, motivate and to inspire older adults, their adult children and all of metro-Detroit families to plan for the inevitable challenges of aging. The vision of UAN is that all families are prepared for their mental and physical aging through planning and informed decision making.

The only way that will happen is if spouses, adult children, clergy and others encourage families to find the courage to hold some difficult conversations with their loved ones so that older adults can age in dignity and with choice. And so families can remain intact. I've seen far too many families destroyed simply because the older adult parents didn't find it necessary to plan, to write things down and to make sure everybody knew their wishes. Fail to plan; plan to fail!

The holidays are a perfect time to start some of these difficult conversations: Do they have the essential financial and healthcare legal documents? Where are their papers? Have they considered asset protection?

While you're at it, find the courage to ask some of the really tough questions regarding end-of-life issues. What are their wishes? What's the plan in case of infirmity or incapacitation? If they've identified a caregiver, does the individual know—and would they know what

they are agreeing to? (The articles in this edition of UAN are designed to help you with these challenging inquiries.) It's also a good time to observe any physical or mental decline. How are they managing? Are they slowing down? Do they appear to need help or assistance? Is there any self-neglect? Cognition decline? Pay attention. Your goal is to determine if they need help now or in the near future.

Your reading UAN will arm you with the knowledge of programs, resources and tools to enhance your older adult loved ones' ability to live independently for as long as possible. If it looks like they need to find a more aging-friendly residence, UAN will help you to discover that also. Be sure and read the story about estate salesman Bernard Davis who is a master at downsizing homes.

It is my hope that through the contents of UAN your family will be more informed and more inclined to be proactive and to avoid the challenges my family experienced. Trust me, it's no fun when you're loved one gets sick and there's no plan. ■

Peace & Blessings,
Pat

Patricia Ann Rencher,
Publisher
urbanagingnews@yahoo.com

URBAN AGING NEWS

Urban Aging News

Issue 2 | Fall/Winter 2015



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

*The best gift ever.....
Advance Planning*

**Downsizing
Doesn't Have to Be
Overwhelming**

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Curb to Curb Service

Low cost medical transportation service to several metro-Detroit communities is provided by the Detroit Area Agency on Aging (DAAA) for Detroit residents at least 60 years old or disabled. Rides run Monday through Friday 8:00 a.m. to 6:00 p.m. and Saturdays 8:00 a.m. to 4:00 p.m. For \$2.50 each way riders may use the service for medical, dental and therapy appointments or pharmacy visits. First time users must register with DAAA at least three (3) working days prior to service. After that, one (1) day's notice is required. Rides can be shared with other customers (i.e. two people riding in the same vehicle). The service excludes emergency or urgent care rides. Call 911! Curb to Curb is made possible by a grant from the Detroit Department of Transportation and the Federal Transportation Authority. ■

DIABETES MANAGEMENT

- INVASIVE GLUCOSE MONITORING
- HBA1C TEST
- NON-INVASIVE GLUCOSE MONITORING
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Patterned after the Stanford Diabetes Self-Management Program, the Diabetes PATH (Personal Action Toward Health) is a workshop for adults with type 2 diabetes, their family, friends and caregivers. For 2 ½ hours a week for 6 weeks, trained

leaders guide the free sessions. The program covers many things about Diabetes, but what you will really learn are ways to manage the disease by finding solutions to obstacles through problem-solving, informed decision making and group

Managing Diabetes with PATH

interaction. Participants will also learn to be more independent, communicate with their health care team and how to continue to do the things they like to do. For more information, call 517-886-1029, or visit: greatatanyagemi.com. ■



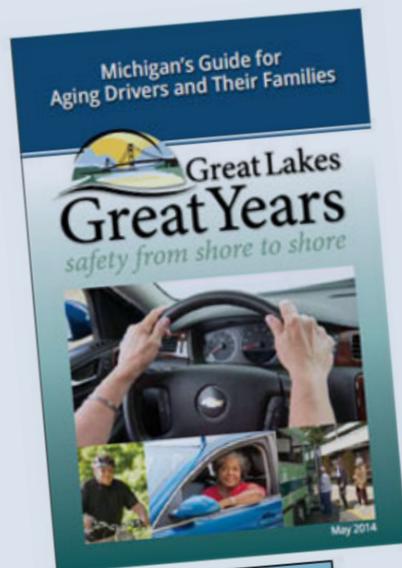
FREE Elder Legal Services

"First Tuesdays" is a service of the Elder Law and Advocacy Center (ELAC) offering free workshops monthly for seniors and people caring for seniors at the Redford Community Center. Elder law attorneys provide guidance on guardianship,

conservatorship, wills, trusts, senior housing, powers of attorney, Medicaid or Medicare benefits and more. For information, call 313-937-8291.

