

AGING & DISABILITY RESOURCE CENTER

SPECIAL INTEREST ARTICLES!

May is ADRC Month - pg 3

May is Older Americans Month - pg 16

SAVE THE DATES!

Powerful Tools for Caregivers - May 4

Confident Caregiver Conference - May 25

Memory Café Grand Re-opening - June 13 & 28

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- Dementia Support
- Resources Related To Aging Or Living With A Disability
- Private And Publicly-Funded Long Term Care Options
- Caregiver Support

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333 E. Washington St., Suite 1000, West Bend, WI 53095

ELDER BENEFIT SPECIALIST'S CORNER

COURT UPHOLDS RIGHT TO APPEAL FOR CERTAIN MEDICARE PATIENTS ON "OBSERVATION STATUS" - JENNIFER FECHTER

A federal appeals court has decided that Medicare must provide appeal procedures for hospitalized beneficiaries who are reclassified from inpatients to "outpatients" receiving "observation services," a designation that can have severe ramifications. A nationwide class of Medicare beneficiaries won the right to appeal at a trial held in 2019. The class is represented by the Center for Medicare Advocacy, Justice in Aging and *pro bono* firm Wilson Sonsini Goodrich and Rosati. The federal government appealed the trial decision in 2020.

In a decision issued January 25, 2022, the U.S. Court of Appeals for the Second Circuit found that the Medicare program violates the due process rights of beneficiaries by failing to provide any recourse for patients who are admitted as inpatients, but whose status is then changed through hospitals' "utilization review" process. The court found that Medicare strictly regulates those patient status determinations and places strong pressure on hospitals to follow its rules. Noting that "the decision to reclassify a hospital patient from an impatient to one receiving observation services may have significant and detrimental impacts on [the patient's] financial, psychological, and physical well-being," the court held that class members have a constitutional right to appeal to Medicare.

One of the key consequences of an "observation" designation is the non-coverage of nursing home care. Such coverage is only available if a beneficiary has been hospitalized for at least three days as an *inpatient*. Patients like Martha Levanna of Delaware, described in the court's decision, may thus spend more than three days in the hospital, receiving identical care to that received by patients classified as inpatients, but because their care has been designated as "outpatient" observation services, still lack the three-day "inpatient" hospitalization that is required for nursing home coverage. Ms. Leyanna, who has since passed away, spent her entire savings of \$10,000 for nursing home care. Patients may also be forced to forgo required health care altogether because they cannot afford it without Medicare coverage. Yet beneficiaries whose status is changed from inpatient hospital coverage was

wrongful. The trial court had found that this lack of appeals procedures violates the Due Process Clause of the constitution.

Alice Bers, Litigation Director of the Center for Medicare Advocacy, said, "The court recognized that this case is about fundamental fairness. Many older adults and people with disabilities will now have the opportunity to appeal to Medicare for inpatient coverage of their hospital and nursing home services—coverage that can make the difference between getting critical health care and going without."

Carol Wong, Senior Staff Attorney with Justice in Aging said, "In addition to the substantial financial costs borne by patients, the appellate court recognized the emotional and psychological costs that an outright denial of inpatient coverage without recourse has. Now, patients will no longer be forced to forgo medically necessary care simply because of a classification error."

Luke Liss, Senior Litigation Counsel and Pro Bono Counsel of Wilson Sonsini said, "We are thankful to the district court and the court of appeals for their time and careful attention in this matter. We are grateful for the opportunity to advocate in this case alongside our cocounsel for patients across the nation in need of critical care. Given the stakes for often very vulnerable patients who do not have time on their side, we hope that the government will accept this ruling and that a right to appeal for inpatient coverage will be implemented as soon as possible. In any event, our hearts remain with those patients who have been deprived of such opportunity, as well as the doctors and staff that have courageously advocated for them for many years. Fundamentally, this case is about fairness and care for older adults nationwide. We will continue to advocate until the right to an appeal for Medicare coverage is implemented."

