



Generations

Area 13 Agency On Aging & Disability

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Holiday Hints for Alzheimer's Caregivers

Medical Scans Explained



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Generations

Area 13 Agency On Aging & Disability

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Volume 64
Fall 2019

Generations, affiliated with Vincennes University, is a not-for-profit agency which serves older adults, individuals with disabilities of all ages and caregivers in the counties of Daviess, Dubois, Greene, Knox, Martin and Pike, without regard to race, national origin, sex, age, religion, disability, and/or sexual orientation by providing resources that foster personal independence while assuring individual dignity and an enhanced quality of life.

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Letter from Generations' Executive Director

Am I the only one who feels guilty about donating to the bell ringer at one store and not another? Years ago, I used to keep ones and quarters in my car and would grab some money as I entered a store to drop in the red bucket. I did it because I was sure the bell ringer was judging me when I didn't put money in their bucket, even though I had put money in the bucket at the store I had just been at. I developed the ritual of keeping cash in my car after Thanksgiving and would give a little bit to each bell ringer. I had a budget and by Christmas the cash in my car would be gone.

Of course, the red buckets are not the only good cause that you can support during the holidays. Between the canned food drives, toy donations, building-a-basket or shoeboxes, there are multiple organizations you can support by giving of your time or making a donation. Even right now, I am feeling guilty that I probably haven't given fair exposure to all of the different groups going above and beyond during the holidays. These groups do good work all year long, but at the holidays, they really try to do that little something extra.

*"We only have two choices:
Do nothing or do something."
Tony Kirwan*

When I was growing up, my family tended to follow what our church did during the holidays. This usually included a visit to the nursing home where we would sing Christmas carols and give gifts to the residents. We would also make cookies and candies and deliver these to various people that my mom thought needed a little something extra during the holidays.

In college, as a member of a sorority, we had specific organizations that we volunteered for every year. We would hold fund raisers during the year to support the charity that our sorority was aligned with and then during the holidays we would volunteer our time.

So as an adult and faced with making my own decisions about how to spend my own money and volunteer my time, it hasn't always been easy to decide. This is how I ended up with the ritual of a budget of cash in my car to evenly distribute to all of the red buckets throughout the holiday season. As I got older, I realized the bell ringers weren't really judging me. I could just as easily

put all of the money in one red bucket at the beginning of the holiday season if I wanted to.

I continued the ritual for my kids.

Little kids like to put money in the buckets even if they don't know why. As they got older and were able to understand, I explained what the money was for. I also started exposing them to other ways to give back. We have donated toys, filled food boxes, delivered build-a-baskets, adopted a family for Christmas and various other things. I want them to have different experiences hoping they will take those experiences into adulthood and choose what works best for them.

If I give to one canned food drive instead of another, I don't feel guilty about it like I did when I was younger. I am grateful that I have the means and time to offer my support. I find what speaks to me and hope my kids find what works for them. Now when we pull into a parking lot, my kids will pull out their own money to put in the red bucket. I don't have to remind them about the canned food drive at school, they just ask if they can take something from the kitchen cabinets.

I tell you this not to toot my own horn. As I got older and didn't always support the charity of my sorority or visit the nursing home that my church would visit, I felt so guilty that I would end up doing nothing. I didn't want to be judged for choosing this over that. Eventually I realized it wasn't about what I chose, but that I chose at all. Find what speaks to you and make a difference.

"We only have two choices: Do nothing or do something." Tony Kirwan.



Laura Holscher

Happy Holidays my friends!

A handwritten signature in black ink, appearing to read 'Laura Holscher'.

Laura Holscher

Local Veteran Honored by Indiana Military Museum

Brenda Hancock

Army and Air Force veteran Ike Murphy embodies the spirit of the Indiana Military Museum. Ike is a Korean War Veteran who has taken an active role as a volunteer at the museum since before it was relocated to its current location at 715 S. 6th St. in Vincennes in 2013.

Now 88 years old, Ike was only 17 when he enlisted in the armed forces. While serving with the Army in the Korean War, he was severely wounded after being shot twice and mistaken for dead, but he was not dead! He was eventually rescued and began a lengthy 18-month hospital recovery. Fast

forward several decades, Judge Jim R. Osborne, director and curator of the Indiana Military Museum approached Ike about becoming involved, and the rest is history!

Not only has Ike spent countless hours as an Indiana Military Museum volunteer, he has also repeatedly contributed financially to IMM. His financial support was instrumental in the successful relocation of the museum nearly seven years ago. Ike has also played a key role in the purchase of several museum artifacts, including the sponsorship of the museum's MiG-17 fighter jet and the purchase of a German Command Kubelwagen currently being restored and near completion.