Can't make Tuesdays? ELAC, in partnership with the Free Legal Aid Clinic and the Hannan Foundation, provides free legal consultations to Wayne County residents, 60 years or older, at Detroit's Hannan House in Midtown. One-on-one meetings with an attorney are held every month between 10:00 am and 1:00 p.m. Appointments required, call (313) 833-1300, ext. 32. Contact ELAC for additional times and locations. ■

Before Taking The Keys...



Download PDF

If your family is being met with strong opposition by suggesting that an elderly loved one give up their car keys, Michigan's Guide for Aging Drivers and Their Families offers helpful tips. The guide helps readers to observe the older adult's driving abilities, gives signs and symptoms indicating driving problems and assists families in understanding the meaning of driving from the loved one's perspective. It also provides suggestions on how to begin the driving discussion and how best to talk about appropriate driving choices. There is a list of driving rehabilitation programs and specialists who can determine if a corrected visual, physical, or mental condition may

be affecting one's ability to drive safely. But if you're certain there is an uncorrectable problem, the guide recommends submitting a Driver Evaluation Form (OC-88) or requesting a re-examination of the unsafe driver to the Secretary of State either online or by written letter. Warning: In addition to providing an explanation of why you deem the driver unsafe, you will have to give your full name, address, telephone number and signature. Enlisting the aid of a healthcare provider might prevent a family feud. For the form, visit your Secretary of State or http://www.michigan.gov/documents/mdot/MDOT_OlderDriverGuide_455323_7.pdf. ■



**ALERT:
NEW SENIOR
TELEPHONE SCAM**

At least one Area Agency on Aging office in Michigan reported calls are being made to local seniors with the caller identifying themselves as representative of an Area Agency on Aging. The scam follows with the offer of a \$400 medical alert device for free. The caller will then confirm the senior's personal information (name, address, etc.) and then ask for a credit card number for the \$34 a month monitoring fee for the device. These calls are NOT from an Area Agency on

Aging. Remember: never give your credit card information to anyone calling you. This scam has been reported to the Michigan Office of The Attorney General. If you believe you have received a call like this – or any call that you think may be a scam, please call your local police department's nonemergency number and report it. If you are ever unsure of someone who is calling you, trust your instincts – hang up! ■

Personal Tragedy Becomes Professional Mission

By Patricia Ann Rencher

“Tricia, your mama, she’s sick. She’s not responding. Get over here...Quick!”

That’s how my journey into Aging services began. Mom had kept it a secret that she had Diabetes. After 40-plus years in their home, Mom and Dad had also not downsized, and overnight, the family as I knew it was DISMANTLED. After a series of back-and-forths from the hospital to the rehab center, Mom finally wound up as a permanent resident of a nursing home. At first, Dad and I visited twice daily and after five years in, Dad started to decline. I now had to help navigate them both through the complexity of caring for older adult loved ones ... one in an institution and the other attempting to age-in-place in the non-senior-friendly family home. I knew nothing and nobody, really, that could help. Although I had spent many years in human services, I hadn’t a clue about aging programs, services, resources or tools to facilitate this predicament. Nowhere in my educational experience had I learned about the nuances of aging, elder law, asset protection, the Aging Network, or an Area Agency on Aging.

And, so, like anybody who is confused and sad and overwhelmed, I jumped in and went to work. I first joined the Family Council at the nursing home, and because I made

some seemingly profound statement at my first meeting, an elderly spouse of one of the residents recommended I be president. “Selected,” not elected. I spent a lot of time organizing families and getting management to hear our concerns.

I even brought in speakers to address families on relevant issues. One speaker, Peter Lichtenberg, PhD., director of Wayne State’s Institute of Gerontology, who had done some seminal research on nursing homes, graciously accepted my invitation. He provided a wonderfully compassionate session and we were helped immensely. Like me, most of the families were clueless about the nursing home culture, health care systems and how to support and advocate for our infirmed and aging loved ones.