This class is estimated to contain hundreds of thousands of beneficiaries with claims dating as far back as 2009. *Source:* The Center for Medicare Advocacy (http://www.medicareadvocacy.org)

ADVOCACY IN ACTION - ADRC MONTH

May is Aging and Disability Resource Center month!

ADRCs offer welcoming and accessible places where aging and older adults, people with disabilities, and their families can be connected to reliable information, unbiased advice about options, and access to a wide variety of resources and services.

ADRC services are free and help individuals and families make informed choices, conserve their personal resources, maintain self-sufficiency, and delay or prevent the need for public resources and potentially expensive long-term care.

ADRCs offer information, assistance and referral for local community services; provide options counseling to meet one's immediate and future needs, assists



individuals who wish to apply for publicly funded long-term care or public benefit programs such as Medicaid and Medicare among other services.

ADRC staff are available Monday 8 a.m. — 7 p.m. and Tuesday through Friday 8 a.m. to 4:30 p.m. We are here to help you and your family with a wide variety of community resource options.

Please call 262-335-4497 or email adrc@washcowisco.gov for further information. *Source: dailyunion.com*

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CALL 800.950.9952

DISABILITY BENEFIT SPECIALIST'S CORNER

DRIVER LICENSE INVISIBLE DISABILITY

When a police officer pulls over a vehicle it is routine for the officer to run the driver's license or plate to see information about the person's vehicle, driving history, and criminal record. Sometimes, however, the driver may be capable of driving but have certain medical conditions or behaviors that could be misinterpreted by police. These conditions, in turn, could put the driver in danger. For example, conditions could make the driver more anxious, agitated, or cause difficulty communicating.

Effective January 1, 2019, an applicant for a Wisconsin driver license, identification (ID) card and/or vehicle registration can choose to disclose on these documents that they have a disability that may not be immediately apparent to another person.

The conditions include the following:

- Appears deaf or unable to understand;
- Has difficulty speaking or communicating;
- Engages in repetitive or self-stimulating behaviors such as rocking or hand flapping;
- Appears anxious, nervous, or upset;
- Becomes agitated due to physical contact or stressful situations;
- Acts indifferent or unresponsive; and
- Other.

A person can complete the Invisible Disability
Disclosure form MV2167 to make such a disclosure
and send it to the address on the form or present it to
their local DMV Service Center. The disclosure will be
available so that when officers run driver license and



Photo Credit: disabledparking.com

plate information they will also be alerted to the invisible disability.

An invisible disability disclosure is completely voluntary, and a person can remove information about their invisible disability at any time by using the same form MV2167.

Source: GWAAR Legal Services Team

SENIOR NUTRITION PROGRAM 50TH ANNIVERSARY

Since 1972, the national Senior Nutrition Program has supported nutrition services for older adults across the country. Funded by the Older Americans Act (OAA), local senior nutrition programs serve as hubs for older adults to access nutritious meals and other vital services that strengthen social connections and promote health and wellbeing.

The Administration for Community Living (ACL) has chosen "Celebrate. Innovate. Educate." as the theme for the Senior Nutrition Program's 50th anniversary. With this theme, they celebrate the many accomplishments of the national and local programs; acknowledge innovative approaches used to support seniors and look at how education can help communities understand and use the nutrition program and the impact of nutrition services.

There are seven Senior Dining meal sites throughout Washington County - Germantown, Hartford, Slinger,



SENIOR NUTRITION PROGRAM

CELEBRATE • INNOVATE • EDUCATE

Jackson, Kewaskum and two sites in West Bend. The congregate nutrition program offers people 60+ the opportunity to enjoy a hot lunch with other seniors. Hot lunches can be delivered to homebound people age 60 and over who meet all eligibility requirements. Please call the ADRC at 262-335-4497 for more information.

