

Aging & Disability Resource Center (ADRC): 715-258-6400 • Toll Free: 1-866-739-2372

E-mail: ADRC@co.waupaca.wi.us • 811 Harding Street • Waupaca, WI 54981 • Monday–Friday 8:00 a.m.–4:30 p.m.



**WORLD ELDER ABUSE
AWARENESS DAY**
Building Strong Support for Elders



NCEA
National Center on Elder Abuse



June 15th

107 **one hundred and seven.**
Reports of Elder Abuse,
Neglect, Self-Neglect and
Financial Exploitation in
Waupaca County in 2018.



- 53 reports of elders who may be neglecting their own needs
- 20 reports of financial exploitation of elders
- 12 reports of another person neglecting the basic needs of an elder person
- 12 reports of another person emotionally abusing an elder person
- 5 reports of another person physically abusing an elder person
- 2 reports of another person sexually abusing an elder
- 2 reports of the unreasonable confinement or restraint of an elder person
- 1 report of other abuse of an elder person

107 TOTAL REPORTS in 2018

World Elder Abuse Awareness Day (WEAAD) was launched on June 15, 2006 by the International Network for the Prevention of Elder Abuse and the World Health Organization at the United Nations. The purpose of WEAAD is to provide an opportunity for communities around the world to promote a better understanding of abuse and neglect of older people by raising awareness of the cultural, social, economic and demographic processes affecting elder abuse and neglect.

Call to Report a Concern:
715-258-6400

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**Waupaca County
Dept. of Health &
Human Services:**
715-258-6300



Current and past issues of *The ADRC Connection* are available on our website www.co.waupaca.wi.us.

Visit the regional website
www.yourADRCresource.org

“Like” the ADRC on Facebook!

 **Waupaca County Aging & Disability Resource Center:**
www.facebook.com/adrcofwaupacacounty

Our mission is to be a resourceful place of information and respectful provider of support for the elderly and disabled residents of Waupaca County and their caregivers and to help them achieve dignity and quality of life through maximum independence and choice.

PLEASE NOTE: Being an advertiser in this newsletter does not constitute an endorsement from Waupaca County Department of Health & Human Services.



Understanding VA Pension



Jesse P. Cuff
 Waupaca County Veterans
 Service Officer
 Courthouse,
 811 Harding Street
 Waupaca, WI 54981
 715-258-6475
[www.facebook.com/
 WaupacaVeteransOffice](http://www.facebook.com/WaupacaVeteransOffice)
 Hours: Monday – Friday 8am-4pm

WHAT IS NON-SERVICE CONNECTED PENSION?

If you're a Veteran who served on active duty under honorable conditions you might be eligible for VA Non-Service Connected Pension. For Veterans who qualify, VA pension is needs based and may pay a monthly benefit.

WHO IS ELIGIBLE?

You may be eligible if:

- You were discharged from service under other than dishonorable conditions, **AND**
- You served 90 days or more of active duty with at least 1 day during a period of war time*, **AND**
- Your countable income is below the maximum annual pension rate (MAPR), **AND**
- You meet the net worth limitations, **AND**
- You are age 65 or older, **OR**, you have a permanent and total non-service connected disability, **OR**, you are patient in a nursing home, **OR** you are receiving Social Security disability benefits.

*Veterans who entered active duty after September 7, 1980, must also serve at least 24 months of active duty service. If the total length of service is less than 24 months, the Veteran must have completed their entire tour of active duty.

HOW MUCH DOES VA PAY?

VA calculates annual pension by first determining, for your particular circumstances, the Maximum Annual Pension Rate (MAPR) - an amount set by Congress. VA determines countable income by subtracting from your total income, received in a particular 12-month period, the amount of those exclusions provided by law*. VA then subtracts your countable income from the MAPR; the difference is your annual pension entitlement. VA divides this amount by 12 and rounds down to the nearest dollar, this is the approximate amount of your monthly pension payment.