That meeting with Dr. Lichtenberg led to an 8-year role as the Institute of Gerontology’s community outreach person where I promoted the Healthier Black Elders Center. I took researchers and practitioners to community groups, churches and wherever seniors met to present aging-related issues. I was learning and I was becoming more committed to helping other



Marilyn Lawson (r), of Detroit-based Family Harmony Eldercare & Caregiver Solutions, Inc., and I recently attended the Rosalynn Carter Institute for Caregiving summit at Georgia Southwestern State University. Experiencing caregiving at the age of 12 and beyond inspired Mrs. Carter to establish the Institute to support family and professional caregivers through advocacy, education, research, and service.

families avoid the dreaded call I received from Dad.

While at Wayne, I earned a post-masters Certificate in Gerontology and involved myself in geriatric activism. It wasn’t long before I was ‘unofficially’ practicing geriatric case management as overwhelmed adult children began calling for help. As I learned about the Aging Network and its services, I did my best to connect my ‘clients’ to services. As a result, in 2012, Governor Snyder appointed me to a three-year term to Michigan’s

Commission on Services to the Aging. When that term ended this past July, I was appointed to the Michigan State Advisory Council on Aging for the next three years.

The term on the Commission gave me an invaluable education on State-funded aging programs, Michigan’s plan for its burgeoning older adult population, and a commitment to help families prepare and plan for aging through information and education. Thus, the birth of Urban Aging News!

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AAAs Provide Nursing Home Transitions to Community Living

Your local Area Agency on Aging helps eligible nursing home residents to transition from living in a nursing home back to their homes. Residents of nursing facilities who are currently Medicaid or Medicaid eligible* can also get help if they lost their residence upon entering the nursing home. The program is designed to reduce the barriers for nursing home residents who will need

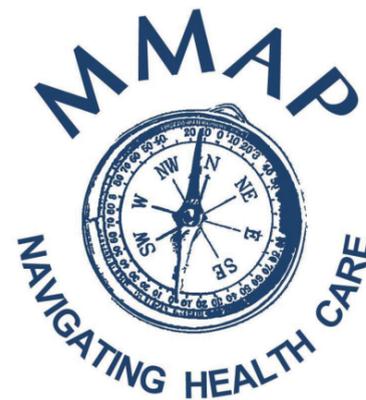
ongoing care services by making community dwellings safe, accessible and sufficiently equipped.

Program participants can move back to their own homes, move in with family members, into an apartment, an assisted living facility or to an adult foster care facility. Counselors help clients to arrange the necessary care, support services and

community resources to address an individual's needs.

Nursing facility residents may request transition services for themselves, or a referral for services may be made by any concerned individual such as a family member, friend or social worker. For more information, ask for the NFITI program when contacting your local Area Agency on Aging.

**Current Medicaid financial eligibility guidelines are \$2199 monthly income for an individual (a spouse income is not computed) and assets of \$2,000 or less (federal spousal impoverishment guidelines applied when considering assets.) ■*



Got Questions? Medicare/Medicaid Assistance (MMAP) Program

Call a MMAP counselor
at
1-800-803-7174



The Medicaid/Medicare Assistance Program (MMAP) works through the Area Agencies on Aging to provide high quality and accessible health benefit information and counseling, supported by a statewide network of unpaid and paid skilled professionals.

Its mission is to educate, counsel and empower Michigan's older adults and individuals with disabilities, and those who serve them, so that they can make informed health benefit decisions.

MMAP Counselors can

provide counseling and/or presentations on the following topics: Medicare, Medicaid, Medicare Supplemental Insurance, Medicare Prescription Drug Coverage, Medicare Health Plan options, Medicare Preventative Benefits, Long Term Care

Insurance, Medicare/Medicaid Fraud and Abuse, and other topics as requested.

Call MMAP's toll-free help line at 1-800-803-7174 to speak to a counselor or to find out about how to become a volunteer MMAP counselor. ■

Alzheimer's and Dementia Especially Hard on Family Caregivers

By Paula Duren, Ph.D.

I was at the gym working out when my telephone rang. It was a store owner in Southfield, MI. He was calling to tell me that Mom

wonderful and difficult journey of caring for both parents who suffered from dementia related diseases.