Source: Administration for Community Living

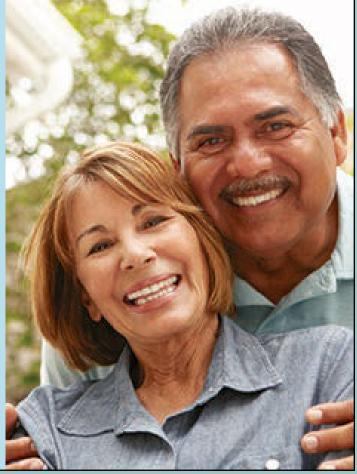
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NUTRITION, HEALTH & WELLNESS CORNER

VITAMIN D - KRISTEN HOSKING RD, CD

We have all heard about the importance of getting enough Vitamin D every day. It is an important nutrient that your body needs for building and maintaining healthy bones. Without Vitamin D, your bones can become soft, thin and brittle. This is because your body absorbs calcium (the primary component of bone) when Vitamin D is present. Therefore, Vitamin D is an important nutrient to help prevent osteoporosis. What other health conditions can Vitamin D help with? Vitamin D can also:

- · Help maintain a good immune system
- Keep your veins and arteries working correctly
- Work to keep your heart muscle and other muscles healthy
- Help reduce inflammation
- Help reduce insulin resistance

How much Vitamin D do you need?

Adults ages 51- 70 years old should be getting at least 600 IU (International Units). Adults older than 70 should be getting at least 800 IU of vitamin D. However, some sources say you should consume up to 1000 IU of vitamin D past the age of 70. If you are older than 65, it is recommended that you get a blood test and speak with Your doctor to tailor a treatment plan to your body.



Photo Credit: algaecal.com

Vitamin D is called the "Sunshine Vitamin", because the most common way your body produces Vitamin D is by converting direct sunlight into an active form of the nutrient. The problem is, many older adults do not get regular exposure to sunlight and have trouble absorbing

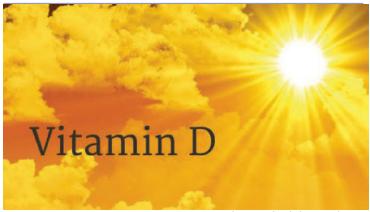


Photo Credit: diabetesendo.com

Vitamin D. The amount of vitamin D your skin makes depends on many factors, including the time of day, season, latitude and your skin pigmentation. Depending on where you live and your lifestyle, Vitamin D production might decrease or be completely absent during the winter months. In the summertime, sunscreen, while important to prevent skin cancer, also can decrease vitamin D production.

Vitamin D is not naturally found in many foods, but you can get it from fortified milk, fortified cereal, and fatty fish such as salmon, mackerel and sardines. Vitamin D is also found in egg yolks, liver, mushrooms, cheese and even some fortified juices. Unfortunately, it is very difficult to obtain enough vitamin D every day through food intake alone, as the amount of Vitamin D in those foods is minimal. For example, an 8-ounce glass of milk provides approximately 100 IU of Vitamin D.

Most of us do require a supplement to meet our Vitamin D needs. Before you pick up a vitamin D supplement, it makes sense to have a conversation with your doctor. The only way to know the status of your vitamin D level is through a simple blood test. Once you and your doctor know your level, you can set up a plan on how to either increase the level or maintain it. It is also important to talk with your doctor, as Vitamin D can interact with certain medications.

THANK YOU VOLUNTEERS!

NATIONAL VOLUNTEER WEEK, APRIL 17 - 23, 2022

For many years we have relied on the generosity of countless volunteers to deliver meals to Washington County's homebound adults in Germantown, Hartford, Jackson, Kewaskum, Slinger and West Bend. Every day, our fantastic volunteers offer a friendly smile, a caring heart and a nutritious meal . A heartfelt THANK YOU to each and every one of our volunteers for going above and beyond every day. We simply couldn't do it without you! Without our volunteers, we would not be able to provide this valuable service. For information on joining these volunteers, please call 262-335-4497. Please join us in thanking our 2021 Volunteers!