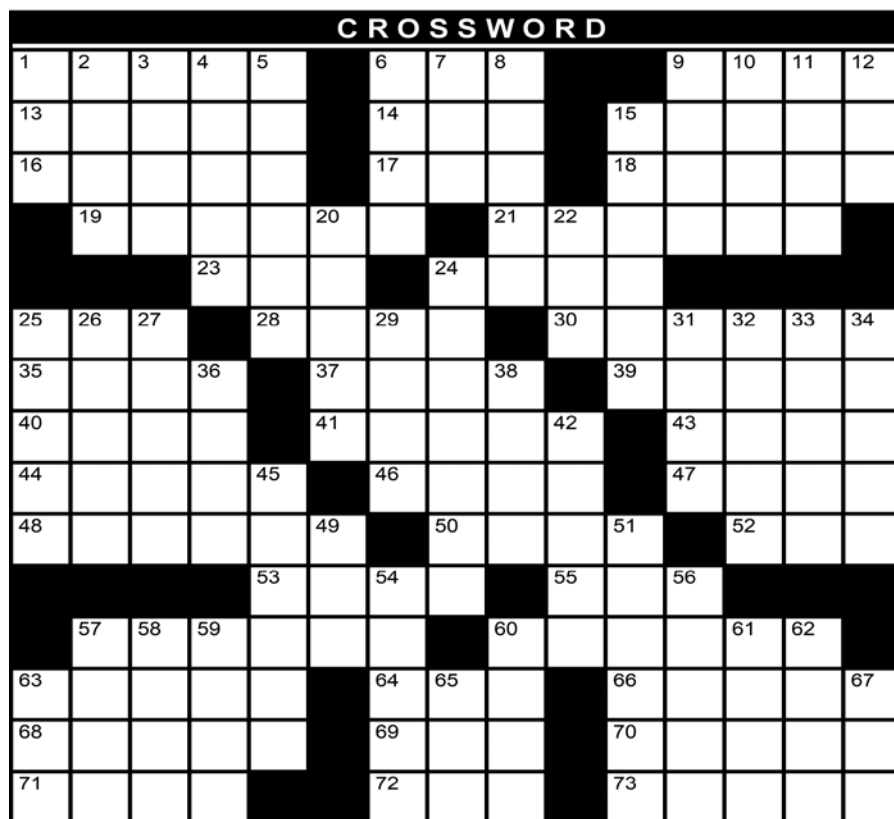
*VA deducts certain expenses paid by you, e.g., unreimbursed medical expenses, from your annual household income, which will decrease your countable income and increase your monthly pension payment. A complete list of these exclusions is provided in section 3.272 of title 38, Code of Federal Regulations. These regulations are available at the Government Printing Offices website.

Note: To determine your eligibility, check eBenefits, contact VA Eligibility Center at 1-888-768-2132, or contact our office at 715-258-6475.

Understanding these and other VA Benefits can seem daunting, but the Waupaca County Veterans Service Office can help. If you could use a little help navigating the VA Benefit system please schedule an appointment today!

Source / for more information:

- <https://benefits.va.gov/benefits/factsheets.asp>
- <http://www.benefits.va.gov/pension/>
- <http://www.benefits.va.gov/PENSION/wartimeperiod.asp>
- http://www.benefits.va.gov/pension/current_rates_veteran_pen.asp



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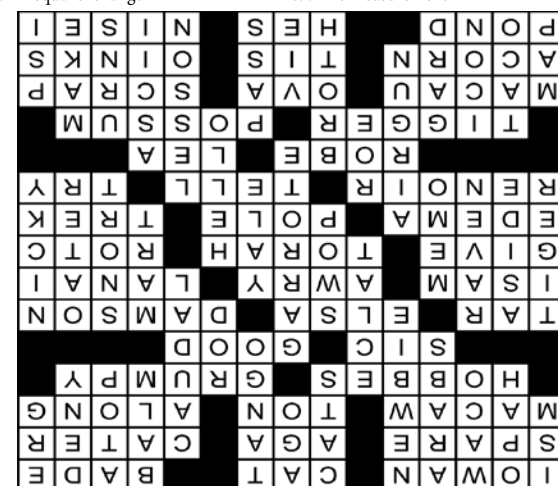
THEME: FAMOUS CATS