I remember Mom asking me, "Am I going crazy?" I often imagine how scary it must have been to live in a state of mental confusion. It felt like she was being pulled away from me into a dark place. I had an immediate feeling of helplessness. Thus, I began the journey that taught me how to love in a language my parents could understand. Mom's greatest strength was the ability to hear and minister to your spirit without you saying a word. Of all diseases, Mom couldn't have dementia!

Dementia is a progressive disease that eats away at mental functioning of the brain including memory, language and judgment. My mom was

diagnosed with Alzheimer's (Alzheimer's is a specific type of dementia). After that her changes were more noticeable. By the time we were really aware of Mom's condition the doctor said, "She probably had symptoms for more than three years."

Most people are familiar with Alzheimer's. But there are over 50 different types of dementia! You have a 1-10 chance of developing dementia after age 65. Today, over 5 million people are living with Alzheimer's in the United States. There is currently no cure.

Not only are women more likely to have Alzheimer's, they are also more likely to become caregivers of those with Alzheimer's

It became my only goal to ensure that their last days

were their best days. Little information existed to help me care for their hearts and spirits. I relied on my personal knowledge of them, daily observations and loving connections. I soon learned the language of love for someone with dementia...keeping the human connection and communication going. I began to journal our experiences not realizing it would develop into tools to care for loved ones with dementia.

Caring for someone with dementia can be all consuming. There is no such thing as a typical day. You cook, clean, bathe them, give medication, take them to doctor's visits, ensure that no one takes advantage of them, organize the home to meet their changing needs, feed them, pick up supplies, monitor that nothing negative

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Paula and her mom

was wandering through the store and couldn't remember how to get home. Mom was 84 at the time and one of the most outspoken, engaging, loving and witty people I had ever met. For the next five years, I watched her transition into a lethargic, withdrawn, anxious woman struggling to stay in touch with reality. This moment began an amazingly



If you or an older adult you know could use help in covering the costs of everyday expenses, the National Council on Aging's (NCOA) BenefitsCheckUp helps to qualify financially vulnerable seniors (55+) and adults with disabilities for benefits

that could help them pay for prescription drugs, medical care, food or heat for their homes. 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.

The BenefitsCheckUp questionnaire asks a series of questions and a report is generated that describes the programs that may offer help. The program is free and available online at www.benefitscheckup.org. Don't have access to a computer?

Check your local library or senior center. If you run into problems completing the form or have additional questions, contact NCOA national headquarters at 571-527-3900. ■

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313-836-1700

Omni
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313-571-5555

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695 E. Grand Blvd.
313-925-6655

Regency Heights
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313-533-5002

Sheffield Manor
15311 Schaefer Ave.
313-835-4775

Downsizing Doesn't Have to Be Overwhelming

Estate (law) -
Wikipedia, Everything one owns; all of one's assets (whether real property or personal property) and liabilities.

He's part antiques and art expert, part coach and negotiator and part family therapist. Now in his 15th year, Bernard Davis methodically yet compassionately ushers families through one of life's most difficult experiences: downsizing the family home ... rightfully deserving the reputation of Detroit's premiere estate salesman.

"A key to understanding what possessions mean is recognizing that, knowingly or unknowingly, intentionally or unintentionally, we regard possessions as parts of ourselves" (Belk, 1988, p. 139).

Davis comes to the estate sales business with a background and education in commercial and interior design. With over 500 homes under his belt, Davis and his team have mastered the art of consolidating a lifetime of memories into a well-organized and inviting

experience.

According to Davis, "Breaking down the family home can be a complicated process that brings about lots of emotion and often family feuds. Even if you're an only child, the task of sorting through years of belongings is overwhelming. Using a professional estate sale firm is a quick and fast way to clear out your home without the headache of trying to do it yourself. We coach you through the process."

As UAN digs further into Davis' methods, his talent becomes more evident.

How do you recommend that families begin the process of an estate sale?

I suggest that people do their due diligence. Interview estate sales companies. All are not equal and you'll want to make sure that whoever you chose knows what they are doing, has some experience, and their commission is one you can live with. You'll also want to be sure that they explain their process including what your responsibilities are and what theirs will be.

What is your process?

I meet with the prospective client, determine their goals and together we decide if

what they want to sell is enough to warrant an estate sale. Ideally, we schedule a weekend with enough lead time to allow family members to thoroughly go through their belongings to identify things they want to keep and we sign a contract.

