



NEWSLETTER

April, May, June 2009

WWW.CCERAP.ORG

Colorado Coalition for Elder Rights & Adult Protection

A Project of the Colorado Non-Profit Development Center

Supported by grants from The Older Americans Act Program within the Division of Aging and Adult Services, Colorado Department of Human Services

Mission: To promote statewide understanding of elder and adult abuse and the rights and protections available to at-risk adults.

This CCERAP Meeting is a Special Training Event

Wednesday, April 29, 2009

9:00am—1:00pm

Aurora City Hall, City Chamber
15151 E. Alameda Pkwy.
Aurora, CO

Training Topic

Responding to People with Dementia

for

Law Enforcement & Others

Guest Speakers

Amelia Schafer, MS
Education Director

Alida Loinaz, OTR
Special Programs Director,

Alzheimer's Association
Colorado Chapter

Training Event Schedule

8:30am—9:00am Registration

9:00am—1:00pm Training

*Networking

Please feel free to bring brochures, flyers about programs and future training events.

Directions to Training Event

Take I-225 to Alameda Ave.
East on Alameda about 1/2 mile to Chambers Rd.
Left on Chambers Rd. 1 block.
Left into City Hall parking lot.
Parking garage is available on west side or park in lot on east side.
City Chambers —1st floor, center of building.

Registration is recommended, but not required. Use Registration form available online at www.ccerap.com or call Pat Stanis at 303-866-2834, leaving your name and phone #

Responding to People with Dementia Making Your First Response the Right Response

The way in which Alzheimer's disease affects communication will vary with each person. As the disease progresses, someone with dementia may find it increasingly difficult to express themselves in words, as well as having trouble understanding what is being said.

First and foremost you must be a good listener. Communicating with someone affected by Alzheimer's disease requires patience and understanding.

Here are some additional tips:

- Be calm and supportive
- Focus on the feelings, not facts
- Pay attention to the tone of your voice
- Identify yourself and address the person by name
- Speak slowly and clearly
- Use short, simple and familiar words
- Ask one question at a time
- Allow enough time for a response
- Use nonverbal communication such as pointing and touching
- Offer assistance as needed
- Don't talk about the person as if he/she was not there
- Have patience, flexibility and understanding



"I'm asking you to realize that I'm trying as hard as I can to understand like you do. Sometimes, I just can't. And, once in a great while, I just won't! I'm asking you to understand me in a broader context than who has the facts right and who has them wrong. I'm going to get some facts, some recollections, and some beliefs wrong. And this is going to happen more and more and more. Work with me in this process. I know you are trying, and it's harder and harder on you. But knowing all that now, early on in the disease process, doesn't seem to slow the progress of the disease or lessen the tension."

*—Insights from **Richard Taylor, retired psychologist, diagnosed with dementia.***

INSTEAD OF.....

The following are communication absolutes when talking with people who have dementia from the book **“Alzheimer’s Disease Help and Hope: Ten Simple Solutions for Caregivers”**, by Jo Huey.

Do NOT:

- | | | |
|-----------------------|---------------|------------------|
| • Argue | ...instead... | Agree |
| • Reason | ...instead... | Divert |
| • Shame | ...instead... | Distract |
| • Lecture | ...instead... | Reassure |
| • Say ‘Remember’ | ...instead... | Reminisce |
| • Command | ...instead... | Tell/Ask/Show |
| • Say ‘I Told You’ | ...instead... | Repeat |
| • Say ‘You Can’t Can’ | ...instead... | Say ‘Do What You |
| • Condescend | ...instead... | Encourage |
| • Force | ...instead... | Reinforce |

*Thank You
to the
Colorado
Division of
Insurance
for
sponsoring
the
newsletter.*



Caregiver Safety Tips for the Grey Days of Winter

Cold, Wet Weather

A loved one with Alzheimer’s won’t necessarily dress appropriately for colder weather. You can help by helping them cover as much exposed skin as possible. Provide several layers of lightweight clothing for easy movement and especially if plans include time out of doors as well as inside. A hat is important since so much body heat escapes from an uncovered head and don’t forget to add a scarf to cover up an exposed neck. Mittens keep hands warmer than gloves and may be easier for you to help get on and off.