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<u>GERMANTOWN</u> - Lester Borman, Ann Dragen, Judy Fleiss, Kathy Gaszak, Norm Grier, Sue Hafert, Wanda Heimerl, Tom Kolda, Katelyn Latourneau, William Lucas, Neil McGinn, Annegret Paas, Mike Peckman, Gail Prinslow, Jim Purtell, Alice Resch, Tom Route, Tami Schraufnagel, Bill Swanson, Chip Westenberger, Kathy Wolf, Jerry Zimmerman

<u>HARTFORD</u> - Richard Beine, Lydia Donner, Dan Filzen, Gail Filzen, Kathy Fleege, John Ganiere, Laura Johnston, Mary Koehler, Jann Merry, Jeff Neu, Herb Perske, Karen Rego, Janet Scholl, Mary Semler, Nancy Skinner, Jim Swanson, Juana Swanson, Charleen Wagner, Ken Weitz, Julie Wilk

<u>JACKSON</u> - Joanne Baumgartner, Kevin Berben, Paul Brinkman, Lyn Fadden, Jan Hanson, Len Hanson, Deb Kahn, Betty Jo Kiefert and Paul, Leona Ksioszk, Joe Mack, Gary Malcom, Jan Malcolm, Marilyn Schmidt, Nancy Skinner, Mary Weiland, Michael Wulf, Pam Wulf, Jeff Yanke, Cheryl Zimmerman, James Zopf

<u>KEWASKUM</u> - Cathleen Anderson, Jean Bath, Thomas Bulin, Judith Cayner, Mark Cayner, Gregory Gutjahr, Russ Heberer, Dale Huhnke, Dean Larson, Nancy Lukas, Dean Schmidt, Ron Stange, Bernice Stange

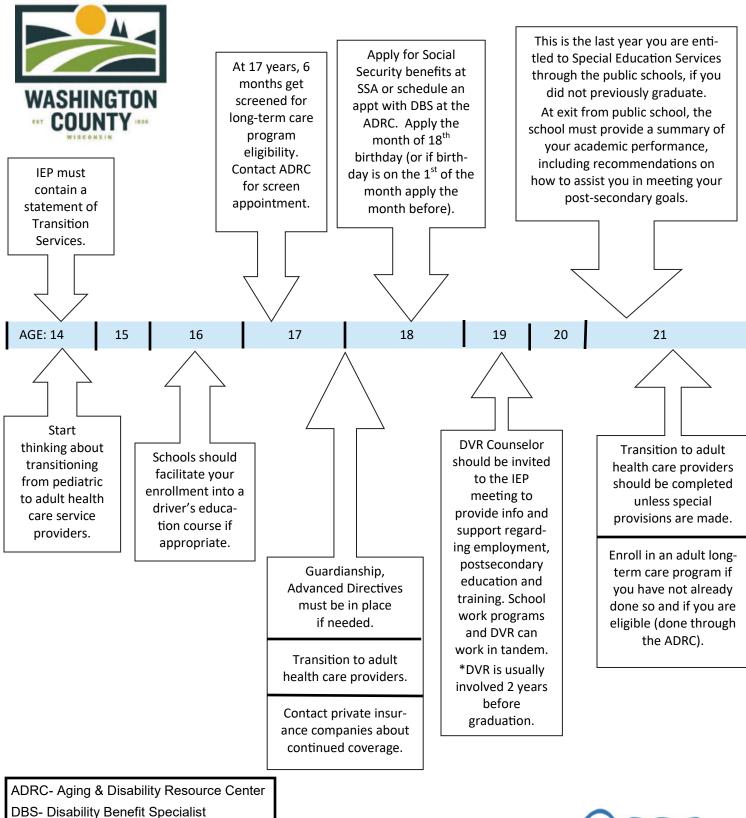
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<u>SLINGER</u> - Cindy Behmke, Jason Dziedzic, Lisa Dziedzic, John Kreuser, Terry Lyon, Elliott Sanders, Ron Schmidt, Robert Stuettgen, Cathie Sunday, Irene Wolf, Marlene Yogerst, Mike Yogerst