ACROSS

- Des Moines native
- *Cool ____
- Bid, past tense
- Tire in the trunk
- Eastern title
- Provide food
- Avian talker
- Freight weight
- "____ came a spider..."
- *Calvin's best friend
- *Internet celebrity ____ Cat
- Urge Spot to attack
- Not naughty
- Smoker's lung residue
- *Lioness of "Born Free"
- Sweet dark purple plum
- Sean Penn's "____ Am ____"
- Wrong
- Hawaiian veranda
- Be charitable
- Synagogue read
- Officer-training program
- Bodily swelling
- Skier's balancer
- Hiker's journey
- Pierre-Auguste of Impressionism
- Switzerland's folk hero
- Encouraging word
- Choir attire
- Actress Thompson
- *Cat of the Hundred Acre Wood
- *T. S. Eliot's "Old ____'s Book of Practical Cats"
- Last European colony in China
- Female reproductive cells
- Junk yard stuff
- Oak fruit
- "____ the season ..."
- Pippen sounds
- Small body of water
- He is
- One born to Japanese immigrants

DOWN

- Philosopher's study
- Moonfish
- Chip and Joanna's hometown
- Omani and Yemeni
- Inexperienced newcomer
- *Andrew Lloyd Webber's Tony winner
- Before now
- T in NATO phonetic alphabet
- *Pain-relieving Tiger ____
- At the apex
- Refuse to accept
- Energy unit
- Relating to a tail
- "Bravo! Bravo!"
- "Maggie May" singer
- Strangulating device
- *Siegfried & Roy feline
- Comment to the audience
- Three-Eyed ____ in "Game of Thrones"
- An equal exchange
- Kwik-E-____ on "The Simpsons"
- Accidental laughter accompaniment
- Cowboy movie
- *Little ____, famous cat clone
- Boss' communique
- New Haven University
- *____ Kitty
- Pneumatic weapon
- Beluga yield
- Tutor's offering
- Soup component
- Binary digits code
- Meal in a shell
- Painting in Orthodox Church
- Pont du ____, ancient Roman aqueduct
- Flirtatious move
- Coffee dispensers
- Manufacture
- Picture in atlas
- Contend
- Tire measurement



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DISCOVER **WHY** MANAWA SHOULD BE **YOUR FIRST CHOICE** WHEN YOU **NEED** NURSING HOME OR ASSISTED LIVING SERVICES

CONTACT US:
 400 E. 4th Street, Manawa WI 54949
 Phone: (920) 596-2566 Email: mcnc@wolfnet.net
 Website: manawacommunitylivingcenter.com
 Manawa Community Living Center

05434953



Mental Health – Healthy Living



Adapted from Wisconsin Department of Health Services

Mental Health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is an important at every stage of life, from childhood and adolescence through adulthood.

Positive mental health allows people to:

- Realize their full potential
- Cope with the stresses of life
- Work productively
- Make meaningful contributions to their communities

Let's Talk About It:

When it comes to mental health, what we say — and how we listen — matters. Here is advice on how to help someone open up about their mental health.

Listen Attentively: Listening attentively involves your full focus and consideration. What is the person telling you? What's their body language tell you? Think back to a time you truly

felt like someone was listening to you, and how you felt. Emulate that.

Listen well so you can absorb what they're saying, and refer back to something they said later on. This not only shows you're listening, but that you care about the person and what they've shared with you.

Make sure to put away all distractions (phone, games, etc.) and face the person you're speaking with. Look at them as they talk to you. Nod your head in understanding when appropriate, and gently inquire about something they brought up.

Ask open-ended questions:

Make sure the conversation is not full of questions the other person can answer with a simple yes or no. Instead, open up a space for understanding by asking open-ended questions like:

- How have you been feeling lately?
- What have you been doing to cope?
- What do you want to do about that?

You can also express your concern and encourage the person to talk about what's going on by offering caring statements like:

You seem to be a bit quiet these days. What's been on your mind?

Don't Assume or Make Judgments: Opening up and reaching out for help can be difficult. If you make assumptions and judgments in response, it can make it even harder for people to express themselves.

Refrain from assuming how a person feels, what they need, or what's going on with them. Instead, ask gently for clarification when you need some.

If your friend or loved one tells you things that make you uneasy, or that you might not agree with, such as how they've been coping with their feelings, or negative perceptions they have of themselves, do your best to set aside all judgment.

Expressing warm-hearted concern and offering support should always be the aim.

Find A Way to Help or Get Help:

Sometimes, you might be able to directly help the person you're concerned about. Maybe all they needed was to vent, or have someone to talk to and help sort out their feelings. For some people, it might be helpful to send them positive text messages

throughout the week, whenever you get the chance.