In April of this year, Ike was honored by the IMM with the dedication of the Ike Murphy Restoration Facility which houses future museum exhibits that are carefully being restored. It was a celebration of Ike's dedication to his country and his commitment



to the Indiana Military Museum. He was joined by family and friends to celebrate the building dedication. Thank you, Mr. Murphy!

To learn more about the Indiana Military Museum, you may visit the museum's website at <https://indymilitary.com/>.



MEDICAL SCANS EXPLAINED

A Look Inside the Body

NIH News in Health

Have you ever had to get an X-ray, MRI, or other medical scan? Do you know what these tests involve? Or what they can do?

Medical scans help doctors diagnose everything from head trauma to foot pain. There are many different types of imaging technologies. Each works differently.

Some types of imaging tests use radiation. Others use sound waves, radio waves, or magnets. Learning about how medical scans work can help you feel more comfortable if you or a loved one needs one. It can also help you to know what to ask about before getting an imaging test.

X-RAYS

The first revolution in seeing into the body came with X-rays. They have been used in the clinic for more than 120 years.

“X-rays are still used every day because they can do a lot,” says Dr. Kris Kandarpa, an imaging expert at NIH. They’re useful for looking at bones and finding problems in certain types of tissues, like pneumonia in the lungs.

X-ray imaging works by passing an energy beam through a part of your body. Your bones or other body parts will block some of the X-ray beams from passing through. That makes their shapes appear on the detectors used to capture the beams. The detector turns the X-rays into a digital image for a radiologist to look at.

X-ray beams use radiation. Radiation is energy that’s released as invisible particles or waves. Being exposed to very large amounts of radiation can damage cells and tissues. It may also increase your risk of developing cancer.

But modern X-ray tests use a very small dose of radiation. People are naturally exposed to radiation from many sources, such as the sky, rocks, and soil.

“A chest X-ray gives you similar amounts of radiation as you’d get in a plane flight across the Atlantic Ocean,” Kandarpa explains.

CT SCANS

CT scans also use X-ray beams. But the beams rotate around your entire body to create a 3D picture. These images contain more information than a regular X-ray. The scan can be done in less than a minute. That makes it especially useful in places like the emergency department. There, doctors need to know immediately if a patient has a life-threatening condition.

Because CT scans use more X-ray beams than a normal X-ray, they often deliver a higher dose of radiation. But medical specialists have ways to calculate the smallest radiation dose needed, explains Dr. Cynthia

McCullough, a CT imaging researcher at the Mayo Clinic.

“We tailor the dose to the patient’s size, and we tailor it to the reason for the exam,” McCullough says. For example, a CT scan of the chest needs less radiation than a CT scan of the stomach area.

McCullough’s lab, with four other NIH-funded teams, is working on ways to reduce the amount of radiation these scans deliver even more. Her team has used hundreds of CT scans to find the lowest radiation dose that’s needed for a radiologist to make the right diagnosis.

“We’ve found that when you take the dose way down, the images are less pretty, but they often still get doctors the right answer,” McCullough explains.

While lower doses of radiation would likely further lower risk, McCullough says that the standard doses are already quite low. That’s important for people to know, because “some patients who really need a CT scan are afraid to get it,” she says.



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Fear can sometimes keep someone from getting a scan that could help improve their health, or even save their life. "Current CT doses are in a range where it's not possible to even prove a risk exists. They're that low," she says.

MRI

MRI works in a very different way. It doesn't use X-rays. Instead, it uses strong magnets and radio waves to affect atoms in the water molecules within your body's tissues. When the radio waves are turned off, the atoms release energy that's detected by the MRI machine.

Atoms in different tissue types go back to normal at different speeds and release different amounts of energy. MRI software uses this information to create 3D pictures of the different tissue types.

"MRI is most helpful when you want to look at diseases that involve soft tissue, such as muscles, tendons, and blood vessels," explains Dr. Shreyas Vasanaawala, an MRI researcher at Stanford University.

MRI can provide information about how the body is functioning in real time. "For example, we can measure how much blood is flowing in the vessels," Vasanaawala says. That can help doctors find small blockages or defects in the heart.

Because MRI doesn't use X-rays, doctors would like to use it more

in children. But MRI machines require you to lie motionless for a long time.

"It can be difficult for children to hold still," says Vasanaawala. If needed, general anesthesia can help get kids through the test. It makes them unconscious and unable to move. It's typically very safe, but comes with some risks.

To help reduce the use of anesthesia, Vasanaawala and his team have created a flexible, blanket-like version of MRI hardware to use with children. They coupled it with new methods for faster scanning. The soft blanket-like coil sits closely on top of the patient, providing a comforting environment. "It's helping some kids get through exams without anesthesia," he explains.

OTHER SCANS

Another commonly used imaging method is called ultrasound. It sends sound waves into the body. Different types of tissue reflect sound waves differently. These differences can be picked up by an ultrasound machine and turned into a picture. Ultrasound is helpful for looking at the heart and other organs, or a developing baby.