How do people know what to keep and what to sell?

People generally want to keep those things of sentimental value and that makes sense. In some cases, I suggest family members keep items that are rare or may have future value. I have a fine art expert and other experts who can advise on those things. Often, when people are having a hard time deciding what to keep and what to sell, I remind them if they're downsizing, they may want to get rid of most things so that they have money for re-decorating their new place. For those families who are emptying the family home, I encourage them to keep in mind the available space they have in their homes and gently remind them that they might not want to burden their children in the same way.

How does the sale go?

We run sales for an entire weekend. My team generally comes in on Monday or Tuesday of the sale week and organize EVERYTHING. We've got a great system and over a 3 or 4 day period, we've organized the house so that it is appealing to

the shoppers. In addition to advertising on a regional online estate sale site and in the appropriate newspapers, I alert my large following of estate sale enthusiasts who have followed me over the past 15 years. I don't permit families to be present during the sale; it's too emotional and too hard for them. A few days after the sale, along with the check, I provide the client with receipt books identifying each item sold.

Downsizing, then, is often about more than the simple re-positioning of objects. If successfully accomplished, this complex task exemplifies a strategic, adaptive style of aging" (Baltes & Baltes, 1990.)

How do family dynamics come into play?

It's not so much that people have emotional attachments to their belongings but what those belongings represent. If that's the chair you sat in when Mama braided your hair as a child, there's an emotional attachment regardless of the chair being worth a mint. So if there are several siblings and they haven't worked out a plan, there is often confusion. I try and get the siblings to revisit their goal and decide from there. I might even suggest taking the item out of the sale so that one sibling can keep it for themselves or maybe have each of them pick a piece. If there are too



Long-Term Care Insurance: What is it? Do you need it?

By Kim Walsh

It was mid-January when my step father's email arrived. "Mom is not doing well," it began. Mom had chronic congestive heart failure, Parkinson's disease and several lesser ailments. We had just seen her at Christmas! Apparently, they managed Mom's meds so she would be in top form for visits. And he provided daily care while cushioning us from her progressing illness. She was 78. He was 81.

Taking care of one another is common for loved ones. About 80% of all caregivers are unpaid family members or friends. Years of home or employer-based coverage can mask the full cost of basic healthcare. Yet in retirement, seniors may

find themselves on their own for a time, like during policy wait periods or paying down deductibles.

Healthcare is expensive; one budget item that will only rise in retirement. A 65-year-old on average will live another 20 years, with women living about three years longer than men. A 65-year-old couple with median prescription-drug expenses who retired in 2013 will need \$295,000 to have a 75 percent chance of being able to pay all their remaining lifetime medical bills, and \$360,000 for a 90 percent chance, says the Employee Benefit Research Institute (EBRI). Aman and a woman in 2014 only needed about \$116,000 and \$131,000, respectively, thanks to increased drug coverage under the Affordable Care Act. \$4,792 or 14 % of an annual household budget was about right in 2012 per the Kaiser Family Foundation, which is easier to get a mind around. Still, Medicare does not cover vision, hearing, dental care or other expensive incidentals.

Not only are these figures higher than most people have saved or planned to save for

retirement healthcare, they don't include the costs of a potential nursing home stay or prolonged serious illness. **70% of people over 65 will need extended care for some period of time.**

This is Where Long-Term Care Insurance (LTCI) Comes into Play

The phrase "long-term care" refers to the help that people with chronic illnesses, disabilities or other conditions need on a daily basis over an extended period of time. The type of help needed can range from assistance with simple activities, like cooking, to skilled care that's provided by nurses, therapists or other professionals.

Mom's case may not have warranted LTC benefits, but my step father certainly could have used respite help. Mom had, however, put her estate in order through a trust, advance medical directives and do not resuscitate order (DNR). These documents became vital when within the month she fell and never regained consciousness.

70 Million aging baby boomers are at or near retirement.

Many people do not plan for or consider special insurance, believing their spouses or kids will step in. "People always say this, but I don't think they stop to think about what that really means," says, Scott Halliwell, a certified financial planner with USAA. "A long-term care need is typically the result of

cognitive impairment or one's inability to perform two or three of the six activities of daily living (ADL). On the standard list are bathing, control over bodily functions, dressing, eating, getting on and off the toilet, and "transferring"—walking or being able to move oneself between bed and wheelchair." People really need to discuss if they or their extended family will be able to physically or mentally take on these tasks.