But there are some cases in which the ways you can help are limited. If your friend is suicidal, for example, then it's time to get help from those more equipped to handle the situation at hand.

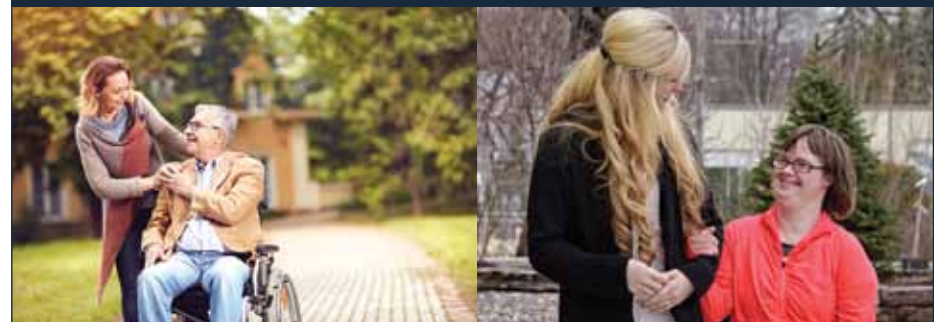
Ask your friend or loved one if they want to get help, and offer them the resources to do so. Assure them there's nothing wrong with getting the help they need and that by doing so, they've taken the first step to feeling better. Sometimes, just hearing this will help lift some weight off of how they're feeling.

Offering to take your friend loved one to these helpful spaces, or to find the proper assistance, can go a long way.

Call Today for Information on Local Mental Health Resources & Services:

715-258-6400

Your local Family Care option for personal care and support



Some of the services we manage with you include:

- Care Management
- Personal Care
- Residential Care
- Medical Supplies & Equipment
- Outpatient Mental Health
- In-Home Supportive Care

For more information about the Family Care Program, contact your local Aging and Disability Resource Center (ADRC).

www.lakelandcareinc.com



DHS Approval 5/2/18

Save the Date
Annual
Volunteer Appreciation
Celebration
September 20th, 2019

Creating a My Social Security Account Online

By the GWAAR Legal Services Team
(for reprint)

My Social Security is the Social Security Administration (SSA) online portal that allows individuals to review their lifetime earnings history, check their current or future benefits, and access many other Social Security services. An individual will need a valid email address and a Social Security number to create an account.

To create an account, go to <https://www.ssa.gov/myaccount/> and follow the steps to create a new

account. You will need to verify your personal information, and you will be asked questions obtained from your credit report to verify your identity. (Note: this process will not affect your credit score.)

Here are some things you may do online through the My Social Security portal:

- Check your earnings history and make sure there are no discrepancies
- See how much you have paid into Social Security throughout the years
- Get an estimate of your future Social Security payments

- Find out how much you will qualify for if you become disabled
 - Determine what family members will receive if you pass away
 - Check the status of pending claims
 - Set up direct deposit of your benefit payment.
 - Keep your account up to date by changing your address or direct deposit information
 - Request a benefit verification letter, which you can use as proof of income
 - Request a replacement Medicare or Social Security card
- If you do create a My Social Secu-

urity account, make sure to keep your login information secure. Choose a password that you can remember but that is hard for others to guess. Do not write down your username and password unless you need to. If you do, put the written password in a secure location such as a locked safe. You may also add extra security to your account by requiring a text message code to be sent to your cell phone every time you need to log in. That way, someone cannot access your account unless they have your cell phone in their possession.

For more information, visit: <https://www.ssa.gov>

How Scammers Use Obituaries

By the GWAAR Legal Services Team
(for reprint)

Recently, the Senior Medicare Patrol (SMP) received information from a Wisconsin resident who had recently lost her husband. Just a few weeks after her husband's death, "Michael," an "insurance agent" called to help the widow "get the lowest price on Medicare." Obviously suspicious, she contacted her county's Aging and Disability Resource Center and the Elder Benefits Specialist made a connection with SMP to investigate the issue. It is very possible that this "agent" found her husband's obituary and reached out to her in a period of vulnerability.