Doctors also use tests called nuclear imaging. These tests use a tiny amount of a radioactive substance, or "tracer." Most tracers are injected into the body, but some are inhaled or swallowed.



The tracers inside the body release radiation that can be measured by a detector outside the body. The type of tracer differs depending on what the doctors want to see.

A positron emission tomography (PET) scan, for example, often uses a radioactive sugar to diagnose cancer. When cancer cells take up the radioactive sugar, they can be seen with the PET scanner.

Scientists are working to develop new types of tracers to detect different conditions, such as infections hiding deep in the body. They're also continuing to explore other ways to make medical scans faster and deliver less radiation.

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Annual Area Wide Resident Council Meeting

The Annual Area Wide Resident Council meeting was held in October at Vincennes University's Green Activities Center. Resident Councils from all 29 nursing facilities in the six-county area of Daviess, Dubois, Greene, Knox, Martin and Pike are invited to participate each year. Area Long-Term Care Ombudsman, Ann Cardinal, has planned and played hostess to this event for the past 17 years. It is a wonderful opportunity for the resident councils from all of our local nursing facilities to come together for a day of learning and fun which includes a Resident Rights review, lunch, bingo and Elvis!



What Does a Long-Term Care Ombudsman Do?

Indiana's long-term care ombudsmen are certified by the State and are trained to take complaints and help residents of long-term care facilities, as well as licensed assisted living facilities, to solve problems that could arise within their residential facility. These problems may include, but are not limited to quality of care, the use of restraints – either chemical or physical, abuse, transfers, discharges, and any other issue in regard to resident rights.

AN OMBUDSMAN CAN:

- advocate for a resident and/or the resident's family and provide education to the resident or family member on how to self-advocate.
- help to resolve quality of life and quality of care issues that may arise.
- answer questions about long-term care facilities and provide information about other service options within the community.
- negotiate on a resident or resident's family's behalf.

For more information on long-term care ombudsmen, visit in.gov/ombudsman.

To contact **Ann Cardinal**, Long-Term Care Ombudsman for Daviess, Dubois, Greene, Knox, Martin and Pike counties, please call (812) 888-5158.



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Social Security Administration and its Inspector General Announce New Online Reporting Form for Imposter Scam Calls

Andrew Saul, Commissioner of Social Security, and Gail S. Ennis, the Inspector General for the Social Security Administration, announce the launch of a dedicated online form at <https://oig.ssa.gov> to receive reports from the public of Social Security-related scams. These scams—in which fraudulent callers mislead victims into making cash or gift card payments to avoid arrest for purported Social Security number problems—skyrocketed over the past year to become the #1 type of fraud reported to the Federal Trade Commission and the Social Security Administration.

To combat these scams, Social Security and the OIG will use the new

online form to capture data that will be analyzed for trends and commonalities. The OIG will use the data to identify investigative leads, which could help identify criminal entities or individuals participating in or facilitating the scams. Ultimately, these efforts are expected to disrupt the scammers, help reduce this type of fraud, and reduce the number of victims.

“We are taking action to raise awareness and prevent scammers from harming Americans,” Commissioner Saul said. “I am deeply troubled that our country has not been able to stop these crooks from deceiving some of the most vulnerable members of our society.”

Commissioner Saul and Inspector General Ennis encourage the public to use the new online form to report Social Security phone scams including robocalls and live callers, as well as email, text, and in-person scams. The form allows people to create a unique Personal Identification Number (PIN), so if OIG contacts a person about their report, they will know the call is legitimate.

“Awareness is our best hope to thwart the scammers,” said Inspector General Ennis. “Tell your friends and family about them and report them to us when you receive them, but most importantly, just hang up and ignore the calls.”

Continued on Page 10



*Merry Christmas
& Happy New Year!*

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Social Security Scam Calls

Continued from Page 9

Social Security employees do occasionally contact people—generally those who have ongoing business with the agency—by telephone for business purposes. However, Social Security employees will never threaten a person, or promise a Social Security benefit approval, or increase, in exchange for information or money. In those cases, the call is fraudulent and people should just hang up.

Generally, the agency mainly calls people who have recently applied for a Social Security benefit, someone who is already receiving payments and requires an update to their record, or a person who has requested a phone call from the agency. If a person is not in one of these situations, they normally would not receive a call from the agency.

SOCIAL SECURITY WILL NOT:

- Tell you that your Social Security number has been suspended.
- Contact you to demand an immediate payment.
- Ask you for credit or debit card numbers over the phone.
- Require a specific means of debt repayment, like a prepaid debit card, a retail gift card, or cash.
- Demand that you pay a Social Security debt without the ability to appeal the amount you owe.
- Promise a Social Security benefit approval, or increase, in exchange for information or money.