To avoid slips and falls, make sure boots are non-skid. There are many on the market that use Velcro instead of laces, and try separate “tracks” that attach to the soles for added traction on icy surfaces. You can also add a sharp tip to canes for that extra grip on winter days. This device is available at home health care stores.

Grey Days and Early Sunsets

Visibility is reduced in snowy weather and darkness falls earlier in the winter months. Visual perception is affected in people with Alzheimer’s and can cause increased confusion or disorientation in dark or shadowy environments both inside and out. Turn lights on earlier, open curtains during daylight hours and add bulbs that simulate sunlight to decrease the impact of “sundowning.” Install motion detector lights to help illuminate walkways around the home as darkness may fall before you can arrive home from an outing. Dressing in light or bright colors or adding reflective material to clothing will help your loved one be more easily seen.



Summer Safety Tips

The pleasures of summer include longer, warmer and sunnier days, celebrations with family and friends, and backyard BBQs. For the person caring for a loved one with Alzheimer's disease, summer can also bring with it additional safety challenges. By taking a few minutes to review the following safety tips, families can enjoy a fulfilling and pleasant summertime together.

Sunshine and Warm Weather

- Limit your loved one's exposure to the sun. Place lawn chairs in shaded areas. Stay indoors between 10 a.m. and 2 p.m. when the sun's rays are the strongest. Encourage your loved one to wear a hat and sunglasses.
- Remind your loved one with Alzheimer's disease to apply and reapply sunscreen when outside for long periods of time.
- During the summer it is especially important to drink lots of fluids. Keep a cool glass of water within arm's reach as a reminder to him to drink. Provide non-alcoholic beer or lemonade for backyard BBQs.
- Appropriate Clothing –Put away winter clothes and replace them with light clothing appropriate for the season.
- Enroll in or if necessary, update information with the Medic Alert® + Alzheimer's Association Safe Return®.

Summer Fun

- Consider watching fireworks from your home or in the quiet of the car and parades on television; picnic during less crowded hours and days.
- Never allow unsupervised access to open flames and the hot surfaces of BBQ grills or campfires.
- Attending a minor or major league ballgame may be something your loved one has always enjoyed. However, large crowds can be overwhelming for the person with Alzheimer's disease. Identify a "buddy" so you don't lose track of who was supposed to stay with your loved one, accompany your loved one to the restroom and the concession stand, and stay with them.
- Do not allow an individual with Alzheimer's disease to swim unsupervised, and do not leave children in the pool under the supervision of the person with Alzheimer's disease even for a short period of time.
- If your loved one still enjoys bicycling, consider accompanying him on the ride or ask a trusted companion to accompany him. Encourage your loved one to wear a helmet and to ride on trails designated for pedestrians and cyclists.
- Keep an eye on sharp gardening shears or tools and closely monitor their use. Use fertilizers that are not harmful if swallowed accidentally and ensure that the plants in the garden are not poisonous.
- Family reunions can be overwhelming to the person with Alzheimer's disease and may rely greatly on her ability to recall names and faces. Consider limiting the amount of visitors and prepare both family members and the person with Alzheimer's disease in advanced for the visit. Have a back up plan that will allow for a quiet place of rest if things become overwhelming or confusing.
- Many families plan vacations and trips during the summer time. Remember that new and unfamiliar places can be confusing for the person with Alzheimer's disease. Consider simplifying travel plans or traveling to a familiar destination. Alert the Medic Alert + Safe Return registration line of your travel plans and provide them with contact information for your destination.

Important Contact Information

- Alzheimer's Association 24-Hour Helpline – 1-800-272-3900
- Medic Alert + Safe Return Enrollment Line – 1-888-572-8566
- Medic Alert + Safe Return Incident/Emergency Line – 1-800-625-3780

11th Annual Senior Law Day – June 27, 2009

7:30am – 2:30pm, Renaissance Hotel, 3801 Quebec Street, Denver, CO 80207

Co-Sponsored by the Elder Law Section of the Trusty & Estate Section of the Colorado Bar Association, Bar Association CLE.