<u>WEST BEND</u> - Leslie Beistle, Jody Bender, Fred Beste, Jack Bielaga, Tom Blish, Louise Blum, Sharon Brand, Kathy Champney, Bonnie Conway, Ann Cording, Mark Dalton, Jean Eimon, Jenny Engel, Reiny Follmann, Rosalie Follmann, Carol Gunsburg, Kathy Hoyt, Bruce Kippenhan, Ann Kissinger, Gene Kissinger, Denise Klink, Marge Koenitzer, Curtis Lewandowski, Leonard McGinnis, Lori Merrick, Cathy Moen, Sylvia Moore, Steve Niebauer, Guy Pearson, Linda Pearson, Glen Pusch, Gabrielle Regall, Bob Reisweber, Bruce Reynolds, Chuck Ritzenthaler, Dan Schneider, Kathy Schneider, Michelle Stanisch, Deb Streets, Beverly Taylor, Henry Tesker, Karen Vanbeek, Charles Wilfer, Lee Zingler

TRANSTIONAL RESOURCE SERVICES CORNER

TRANSITION TIMELINE FOR STUDENTS WITH INTELLECTUAL & PHYSICAL DISABILITIES - REBA FREDERICKSEN



DVR- Division of Vocational Rehabilitation

IEP- Individualized Education Plan

SSA- Social Security Administration



WHY IS IT IMPORTANT TO PLAN FOR THE TRANSITION TO ADULT LIFE?

Young people, nearing adulthood, have many decisions to

Information, assistance and referral to local community resources

- What kind of job do I want?
- Where will I live, and with whom?
- What do I want to do for fun?

In addition, young people with disabilities, who receive services and supports as children, will also need to consider how to find services and supports as adults. If you are a teen or young adult receiving services as a child, or if you are the parent of a young adult, it is important to start planning for the transition to adulthood as early as possible. The sooner the planning begins for life after high school, the smoother the transition. Family members, teachers, and the people you know and trust can help during this planning process. Planning for transition gives you time to learn about and understand the changing roles, responsibilities, and opportunities as an adult. Planning ensures that you make informed decisions about your life. Your Support and Service Coordinator, through the Children's Long-Term Support Waiver, can support you and your family with Transition Planning. You can also contact the ADRC of Washington County.

My name is Reba Fredericksen and I am an Information and Assistance Specialist at the ADRC. I am also the contact person for Youth Transition Services. At the ADRC of Washington County, we provide information and resources on future planning for young adults (ages 17 -21) who have physical or intellectual disabilities. The Transitional Resources offered are as follows:

- Information, assistance and referral to local community resources
- Provide information on publicly funded Long Term Care Programs (i.e. Family Care, Partnership, Self -Directed Supports and IRIS).
- Screen for Long-Term Care Program functional and financial eligibility.
- Attend student's IEP when needed.
- Refer to the ADRC Disability Benefit Specialist regarding the Social Security Application process or Medicaid related questions.

Please feel free to contact me at the ADRC if you have any questions or would like to schedule an appointment to further discuss youth transition services or the timeline. I can be reached at 262-335-4497 or

email reba.fredericksen@washcowisco.gov



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This project was supported, in part by grant number 90MPPG0041-01-00, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201.



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ADRC CORNER

GETTING TO KNOW OUR ADRC STAFF MEET STEPHANIE THULL, INFORMATION AND ASSISTANCE SPECIALIST

My name is Stephanie Thull and I am the newest Information and Assistance Specialist to the Aging and Disability Resource Center (ADRC). Not to worry, I am not "new" to the job. I transferred from Fond du Lac County ADRC to Washington County ADRC in December 2021. I worked as an Information and Assistance Specialist in Fond du Lac County for almost 1 ½ years. Although it was a tough decision, I am so happy to be working in Washington County again! Prior to my role at the ADRC in Fond du Lac and Washington County, I was a Family Care Case Manager for 5 years for a local Managed Care Organization and worked throughout the Washington County area. I am so excited to be back working in Washington County and helping our community members in connecting them with information or resources to meet their needs. In addition to providing information and assistance, I also assist in helping to determine individual's eligibility for Medicaid Long Term Care Programs.