If there is a problem with a person's Social Security number or record, in most cases Social Security will mail a letter. If a person needs to submit payments to Social Security, the agency will send a letter with instructions and payment options. People should never provide information or payment over the phone or Internet unless they are certain of who is receiving it.

The Social Security OIG will also continue to take reports of fraud, waste, and abuse in Social Security's programs and operations. A separate online form for those reports remains available at their website.

To get more Social Security news, follow the Press Office on Twitter @SSAPress.



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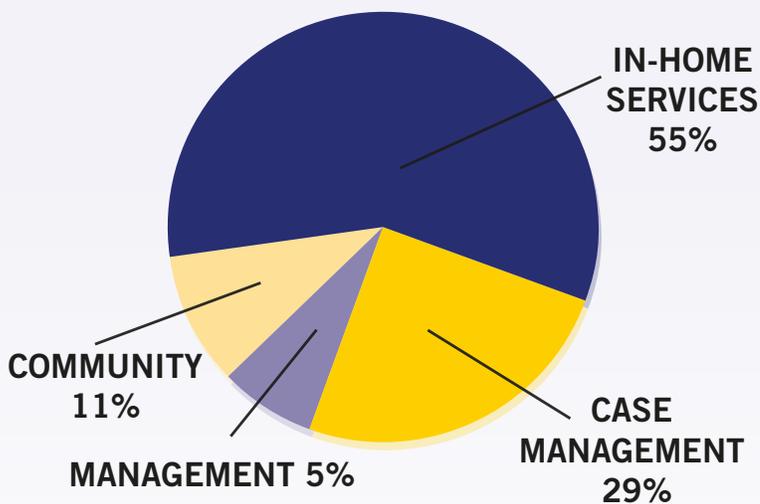
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Generations depends on federal and state dollars and donations from individuals and charities. Below is a profile of our financial position.

Our major funding sources include Older Americans Act, CHOICE, Social Service Block Grant, Medicaid Waiver and RSVP. Generations also receives funding from area businesses, community foundations, industries and individuals to support the programs and services offered by our agency.



REVENUES

Federal Funds	\$2,370,393
State Funds	\$996,505
Client Contributions	\$23,554
In-Kind Match	\$57,350
Fees/Cost Share	\$994
Cash/Other/Grants	\$20,359
TOTAL	\$3,469,155

UNITS OF SERVICE

Meals on Wheels	89,484 Meals
Congregate Meals	15,273 Meals
Homemaker	6,931 Hours
Legal	250 Hours
Ombudsman	1,950 Hours
Transportation	21,166 Rides
Information & Assistance	2,237 Contacts
Case Management	87,197 Units
Personal Care	12,940 Hours
Adult Day Services	10,318 Hours
Volunteer Services	23,798 Hours
Pre-Admission Screening	452 Hours

EXPENDITURES

REVENUE

Aging & Disability Resource Center	\$330,458
Transportation	\$54,535
In-Home Service	\$811,769
Home Delivered Meals	\$624,064
Congregate Meals	\$153,411
Case Management	\$1,009,745
Legal	\$6,546
Ombudsman	\$62,602
Management	\$183,938
Healthy Aging/AngelWorx	\$165,816
Caregiver	\$66,271
TOTAL	\$3,469,155

AGING & DISABILITY RESOURCE CENTER

- A total of 2,948 contacts were made through the ADRC department. Of these contacts, 42 % resulted in over-the-phone or face-to-face Options Counseling.
- SHIP (State Health Insurance Assistance Program) Counselors conducted 182 counseling sessions with older adults needing guidance with Medicare Part D plans and other health insurance issues – a 20% increase over last year.
- Of Consumer Satisfaction Surveys returned, 95% indicated that individuals assisted by an Options Counselor were pleased with the help that they received and would call again.

RSVP/ANGELWORX VOLUNTEER PROGRAM

- Over 1,000 pre-school and kindergarten children were screened for common eye problems through the vision screening program.



- 29 Little Elves Workshops provided 712 children with the opportunity to “shop” for Christmas gifts for the adult caregivers in their homes. Over 2,300 gifts were selected by the children and wrapped by volunteers.

- Disability Awareness Programs provided over 600 students with the opportunity to experience some of the challenges that individuals with disabilities face daily.



- Over 700 Build-A-Baskets that were prepared and donated by the community for homebound individuals served by Generations were delivered over the holiday season.



- The Happy Hoopers completed over 1,400 sewing projects for local causes including cloth protectors and walker caddies for local nursing facilities and hospitals; chemo hats, port pads and lap blankets for local Oncology departments; bibs, hand puppets and paint aprons for local pre-schools; cot blankets for Foster Kids Camp; scarves for local ministries and much, much more.



- Color for a Cause program collected over 3,000 coloring pages from students and delivered them to homebound individuals and residents of long-term care facilities.