This annual educational seminar presents programs specifically for seniors in the Colorado Community. It will provide attendees with important and useful information on many issues facing senior citizens. Each participant will receive a FREE copy of the 2009 Edition Senior Law Handbook. If you are a senior, an adult child with a senior parent, or a caregiver, this is one event you cannot afford to miss.

Safety and Dementia

Source: Alzheimer's Association

Aging safely in their homes is a common goal for many people. A person with Alzheimer's disease or another dementia can enjoy quality of life in the comfort of home or in the security of a residential setting.

As the illness of dementia progresses, a person's ability to reason and make sound judgments declines. The ability to understand and interpret sensory stimuli, what a person sees and hears, is also affected. Common issues of concern are protecting the person with dementia from harmful areas or substances and discouraging a person with dementia from engaging in potentially dangerous activities.

Some security measures to consider at home might include:

- unsubscribing from all solicitation lists
- removing hazardous materials or objects, e.g. chemicals, guns
- locking exit and entry doors, possibly disguising them on the inside
- removing interior door locks (bedroom, bathroom)
- selecting appliances with automatic shut off
- creating more even lighting in rooms, installing automatic timers
- diffusing glare of shiny surfaces or windows
- covering mirrors if they are a distraction
- using night lights
- adding railings, banisters, grab bars
- clearing common pathways through rooms
- removing throw rugs, cords, and other trip hazards
- meeting one's neighbors, sharing contact info
- monitoring food spoilage & cleaning out refrigerator weekly
- checking temperatures of hot water & foods/drinks
- supervising medications, alcohol use, smoking, meals
- limiting stove use, e.g. unplugging or covering/removing knobs
- encouraging daily check-in visits by friends & relatives
- providing opportunities for exercise and interaction with nature
- enrolling in Medic Alert + Alzheimer's Association Safe Return to expedite a speedy reunion should the person lose his or her way when outside the house
- controlling access and availability to the car and, ultimately, the need to drive
- arranging for home deliveries and outings
- discontinuing driving
- reorganizing finances, e.g. consolidating financial accounts, reducing or eliminating access to credit cards, creating automatic deposits and payments
- developing a disaster plan and list of contacts
- providing ample respite and opportunities for sleep for primary caregivers
- educating caregivers about the disease of dementia, helping them develop coping strategies and techniques for positive interactions
- encouraging caregivers to utilize community resources as support or respite
- expanding networks of care, to include friends, faith groups, neighbors and others

**For more information:
24/7 Helpline 800.272.3900 · www.alz.org/co**

ELDER ABUSE AWARENESS DAY

June 15, 2009

WHEREAS, Colorado's older citizens laid the foundation of the state and nation we enjoy today; and

WHEREAS, abuse of older persons is a tragedy inflicted on a vulnerable segment of the population that crosses all socio-economic boundaries; and

WHEREAS, combating abuse of older people will help to improve the quality of life for seniors across Colorado, and will allow senior citizens to continue to live as independently and vibrantly as possible; and

WHEREAS, Colorado's seniors should be treated with respect and dignity as they continue to serve as leaders, mentors, volunteers, and important and active members of our communities; and

WHEREAS, the State of Colorado honors the countless contributions of its senior citizens, and recognizes all efforts to end elder abuse as vital to the interests of the citizens of this state;

Therefore, I, Bill Ritter, Jr., Governor of the State of Colorado, do hereby proclaim June 15, 2009,

ELDER ABUSE AWARENESS DAY

in the State of Colorado.

GIVEN under my hand and the Executive Seal
of the State of Colorado, this third day of February, 2009

Governor, Bill Ritter, Jr.