Employer-based health coverage will not pay for daily, extended care services, says AARP. Medicare will cover a short stay in a nursing home or a limited amount of at-home care, but only under very strict conditions. To help cover potential long-term care expenses, some people buy LTCI.

And long-term care is pricey. A year in a semi-private room in a nursing home can run \$75,000 a year or almost \$7,000 a month. If you need this care level for long it could break the bank out-of-pocket. The reality is most people would opt to remain in their own home if appropriate care is affordable and available. The good news is unless your condition is permanent or progressively debilitating, the average in-patient stay is only 2-3 years. The thing is, the costs people really need help with beyond medical care, are meal prep, bathing, home chores and errand services. Neither Medicare nor most healthcare policies cover these costs. But LTCI can either help or free

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Long-Term Care Insurance: What is it?

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up other assets to cover these services.

People should plan accordingly based on their own estimates and needs. LTCI policies offer a wide range of coverage options. Since you can't predict what your future long-term care needs will be, you may want to consider a policy with flexible features. Then depending on the terms, LTCI can help you pay for the care you need, whether you are living at home, in assisted living or in a nursing home. The insurance might also pay expenses for adult day care, care coordination and other services. Some policies will even help pay costs associated with modifying your home so you can keep living in it safely.

If you have ample funds, "self-insuring" or paying LTC costs from your own savings and earnings is also possible, particularly if you don't plan to leave assets to heirs. There are also some universal life insurance plans and annuities that incorporate LTCI—these vehicles are designed so your investment is not lost if not needed for LTC—which is one of the fears of investing in such a policy.

What Else Should be Considered? AARP Says:

Your age and health: Policies cost less if purchased when you're younger and in good health. If you're older or have a serious health condition, you may not be able to get coverage, and if you do,

you may have to spend considerably more.

The cost: Will you be able to pay the policy's premiums without breaking your budget? Premiums often increase over time, and your income may go down. If you find yourself unable to afford the premiums, you could lose all the money you've invested in a policy.

Your income: If you have difficulty paying your bills now or are concerned about paying them later, when you may

Long-Term Care

From Wikipedia, the free encyclopedia

Long-Term Care (LTC) is a variety of services which help meet both the medical and non-medical needs of people with a chronic illness or disability who cannot care for themselves for long periods of time.

It is common for long-term care to provide custodial and non-skilled care, such as assisting with normal daily tasks like dressing, feeding, using the bathroom.[1] ... Long-term care can be provided at home, in the community, in assisted living facilities or in nursing homes. Long-term care may be needed by people of any age, although it is a more common need for senior citizens.[2]

have fewer assets, spending thousands of dollars a year for a LTCI policy might not make sense. If your income is low and you have few assets when you need care, you might quickly qualify for Medicaid. (Medicaid pays for nursing home care; in most states it will also cover a limited amount of at-home care.) Unfortunately, to qualify for Medicaid you must first exhaust almost

all your resources and meet Medicaid's other eligibility requirements.

Your support system: Think about whether or not you would want help from friends and family and how much you can reasonably expect from them.

Your savings and investments:

A financial adviser, a lawyer who specializes in elder law or estate planning can advise you about ways to save for future long-term care

you can deduct the value of the premiums from your federal income taxes. The amount of the federal deduction depends on your age. Many states also offer limited tax deductions or credits.

For more information, contact your financial planner, insurance provider, AARP or begin your own research, starting at longtermcare.gov. And by all means set your estate and health matters in order. It will be a welcome gift for your family. ■

LTCI is a complicated issue. Watch for more about this subject, the alternative options and how it can affect your health and pocketbook.

Kim Walsh's career spans the communications realm from publishing, broadcasting, marketing, PR, management and advocacy to all facets of media delivery. She is past chair of the Aging Services Consortium of Detroit, served 16 years on the board of the International Association of Audio Information Services with two terms as president, and grew the Detroit Radio Information Service (DRIS) at WSU for 23 years. She is also past president and Headliner lifetime achievement recipient of the Association for Women in Communications—Detroit.

SHELTER FOR ABUSED, NEGLECTED ELDERS OPENS

What is believed to be Michigan's first shelter program for senior citizens who are abused or victimized was announced this summer by the Jewish Senior Life of Metropolitan Detroit.