- Two RSVP volunteers, Phyllis Stewart and Ethylgene Josh, were nominated for and awarded the Golden Hoosier award. The Golden Hoosier Award recognizes outstanding senior citizens throughout Indiana. Only 23 recipients were chosen to receive this prestigious award state wide! Congratulations, Ladies!



- TCE (Tax Counseling for the Elderly) volunteers completed over 1,800 free 2018 tax returns for older adults in our service area.

PORT FISCAL YEAR 2018-2019

CASE MANAGEMENT

- Case Managers made a total of, at least, 2,600 home visits to over 600 individuals.
- Case Managers are serving over 540 Aged & Disabled Medicaid Waiver clients, another record number for Generations. Not only does this generate revenue for the organization, but it also diverts individuals from the nursing facility.
- Case Managers learned a new software system that was rolled out by the State in April of this past year. This was quite an endeavor as the software is a complete overhaul of the previous software system they had been using. It has been quite a challenge, but they have persevered – all while keeping up with the needs of the individuals that they serve!



- Of Client Satisfaction Surveys returned, 100% indicated that the individual is satisfied with his/her Case Manager.
- Caregiver coaching services continues through the RCI REACH program. This program provides one-on-one coaching for caregivers who are caring for those with dementia and/or with Alzheimer's Disease.
- Generations' Stacey Kahre received training to be a Respecting Choices® Advance Care Planning Facilitator. She is trained to guide conversations with families and loved ones about end of life planning and advance directives.

NUTRITION

- 73,704 home-delivered meals were served to homebound individuals in 2018 and 11,154 meals were served at congregate sites where individuals can gather and have a meal together.
- An average of 769 individuals are provided with home-delivered meals on a daily basis and an average of 150 congregate meals are served daily.



- Of Consumer Satisfaction Surveys returned, 81% of individuals who receive home-delivered meals would recommend them to a friend.
- All individuals who receive home-delivered meals continue to receive a face-to-face home visit from an Options Counselor prior to receiving meals to assess for other needs, as well.

HEALTHY AGING

- The 2018 Trailblazer 5K raised over \$5,000 for Generations programs.
- Over 100 people participated in Matter of Balance workshops.
- Two Generations' staff members were certified as Master Trainers for the Chronic Disease Self-Management program.
- Generations now has two certified Matter of Balance Master Trainers.
- Over 200 participants and 40 vendors took part in Generations' Aging Well Retreat at Green Activities Center. This day-long event focused on what individuals can do to promote healthy aging. The day was filled with speakers, vendors and free health screens.



OMBUDSMAN

- Nearly 200 residents and staff from 26 long term care facilities attended the 2018 Area Wide Resident Council meeting at Vincennes University.

⇒ Caregiver

At Generations, we recognize that caregiving is one of the most challenging and sacrificial jobs that one can have. A caregiver juggles his or her day-to-day activities, all while caring for a loved one. Generations' 2019 Caregiver Connection Event – Navigating the Rough Waters of Caregiving was a day designed specifically with the caregiver in mind. The event took place on November 14th at Green Activities Center on the Vincennes University campus where over 100 caregivers attended for a day of information and understanding. Over 30 vendors were available to provide information to individuals on the topic of caregiving and how they can help.

Speakers included author of *The Gray Zone: When Life Support No Longer Supports Life*, Deborah Day Laxson, who shared her experiences in caring for her husband; Maria Holmes, Program Manager at the Alzheimer's Association Greater Indiana Chapter; and Dustin Ziegler, Vice President of Community Programs for CICOA who discussed the Dementia Friends Indiana movement and how it can impact the community.

It was a wonderful day full of fantastic information. Thank you, again, to all those who attended and to everyone who had a part in the day! We could not have done it without you!



2019



Connection



Caregiver Corner

12 Ways for Caregivers to Lessen Holiday Stress

by Amy Goyer, AARP, December 20, 2017 (www.aarp.org)

Here are steps you can take that can help minimize your holiday stress and maximize your holiday joy.

The holidays can bring great joy, but as a family caregiver I can also attest that the season can spur additional pressure. According to a new AARP survey, 7 in 10 family caregivers say it is emotionally stressful to care for loved ones during the holiday season.

As caregivers, we often have unrealistic expectations for ourselves, striving to create the perfect holiday experience for our loved ones. That's why the vast majority of family caregivers plan to make at least one accommodation during the holidays. Indeed, the survey also found that the average caregiver makes about three to four changes.

Some find someone else to cook or purchase their holiday meal. Some cut back on holiday spending or take on extra work. Many scale back on decorating, while others postpone holiday vacations. And not a small number skip celebrating altogether.

Despite the challenges of caregiving, about one-third of family caregivers actually feel more positive about the holidays since they started caregiving. I know I do; it feels good to be of help. If you are caring for loved ones, I recommend that you try to accept that things are going to be a bit different this year — for both you and your loved ones. But there are steps you can take, both big and small, that can help minimize your holiday stress and maximize your holiday joy.