Media Loan Library

Communicating With Moderately Confused Older Adults – 20 minute video

Using actual footage of individuals with Alzheimer's disease and related disorders, geriatric experts highlight the characteristics and most effective approaches for understanding and helping moderately confused older adults

10 Commandments of Communicating With People With Disabilities – 26 minute video

Both a "diversity" and "sameness" training tool. The video has humorous vignettes to deliver its disability awareness message. It promotes sensitivity and respect of people with disabilities, while recognizing that all of us share some of the same values, interests, hopes, and dreams. This video can improve working relationships, improve service, and avoid losing employee due to ignorance or awkwardness.

Alzheimer's Disease: The 10 Warning Signs

Some change in memory is normal as we grow older, but the warning signs of Alzheimer's disease are more than simple lapses in memory. People with Alzheimer's experience difficulties communicating, learning, thinking and reasoning — problems severe enough to have an impact on an individual's work, social activities and family life. The Alzheimer's Association has developed a checklist to help you recognize the difference between normal age-related memory changes and possible warning signs of Alzheimer's disease. The Alzheimer's Association believes that it is critical for people diagnosed with dementia and their families to receive information, care and support as early as possible.

10 warning signs of Alzheimer's:

1. Memory loss. Forgetting recently learned information is one of the most common early signs of dementia. A person begins to forget more often and is unable to recall the information later. **What's normal? Forgetting names or appointments occasionally.**

2. Difficulty performing familiar tasks. People with dementia often find it hard to plan or complete everyday tasks. Individuals may lose track of the steps involved in preparing a meal, placing a telephone call or playing a game. **What's normal? Occasionally forgetting why you came into a room or what you planned to say.**

3. Problems with language. People with Alzheimer's disease often forget simple words or substitute unusual words, making their speech or writing hard to understand. They may be unable to find the toothbrush, for example, and instead ask for "that thing for my mouth." **What's normal? Sometimes having trouble finding the right word.**

4. Disorientation to time and place. People with Alzheimer's disease can become lost in their own neighborhood, forget where they are and how they got there, and not know how to get back home. **What's normal? Forgetting the day of the week or where you were going.**

5. Poor or decreased judgment. Those with Alzheimer's may dress inappropriately, wearing several layers on a warm day or little clothing in the cold. They may show poor judgment, like giving away large sums of money to telemarketers. **What's normal? Making a questionable or debatable decision from time to time.**

6. Problems with abstract thinking. Someone with Alzheimer's disease may have difficulty performing complex mental tasks, like forgetting what numbers are for and how they should be used. **What's normal? Finding it challenging to balance a checkbook.**

7. Misplacing things. A person with Alzheimer's disease may put things in unusual places: an iron in the freezer or a wristwatch in the sugar bowl. **What's normal? Misplacing keys or a wallet temporarily.**

8. Changes in mood or behavior. Someone with Alzheimer's disease may show rapid mood swings – from calm to tears to anger – for no apparent reason. **What's normal? Occasionally feeling sad or moody.**

9. Changes in personality. The personalities of people with dementia can change dramatically. They may become extremely confused, suspicious, fearful or dependent on a family member. **What's normal? People's personalities do change somewhat with age.**

10. Loss of initiative. A person with Alzheimer's disease may become very passive, sitting in front of the TV for hours, sleeping more than usual or not wanting to do usual activities. **What's normal? Sometimes feeling weary of work or social obligations.**

Partner With Someone You Trust

By: Colorado Division of Insurance, Senior Medicare Program (SMP)

Face it. The Medicare system is confusing and complex even to the most informed consumers. The elderly beneficiary and those with cognitive difficulties are particularly in need, in dealing with it. As a result they are targets of scammers who take advantage of the beneficiary's lack of understanding.

The SMP Medicare Fraud program's advice is to encourage the elderly and cognitively impaired consumer to partner with a **trusted** relative or friend to help them understand the issues and work with them effectively. We emphasize the "trust" factor because elderly consumers who are ill, frail, disabled, mentally impaired, or depressed are at risk of elder abuse, including financial exploitation, often by those thought to be in the beneficiary's corner.