I attended Marian University in Fond du Lac and graduated with a Bachelor's degree in Criminal Justice and Psychology. While attending college, I thought my intentions were going to be to work in the criminal justice field, but had a change in heart during my last semester of college. It was when I was working as a caregiver at an assisted living facility that I realized my true passion was working with the elderly/vulnerable-from there, the rest is history! I have been so blessed to have been given the opportunities to work with and advocate for vulnerable individuals in my past and current professional role. Everyday there is something new to learn, whether it's about a new provider, program, or resource.

I was born and raised in Washington County and reside in the area. I am married and just celebrated my 4th year wedding anniversary and have 2 boys. My boys are 3 years old and 2 years old and keep me busy! As if I am not busy enough, this past July I made the decision to return to school to obtain my social work certification and I am currently enrolled with UW-Stout. I will be finishing the program in early May 2022 where I



then can become a certified Social Worker through the State of Wisconsin. I am looking forward to finishing school and the upcoming summer so I can spend quality time with those I love and enjoy the sunshine!

Fun Facts about Stephanie T:

- Favorite Hobby: Shopping, but most recently discovered that I enjoy painting furniture.
- Favorite Color: Pink, Black, Gray
- Favorite Book or Author: James Patterson
- Favorite Food (s): Shrimp & Steak! But I am also a snacker and love anything sweet or salty.
- Favorite Season: Fall- I love the beautiful color changes.
- Favorite Sport or Sports Team: Football & Green Bay Packers! Go Pack Go!
- Favorite Ice Cream Flavor: Mint Chocolate Chip or Spumoni
- Do you own pets?: Yes- I have 1 cat (Moose) and 1 dog (Tank). My dog is a Sharpei Beagle mix and my cat is black and white.
- What TV series have you binge-watched recently?: Third Watch
- What was your nickname growing up?: Giggy
- Fun Fact about Yourself: My first car was a
 Mitsubishi Eclipse and was a manual, so I know
 how to drive stick shift

UPCOMING EVENTS: POWERFUL TOOLS FOR CAREGIVERS CLASS BEING OFFERED IN MAY

Caring for someone with a chronic illness such as dementia, cancer, heart disease, Parkinson's disease or stroke can be physically, emotionally and financially exhausting.

Powerful Tools for Caregivers is an educational program designed to help family caregivers take care of themselves while caring for a relative or friend.

Participants will learn to:

- Reduce stress
- Improve self-confidence
- Better communicate feelings
- Increase their ability to make tough decisions
- Locate helpful resources.

Class meets for 2 hours, once per week for six weeks.

Dates: Wednesdays - May 4, 11, 18, 25 and June 1, 8, 2022

Time: 5:30 - 7:30 pm

Location: Public Agency Center, Room 1113

333 E. Washington Street

West Bend



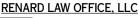
Cost: Donation \$15 per person which covers cost of *The Caregiver Handbook* and materials. Scholarships are available.

Registration is required:

To register, call Tammy Dickman At 262-335-4497

Space is limited; register early!

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ADRC CORNER

BEING ALONE VS. BEING LONELY VS. SOCIAL ISOLATION

Most of us enjoy some solitude and time alone to do what we want when we want on our own terms and schedule. However, being alone is different than being lonely. Social isolation is the lack of social contacts and having few people to interact with regularly.

Loneliness and social isolation are on the rise in Wisconsin and across the United States, exacerbated by the COVID-19 pandemic. While people of all ages, backgrounds, and abilities can experience loneliness and social isolation, older adults and people with disabilities are uniquely susceptible which puts them at risk for significant health problems.