Here are a dozen ways to adjust your holiday expectations and celebrations:

1. Fill your tank first: We don't expect our cars to run on empty and we can't either. Find quick ways to fill your own tank, like making time for a terrific

peppermint mocha or a visit with friends. Or maybe it's a good night's sleep or a day to yourself.

2. Line up someone to listen: It really does help to express our fears, stress and frustration to another. A friend or family member can play this role, or you can contact a local or online caregiver support group.

3. Adjust holiday meals: I've found that purchasing most of the food, making just a few favorite family recipes, takes less time and clean up is a snap. We've also gone out to a restaurant for holiday meals when we need a distraction from grief and stress.

4. Cut back on the decorations: I've scaled back the number of decorations, displaying only the ones that are most meaningful. I've also paid others to help me or invited friends over for a decorating party.

5. Be flexible with shopping and gift giving: Try shopping online or making a list and asking someone else to do the shopping and/or mail packages for you. Arrange for someone to help loved ones shop if it would make them happy to give you a present too!

6. Invite holiday visitors: Ask family or friends to come over to help lift your spirits and infuse energy. If hosting feels overwhelming, arrange to meet at a coffee shop or cafe or plan a video chat.

7. Limit the festivities: Give yourself permission to cut back on your role and the number and location of holiday activities. My Dad was in the hospital over Christmas one year so we ate, sang and opened presents right there.

Continued on Page 18

Holiday Hints for Alzheimer's Caregivers

U.S. Department of Health and Human Services – National Institute on Aging

Holidays can be meaningful, enriching times for both the person with Alzheimer's disease and his or her family. Maintaining or adapting family rituals and traditions helps all family members feel a sense of belonging and family identity. For a person with Alzheimer's, this link with a familiar past is reassuring.

However, when celebrations, special events, or holidays include many people, this can cause confusion and anxiety for a person with Alzheimer's. He or she may find some situations easier and more pleasurable than others. The tips below can help you and the person with Alzheimer's visit and reconnect with family, friends, and neighbors during holidays.

FINDING THE RIGHT BALANCE

Many caregivers have mixed feelings about holidays. They may have happy memories of the past, but they also may worry about the extra demands that holidays make on their time and energy.

Here are some ways to balance doing many holiday-related activities while taking care of your own needs and those of

the person with Alzheimer's disease:

- Celebrate holidays that are important to you. Include the person with Alzheimer's as much as possible.
- Set your own limits, and be clear about them with others. You do not have to live up to the expectations of friends or relatives. Your situation is different now.
- Involve the person with Alzheimer's in simple holiday preparations, or have him or her observe your preparations. Observing you will familiarize him or her with the upcoming festivities. Participating with you may give the person the pleasure of helping and the fun of anticipating and reminiscing.
- Consider simplifying your holidays around the home. For example, rather than cooking an elaborate dinner, invite family and friends for a potluck. Instead of elaborate decorations, consider choosing a few select items.
- Encourage friends and family to visit even if it's difficult. Limit the number of visitors at any one time, or have a few people visit quietly with the person in a separate room. Plan visits when the person usually is at his or her best.

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12 Ways for Caregivers to Lessen Holiday Stress

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8. Find a travel companion: Line up someone to drive or ride along and help you out with your loved one. Also plan ahead for the weather, time of day, where to park or unload the car and how to handle stairs and restroom needs.

9. Get respite: Even if you don't normally have help caring for your loved ones, this might be a good time to arrange for care for them. You'll have more time to unwind and focus on holiday tasks. Plan fun holiday activities for them so you feel better about leaving.

10. Start a new tradition: It's hard to let go of a tradition when loved ones are gone or can't participate, so start a new one. For example, when it became too difficult for my Dad to go to church on Christmas Eve, we began singing carols together at home instead.

11. Don't forget tomorrow: We put a lot of energy in the build-up to the holidays, but often forget that we'll need help putting away decorations and cleaning. Also think ahead about support and fun activities to do with loved ones to ward off the post-holiday blues.

12. Stop, breathe, feel the joy: It's easy to get caught up in the holiday frenzy. Being mindful of joyful moments magnifies our precious time with loved ones. Savor them.

Amy Goyer is AARP's Family and Caregiving Expert and author of Juggling Life, Work and Caregiving. Connect with Amy on Twitter, Facebook, Youtube, LinkedIn, amygoyer.com and in our Online Community.



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Holiday Hints for Alzheimer's Caregivers

Continued from Page 17

- Prepare quiet distractions to use, such as a family photo album, if the person with Alzheimer's becomes upset or overstimulated.
- Make sure there is a space where the person can rest when he or she goes to larger gatherings.
- Try to avoid situations that may confuse or frustrate the person with Alzheimer's, such as crowds, changes in routine, and strange places. Also try to stay away from noise, loud conversations, loud music, lighting that is too bright or too dark, and having too much rich food or drink (especially alcohol).
- Find time for holiday activities you like to do. If you receive invitations to celebrations that the person with Alzheimer's cannot attend, go yourself. Ask a friend or family member to spend time with the person while you're out.