A successful "partner" arrangement can protect against the healthcare scammers who market their schemes in many unexpected ways. Predatory healthcare insurance marketing practices include:

- ▶ Agents who do not identify themselves as insurance agents.
- ▶ Agents asking to see beneficiaries' Medicare cards for verification purposes and then the beneficiary finds out later that they were enrolled in a healthcare plan without their knowledge.
- ▶ Agents asking beneficiaries to sign forms for verification purposes or to receive a free gift. Beneficiaries often find that they actually signed the plan's Medicare Advantage application form.
- ▶ Agents who arrive to an appointment early if they know that the Medicare beneficiary has requested a friend or relative to be there for the appointment. By the time of the appointment, and the arrival of the trusted third party, the agents already enrolled the beneficiary and departed.
- ▶ Agents who misrepresent the product they are selling as "supplements" to Medicare, when they are actually Medicare Advantage plans.

Some empowerment tips for caretakers who partner with the elderly beneficiary:

- ▶ **Power of attorney** - appoints a trustee to make financial and legal decisions on behalf of the friend or relatives unable to make their own decisions. It can prevent potential bad judgment by elderly beneficiaries acting on their own and permits a surrogate to act in their behalf.
- ▶ **[Durable power of attorney for health care](#)** - Also called a health care proxy or medical power of attorney. It enables a relative or friend to make health care decisions on the beneficiary's behalf.

If power of attorney is not wanted, family members can help by at least becoming a joint signer of their relative's bank accounts. Additional help from a non-POA "partner" could be:

- ▶ Have creditors notify you if a payment is missed. People with dementia are often likely to miss a payment or overpay. If a person misses payments, his/her insurance or other services may be cut off.
- ▶ Encourage automatic withdrawals or key bills being sent to another family member.
- ▶ Encourage direct deposit whenever possible, such as Social Security payments directly to the bank.
- ▶ Encourage important documents be together in a safe and accessible place for the beneficiary's use.

Beneficiaries need information on how to avoid falling victim to unscrupulous marketers, spotting the red flags and how to protect themselves. SMP can help with that. The SMP Medicare Fraud Program is a consumer-friendly, free counseling service that helps educate people on Medicare and aids the public in general on Medicare fraud and abuse. Further, SMP is ideally situated with affiliates throughout the state and easily accessible. Usually, same-day service is available by telephone. SMP has been in existence for over a decade and has given assistance to countless seniors and people with disabilities across the state, protecting them against abusive schemes that disrupt their Medicare health care coverage and services.

Call SMP at 1-888-696-7213 for additional information on protective measures you can take.

The Coalition Steering Committee is made up of the following volunteer members:

Amy Nofziger – Director, AARP ElderWatch - 720-947-5306

Audrey Krebs – Colorado Division of Aging and Adult Services
– 303-866-2846

J.D. Wykstra – Aurora Police Department - 303-739-6349

Barbara Martin-Worley – Colorado State University Extension Service,
Denver County – 720-913-5266

Pat Stanis – Colorado Adult Protective Service – 303-866-2834

Sara Canfield – Morgan County Adult Protective Service - 970-974-2440

Saori Kimura – Long Term Care Options – 720-974-0300

Shelley Hitt – Colorado Long Term Care Ombudsman – 303-733-0300

Vaughn Pepper – Westminster Police Department – 303-430-2400 x4415

Colorado Coalition for Elder Rights and Adult Protection programs are available to all without discrimination.

Send address changes to:

Attn: CCERAP
1575 Sherman Street, 10th Floor
Denver, CO 80203

**Elder Abuse Awareness
Day
June 15, 2009**

MEETING CALENDAR:

April 29, 2009

“Responding to People with
Dementia”

July 15, 2009

Topic – to be announced

September 16, 2009

Crimes Against At Risk
Adults (at Keystone). See
inside.

More information:

WWW.CCERAP.ORG

***“The single biggest problem
with communication is the
illusion that it has taken
place”
– G.B. Shaw***