The program, offering apartments at Jewish Senior Life's West Bloomfield and Oak Park campuses, is a response to National Center on Elder Abuse statistics that show one in 24 older adults are victims of abuse. An additional study found that nine of 10 abusers are family members. Older adults reported that loss of independence or fear that a family member might go to prison account for the dismal under-reporting.

The Jewish Senior Life program offers 90 days of cost-free living at a furnished apartment. Seniors ages 60 and older may apply, regardless of their faiths, beliefs or residence. Clients are connected to social workers and services during their stay. The program offers independent living, assisted living and skilled nursing care to victims requiring that level of care. Those in need of assistance or information should call (248) 661-0123. ■



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Elder Law Matters: Plan Early or Pay More Later

By Maria Messina, J.D.



Many people believe they do not need an attorney and do not seek legal counsel until a major life event occurs. More often than not, when I meet with a new client in these situations, they discover they are coming in too late and their planning options may be more limited.

What they don't realize is that all of the seemingly benign decisions they have made, or failed to make, about their finances, estate and gifting could hurt them when these major events transpire. They don't realize something as simple as adding an adult child to their checking account so the child can assist them with banking could jeopardize them if they ever need nursing home or other long term care. They are unaware paying a family member to help them with home care, housework, or errands could put their

eligibility for long term care benefits in peril. Many people believe because the IRS allows a certain amount of gifting per year, they are free to do so without consequence. Unfortunately, some Medicaid programs including long term care impose harsh penalties on gifting.

My advice to you: Be proactive. An experienced elder law attorney can help you navigate potential pitfalls. I will occasionally get a call from a client who has just witnessed a friend or family member go through these circumstances and they will see the financial and emotional toll it has taken. They want to make sure they and their family are protected should it ever happen to them. These are some of the most satisfying consultations because while they may not need services at the time, they leave with a clearer picture of

what options are available. They are better prepared when they come back months or years later. We are able to arm them with the knowledge and planning documents to create a long term care plan should it become necessary.

Great Lakes Legal, Inc.—Elder Law Division is a fee-based affiliate of Neighborhood Legal Services Michigan/ Elder Law and Advocacy Center (ELAC). Founded in 1966, ELAC is a free legal services agency offering services to seniors and those that serve them. Great Lakes provides council to clients regardless of age or residency and its fees are charged on a "sliding scale" based on income. If a client is eligible for free services we will direct them to ELAC.

In addition to providing funding and support for the free legal services program, Great Lakes

has had an unanticipated effect of bridging the gap for those who may not qualify for free services but still do not have the means to hire a private attorney.

The cost of proper planning can be far less than the cost of sorting things out later. More importantly, the peace of mind of knowing you, your assets and your family are protected is priceless. To learn more, call Great Lakes Legal, Inc.—Elder Law Division at (313) 937-8291. ■

Attorney Maria Messina serves on the State Bar of Michigan's Elder Law and Disability Rights Section's Council and is a member of the State Bar of Michigan's Probate and Estate Planning Section.

Creating Confident Caregivers®

A program for family members caring for a person with dementia and/or memory loss



About the program -

Creating Confident Caregivers® uses the Savvy Caregiver Program, a university-tested program for family members caring for a loved one with dementia at home. Two-hour sessions are held once a week for six weeks and led by staff trained in the program. Caregivers learn new information, skills and attitudes to manage stress and increase effective caregiving skills.

Classes Offered NO CHARGE

Creating Confident Caregiver workshops meet once a week for six weeks

For information about workshop schedule and locations contact:

Anita Kanakaris @ 313-446-4444, ext. 5841
or by email at kanakaris@daaa1a.org

What's In It For You?

Learn about -

- Dementia and its effects on the brain
- Caregiver resources
- Managing behaviors
- Improving caregiving skills
- How to handle everyday activities more easily
- Taking care of yourself to better care for your loved one



This program is supported, in part, by the U.S. Administration on Aging through its Alzheimer's Disease Supportive Services Program. (#90AE0341) and the Michigan Office of Services to the Aging.