PREPARING GUESTS

Explain to guests that the person with Alzheimer's disease does not always remember what is expected and acceptable. Give examples of unusual behaviors that may take place such as incontinence, eating food with fingers, wandering, or hallucinations.

If this is the first visit since the person with Alzheimer's became severely impaired, tell guests that the visit may be painful. The memory-impaired person may not remember guests' names or relationships but can still enjoy their company.

- Explain that memory loss is the result of the disease and is not intentional.
- Stress that the meaningfulness of the moment together matters more than what the person remembers.

PREPARING THE PERSON WITH ALZHEIMER'S

Here are some tips to help the person with Alzheimer's disease get ready for visitors:

- Begin showing a photo of the guest to the person a week before arrival. Each day, explain who the visitor is while showing the photo.

- Arrange a phone call for the person with Alzheimer's and the visitor. The call gives the visitor an idea of what to expect and gives the person with Alzheimer's an opportunity to become familiar with the visitor.
- Keep the memory-impaired person's routine as close to normal as possible.
- During the hustle and bustle of the holiday season, guard against fatigue and find time for adequate rest.

FOR MORE INFORMATION ABOUT HOLIDAYS AND ALZHEIMER'S

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SERVICE ANIMALS AND ASSISTANCE ANIMALS – PART 1

Service animals and assistance animals are advancing far beyond family pet status. High-performance creatures are helping military veterans and other people adapt to and overcome many disabilities. Trainers are equipping animals to help humans burdened with an increasing variety of physical, sensory, psychiatric, intellectual, and emotional disorders, injuries, and illnesses. These highly trained animals are enriching disabled people's lives in amazing ways. This article describes some of the expanding variety of game-changing benefits from animal behavioral research. The article also describes some practical issues affecting service animal and assistance animal availability and usage.

SERVICE ANIMALS AND ASSISTANCE ANIMALS – ASSISTANCE ANIMAL CATEGORIES

Federal law offers antidiscrimination protections for disabled people that use or want to use "assistance animals." The US Department of Justice (DOJ) and the US Department of Housing and Urban Development (HUD) described assistance animals in a 2013 joint notice (the "2013 Joint Notice" about antidiscrimination rules on public housing and public facilities.

HUD's publication of the 2013 Joint Notice offers this description of assistance animals at https://archives.hud.gov/news/2013/servanimals_ntcfheo2013-01.pdf: "An assistance animal is not a pet. It is an animal that works, revise assistance, or performs tasks for the benefit of a person with a disability, or provides emotional support that alleviates one or more identified symptoms or effects of a person's disability. Assistance animals perform many disability-related functions, including but not limited to,

guiding individuals who are blind or have low vision, alerting individuals who are deaf or hard of hearing to sounds, providing protection or rescue assistance, pulling a wheelchair, fetching items, alerting persons to impending seizures, or providing emotional support to persons with disabilities who have a disability-related need for such support."

Assistance animals include the subcategories, "service animals" and "emotional support animals." More than one blog article says assistance animals may include such exotic species as ferrets, boa constrictors, parents, potbellied pigs, and capuchin monkeys.

SERVICE ANIMALS

Service Animals – Definitions

The 2013 Joint Notice says DOJ regulations under the US Fair Housing Act (the "FH Act") and the Americans with Disabilities Act (the "ADA") define a "service animal" narrowly as a "dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including physical, sensory, psychiatric, intellectual, or other mental disability."

Service Animals – Tasks and Types

An article published by dogster.com lists 10 specific types of service dogs among the growing varieties of service dog categories. The list includes guide dogs, hearing dogs, mobility assistance dogs, diabetic alert dogs, seizure alert dogs, seizure response dogs, psychiatric service dogs, autism support dogs, FASD service dogs, and allergy detection dogs.

Some trainers claim that seizure service dogs can detect early signs of oncoming seizures and help seizure sufferers prepare for seizure episodes. The trainers claim that seizure service dogs can smell and react to chemical changes that people's bodies produce before and during seizures.

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SERVICE ANIMALS AND ASSISTANCE ANIMALS

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Service Animals – No Petting or Playing While On-Duty

Service animals receive extremely detailed training that requires the animals' to remain focused and undistracted while they are working. Therefore, service animal trainers instruct animal handlers and owners to discourage people from trying to pet or interact with the animals while they are working.

Service Animals – Expensive to Train and Expensive to Purchase

The training requirements to produce a service animal are much more complex than training a dog to finish or roll over. Cost varies according to a particular animal's trained skill sets, but than one online article indicates that that service dog costs can run between \$10,000 and \$60,000.