In the U.S., 40% of people who have a disability and 43% of people age 65 or older say they feel lonely some or all of the time. According to AARP 2020 Foundation report, two –thirds of adults in the U.S. are experiencing social isolation with 66% reporting their anxiety levels increased during the pandemic. Given the scope of the problem, researchers, agencies and organizations throughout the state have joined forces to form the Wisconsin Coalition to End Social Isolation and Loneliness (WCESIL) to address the challenges and find community-based solutions.

Shrinking social circles, poor health, life changes, and even transportation challenges can mean isolation for older adults. If isolation leads to loneliness, it can have a devastating effect on health and quality of life.

The Health Risks of Loneliness - You don't have to be alone to feel lonely. Loneliness is the perception of being alone and isolated, and having a feeling of disconnectedness.

This emotional state has physical consequences that can be devastating:

- The lack of social relationships is as much a risk factor for death as smoking or obesity.
- Loneliness can cause high blood pressure, increase the risk of depression, and cause a higher level of the stress hormone cortisol.
- People with few social connections or who feel lonely have 29% higher risk of heart disease and 32% higher risk of stroke.
- Lonely people have a faster cognitive decline than those who have more satisfying social connections.

Fortunately, there are things you can do to prevent social isolation for yourself or someone in your life. While there are inherent challenges in finding and supporting lonely and isolated older adults and people with disabilities, there is also strong interest in finding community-based solutions.



Photo Credit: cdc.gov

What can we do? As a start, the group encourages people to reach out to those who are isolated and may be lonely, not just during the holidays but throughout the year. Taking a moment to call, video chat or visit can make a big difference in the life of someone who lacks meaningful connections.

We can check in on friends, family and neighbors now and all year round. Make a friendly phone call to see how someone is doing. Ask if they need anything—groceries, supplies for a hobby, or their driveway or walk shoveled.

Face-to-Face Time - Phone calls, emails, even Zoom, Skype, or FaceTime are nice, and when friends or family live far away, they can be your only options. But it's important to have in-person interactions, too. In fact, a study found that the mental health benefits of regular face-to-face social interactions—especially among older adults—reduce the risk of depression.

Group Activities - A recent study found the group involvement that participants lost in the year after retirement, decreased the quality of life by 10%. Even if you don't like big groups, there are ways to be involved in rightsized groups that will make life better:

- Volunteer throughout your community.
- Explore options at your local church, such as group studies, choirs or service projects.
- Have some fun with a regular bridge or poker night, book club or sewing group.

Loneliness shouldn't be brushed aside as a normal part of aging. Acknowledge it, then take the first step toward a better—and possibly longer life.

If you would like to discuss social isolation further or have questions, please contact the ADRC at 262-335-4497. Source: Darlene Kramer, ADRC Regional Coordinator; Wisconsin Institute for Healthy Aging; koelschseniorcommunities.com



Confident Caregiver Conference Wednesday, May 25, 2022 Moraine Park Technical College, West Bend

Join us for an educational day specifically for caregivers! Topics and presenters include:

Scams and Seniors

Lieutenant Tim Kemps, Washington County Sheriff's Department

Proper Body Mechanics

Abi Jans, PT, ATI Physical Therapy

Managing Stress

Ashlie Koerber and Mona Dickmann, ADRC of Washington County Visit with members of the Washington County Caregiver Coalition to learn about the services they bring to our community. Lunch will be provided. Questions? Contact Tammy Dickman at 262-335-4497.





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CAREGIVERS' CORNER

DID YOU KNOW ... ? MEMORY CAFÉ EDITION - TAMMY DICKMAN, CBSW

Washington County is home to THREE memory cafes. What is a memory café, you ask? A memory café is a safe and welcoming place for people with memory loss AND their care partners to come together to socialize, participate in activities, and, of course, enjoy refreshments. Contrary to popular belief, memory cafes are not always held in coffee shops. The memory cafes hosted in Washington County are held in three libraries: Germantown Community Library, Jack Russell Memorial Library (Hartford) and West Bend Community Memorial Library. Each memory café is unique and offers different topics and activities each month. For example, the Germantown Community Library is part of a collaborative effort called the Wild Plum Memory Café. The Wild Plum Memory Café occurs on the 3rd Monday of each month from 3:00-4:30 p.m. and the location rotates between libraries in Brookfield, Elm Grove, Germantown, Menomonee Falls and Sussex. The schedule is located on the Memory Café Project Facebook page.