The Area Agency on Aging 1-B has produced the Caregiver Technology Solutions booklet for the digitally-inclined caregiver to communicate and coordinate care for their loved one. The booklet's 47 technologies help caregivers with organizing and tracking care through websites and smartphone applications. Resources include legal planning, financial assistance, health care services, and caregiver health. The publication was made possible by the Michigan Regional Council of Carpenters and Millwrights.

To download a copy, visit: aaa1b.org or daa1a.org.

Alzheimer's and Dementia Especially Hard on Family Caregivers

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gets into their spirit, pay bills, etc., AND, it's not noon yet! Caregiving demands around the clock attention especially as the dementia progresses.

Statistics show that most people with dementia are cared for by a family member at home, typically a single female. Well, I am now another statistic. It became difficult to work a paid job or to focus on my needs. When "free" time became available all I wanted to do was sleep. There was also a tendency to isolate myself because no one seemed to understand. Take it from me, caregiving is the hardest work you will ever love doing.

At the advanced stages of the disease, Mom needed assistance with everything. I came to a place where I was either giving care or thinking of ways to make their care better. I reduced my work hours, spent most nights at Mom's house and made it a point to greet her every day. There were days when I was exhausted both physically and mentally. I read somewhere that caregivers are often the second silent patient. I was, however, able to stop myself from falling into the "no one can take care of Mom like me" syndrome. Eventually, I was blessed to organize a caregiving team to assist with the day-to-day care.

Starting this journey with Mom, I knew that ultimately she was going to die. Mom's final life decision was given to me. After waiting in emergency for 24 hours, I told Mom, who had been non-responsive for two days, I was taking her home—"No one else will poke or stick you again." Mom opened her eyes and said, "I love you!" Five days later Mom died. Dad, suffering from vascular dementia, died 9 months later (which is another story to share).

Until there is a cure, a diagnosis of Alzheimer's rings death. It is important to care for their bodies, but don't forget there is a spirit in them needing attention too. Keep talking to them—hearing is the last sense to leave. Keep giving hugs and holding hands—never let them be touch-deprived. Continue to play those special songs, share pictures—feed the person inside and most of all, know that love transcends all. ■

Dr. Paula Duren is an award-winning psychologist, speaker and author who developed a dementia toolkit entitled, "My Lights Are Going Out, But It's Not Dark In Here." Learn more at pauladuren.com.

Ford Motor Fund Supports Holiday Meals



Pamela Alexander, Ford Motor Company Fund, kicks off the Detroit Holiday Meals on Wheels campaign with a \$40,000 donation to Detroit Area Agency on Aging's President/CEO Paul Bridgewater. The Federal Government funds Meals on Wheels throughout the year; however, funds are not provided for meals on holidays. To ensure seniors receive a holiday meal, you can contribute in two ways: 1) Volunteer to pack or deliver meals on the holiday, or 2) Buy a holiday card or two...which will provide a hot meal on the holiday. For more information, call (313) 446-4444. ■



New State Website Ensures Access To Services, Resources

Michiganders will now have quick and easy access to information on services in their local area through a new

website launched in August: www.michigan.gov/aging.

"The state, in partnership with local aging agencies and service providers, offers numerous high-quality programs and services that can help older adults maintain their independence as they

age," said Kari Sederburg, director of Aging & Adult Services Agency. The state's new website was developed to find these services fast, and learn which agencies can help without having to navigate through multiple government agencies.

The site was created by the Aging & Adult Services Agency (AASA) within the Michigan Department of Health and Human Services (MDHHS) in partnership with the Michigan Department of Management and Budget (DTMB). ■

Downsizing Doesn't Have to Be Overwhelming

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many items that a family can't decide on, even though they have signed a contract, they just might not be emotionally ready and I tell them so.

When do you recommend that interested families contact you?

Downsizing a lifetime of belongings should actually be part of an overall estate plan. At the same time you're putting wills, trusts or healthcare plans together, and you have end-of-life issues in mind, it's the perfect time to start the conversation. That might begin by having some of your collectibles appraised or simply asking your children what items they want. It helps to make a list of your possessions, whether for insurance purposes or future disbursement. You might also include a favorite charity, if say, you wish to donate your older clothing.

What about your actual business schedule?

Warmer months are best for estate sales, and April—September weekends fill up fast, although we have done sales during the winter. If you're thinking about next summer, it would be a good idea to contact me soon. To contact Bernard Davis Estate Sales, call 313.837-1993 or 313.415-7477. ■