Insurance does not normally cover service animal purchase costs. Likewise, a person cannot purchase a service animal with benefits through Medicare, Medicaid, or the US Department of Veterans Affairs (VA). However, VA is expanding benefits to help some veterans provide veterinary care for service animals.

EMOTIONAL SUPPORT ANIMALS

(Also known as "companion animals")

Emotional support animals are assistance animals that help comfort and calm people that have emotional or psychological difficulties. The 2013 Joint Notice says the DOJ regulations exclude "emotional support animals" from the "service animal" definition because: "the provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks for the purposes of this definition." Thus, trained dogs are the only species of animal that may qualify as service animals under the ADA (there is a separate provision regarding trained miniature horses), and emotional support animals are expressly precluded

from qualifying as service animals under the ADA. Emotional support animals do not require the investment of training necessary to develop service animals, so emotional support animals cost much less to purchase.

MORE READING ABOUT SERVICE ANIMALS AND ASSISTANCE ANIMALS

More online articles about service animals and assistance animals appear from time to time as interest in the subject grows. We will revisit this topic in a future article about legal and public policy issues affecting service animal and assistance animal availability and usage.

Jeff R. Hawkins and Jennifer J. Hawkins are Trust & Estate Specialty Board Certified Indiana Trust & Estate Lawyers. They are also active members of the Indiana State Bar Association and National Academy of Elder Law Attorneys.

Both lawyers are admitted to practice law in Indiana, and Jeff Hawkins is admitted to practice law in Illinois.

Jeff is a Fellow of the American College of Trust and Estate Counsel and the Indiana Bar Foundation. He is also a member of the Illinois State Bar Association and the Indiana Association of Mediators. He served as the 2014-15 President of the Indiana State Bar Association, and he is a registered civil mediator.

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FLU SYMPTOMS & COMPLICATIONS

Source: CDC

Flu Symptoms

Influenza (flu) can cause mild to severe illness, and at times can lead to death. Flu is different from a cold. Flu usually comes on suddenly. People who have flu often feel some or all of these symptoms:

- fever* or feeling feverish/chills
- cough
- sore throat
- runny or stuffy nose
- muscle or body aches
- headaches
- fatigue (tiredness)
- some people may have vomiting and diarrhea, though this is more common in children than adults.

**It's important to note that not everyone with flu will have a fever.*

Flu Complications

Most people who get flu will recover in a few days to less than two weeks, but some people will develop complications (such as pneumonia) as a result of flu, some of which can be life-threatening and result in death.

Sinus and ear infections are examples of moderate complications from flu, while pneumonia is a serious flu complication that can result from either influenza virus infection alone or from co-infection of flu virus and bacteria. Other possible serious complications triggered by flu can include inflammation of the heart (myocarditis), brain (encephalitis) or muscle (myositis, rhabdomyolysis) tissues, and multi-organ failure (for example, respiratory and kidney failure). Flu virus infection of the respiratory tract can trigger an extreme inflammatory response in the body and can lead to sepsis, the body's life-threatening response to infection. Flu also can make chronic medical problems worse. For example, people with asthma may experience asthma attacks while they have flu, and people with chronic heart disease may experience a worsening of this condition triggered by flu.

People at High Risk from Flu

Anyone can get sick with flu (even healthy people), and serious problems related to flu can happen at any age, but some people are at high risk of developing serious flu-related complications if they get sick. This includes people 65 years and older, people of any

age with certain chronic medical conditions (such as asthma, diabetes, or heart disease), pregnant women and children younger than 5 years, but especially those younger than 2 years old.

What are the emergency warning signs of flu?

People experiencing these warning signs should obtain medical care right away.

IN CHILDREN

- Fast breathing or trouble breathing
- Bluish lips or face
- Ribs pulling in with each breath
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children less than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions

IN ADULTS

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest or abdomen
- Persistent dizziness, confusion, inability to arouse
- Seizures
- Not urinating
- Severe muscle pain
- Severe weakness or unsteadiness
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions

These lists are not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

SIGNS AND SYMPTOMS	COLD	INFLUENZA (FLU)
Symptom onset	Gradual	Abrupt
Fever	Rare	Usual; lasts 3-4 days
Aches	Slight	Usual; often severe
Chills	Uncommon	Fairly common
Fatigue, weakness	Sometimes	Usual
Sneezing	Common	Sometimes
Chest discomfort, cough	Mild to moderate; hacking cough	Common; can be severe
Stuffy nose	Common	Sometimes
Sore throat	Common	Sometimes
Headache	Rare	Common

*Reference to specific commercial products, manufacturers, companies, or trademarks does not constitute its endorsement or recommendation by the U.S. Government, Department of Health and Human Services, or Centers for Disease Control and Prevention; also, material provided in this article is available on the CDC website at no charge.

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