Jack Russell Memorial Library in Hartford hosts a memory café the 2nd Monday of each month from 1:30-3:00 p.m. in the Community Room at the library. This café has been on hold but we are planning a GRAND RE-OPENING EVENT on Monday, June 13 at 1:30 p.m. We will be welcoming Susan J. Marshall, author of "Mom's Gone Missing: When a Parent's Changing Life Upends Yours." Susan will share her caregiving story with us and impart her wisdom on managing emotions, grief and family as a caregiver. Each person in attendance will receive a copy of Susan's book, compliments of the ADRC of Washington County. Following the presentation, attendees will to participate in a "mini-memory café." Our facilitators will provide an abbreviated memory café experience for attendees to get a taste of the programming we offer at our monthly memory cafes.

The West Bend Community Memorial Library is also host to a memory café. This memory café meets the 4th Tuesday of the month in the Storyroom from 1:30-3:00 p.m. We also plan to hold a GRAND RE-OPENING



Photo Credit: AgeGuide Memory Café

EVENT on Tuesday, June 28 at 1:30 p.m. We are excited to welcome Former Wisconsin Governor Martin J. Schreiber, author of "My Two Elaines: Learning, Coping, and Surviving as an Alzheimer's Caregiver." Governor Schreiber shares his caregiving journey with his wife Elaine, revealing his challenges and successes with honesty and humor. Each person in attendance will receive a copy of "My Two Elaines," compliments of the ADRC of Washington County. Attendees at this event will also participate in a "minimemory café."

Registration for the GRAND RE-OPENING EVENTS is not required but it is requested to assure we have enough books for those in attendance. Please sign up by contacting Tammy Dickman, Dementia Caregiver Support Specialist at the ADRC of Washington County at 262-335-4497 or via email at tammy.dickman@washcowisco.gov. Any questions or requests for additional information about memory cafes can be directed to Tammy as indicated above.

Free copy of the author's Memory Cafe book to attendees at each presentation! Grand Re-opening





Jack Russell
Memorial Library
Monday, June 13 1:30 p.m.
Susan A. Marshall
author of
"Mom's Gone Missing"

West Bend Community
Memorial Library
Tuesday, June 28 1:30 p.m.
Martin J. Schreiber
author of
"My Two Elaines"



The authors share their caregiving experiences and wisdom with us. Following their presentations, stay for a mini-memory cafe and get a taste of what we do each month at our memory cafes!

Registration not required but is suggested.

Contact Tammy at 262-335-4497 to register.



Event Sponsors: ADRC of Washington County, Jack Russell Memorial Library, West Bend Community Memorial Library



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Home health

Nursing, therapy, and other specialized services in the privacy and comfort of your home help you manage a chronic illness or recovery from surgery or an accident. Our goal is to help you meet your recovery goals, improve your quality of life, and help you stay safely in your home.

Our services include:

- Health assessments
- · Patient and family education
- Treatment solutions
- Physical, occupational, and speech therapy

Hospice

Our team is here to compassionately assist you and your family. We are here to answer your questions, care for your needs, and support you on your journey home.

Our services include:

- Emotional, social, and spiritual support
- Overseeing patient care
- Pain management and symptom relief





AGE MY WAY: MAY 2022

Every May, the Administration for Community Living (ACL) leads the nation's observance of Older Americans Month (OAM). In 2022, ACL will be focusing on aging in place—how older adults can plan to stay in their homes and live independently in their communities for as long as possible. The 2022 theme is *Age My Way,* an opportunity for all of us to explore the many ways older adults can remain in and be involved with their communities.



CONTACT INFORMATION

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