We all know that we shouldn't make our personal information public (such as addresses, birth dates, birthplaces, family members' names, nicknames, or even hobbies). However, we often publicly share personal information just like this when paying tribute to someone at death. The more personal facts you pro-

vide in an obituary, the greater risk of scams – both for the deceased and their survivors.

When writing an obituary, it is best to give the deceased's age but leave out the birth date, middle name, home address, birthplace and mother's maiden name. Even including names of survivors can pose risks. Scammers are always coming up with new and creative deceptions, but the following are some of the most common scams using obituaries:

Identity Theft

Identify theft is not just for the living. Each day, thousands of deceased people are victims of identity theft. In fact, nearly 800,000 people a year are targeted after death because no one is checking their credit reports. Scammers can use details from an obituary to figure out or purchase a Social Security Number, which allows them to fraudulently open credit card accounts, apply for loans, or even file tax returns to collect

refunds. Many people don't know that the first five digits of a Social Security Number are linked to a time and place of birth!

Grandparents Scam

Scammers use names published in obituaries to pose as grandchildren of the deceased, calling grieving survivors with stories about being mugged or arrested and needing money. Research shows that with any scam, your vulnerability is highest in the three years after a major stress. Obituaries help scammers identify grieving spouses immediately following the death and can seem credible by citing names and other personal traits.

Deceptive Debt Collection

Scammers often call spouses, children, or siblings to make a claim that survivors must repay the deceased's debts. However, unless you cosigned the obligation or are otherwise legally responsible, debts are paid from the estate of the deceased person—not from sur-

living relatives.

Fictitious Life Insurance

Sometimes, scammers contact survivors and claim the deceased person took out a huge (but often "secret") life insurance policy. The scammers say that before benefits can be collected, a final premium (or taxes, handling fees, etc.) must be paid. Keep in mind: legitimate insurance companies don't request upfront fees by wire transfer or prepaid debit card.

Burglary

If the deceased's address and the time of the memorial service are in the obituary, burglars know that no one will be home, and neighbors may also be paying respects. Therefore, you'll want to leave the home address out of the obituary and maybe even have a friend or neighbor forgo the funeral and keep watch.

See Kirchner, Sid; Scam-Proof Your Life, AARP Bulletin (March 7, 2018).

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Aging & Disability Resource Center (ADRC)

Hours: 8:00 a.m. to 4:30 p.m. *Walk-Ins Welcome*

Phone: 715-258-6400 or 1-866-739-2372

E-mail: adrc@co.waupaca.wi.us



"Like" the ADRC on Facebook!

Waupaca County Aging & Disability Resource Center:
<https://www.facebook.com/adrcofwaupacacounty>

Waupaca County Courthouse

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Know the signs of a stroke!

BE FAST

BALANCE

Sudden loss of coordination or balance

EYES

Sudden change in vision

FACE

Sudden weakness on one side of the face or facial droop

ARM

Sudden arm or leg weakness or numbness

SPEECH

Sudden slurred speech, trouble speaking, trouble understanding speech

TERRIBLE HEADACHE

Sudden onset of a terrible headache



WISCONSIN COVERDELL
STROKE PROGRAM



WISCONSIN DEPARTMENT
of HEALTH SERVICES
P-02107 (03/2018)

TIME TO CALL 9-1-1
Every second counts!

Medicare Coverage of Vaccines

By the GWAAR Legal Services Team
(for reprint)

You may have seen recent stories in the news about an increase in cases of diseases like measles or hepatitis A, both of which can be prevented by vaccines. Vaccines play an important role in preventing illness. However, knowing if and when Medicare pays for vaccines can be confusing.

Most vaccines that your doctor recommends will be covered by your Medicare prescription drug plan. Medicare prescription drug plans are required to cover most commercially available vaccines, including the vaccine for shingles.

The only exceptions are the vaccines for flu, pneumonia, and hepatitis B, which are covered by Part B. Please note that SeniorCare does not cover any vaccines.

Vaccine Type	Medicare Coverage	Coverage Rules
Influenza (flu)	Part B	Medicare pays for (and recommends) one shot every flu season. Additional flu vaccines may be covered if considered medically necessary.
Pneumonia	Part B	Medicare pays for one shot, recommended for all adults aged 65+ and younger adults with chronic health conditions.
Hepatitis B	Part B	Series of three shots, paid for by Medicare for high- or medium-risk individuals, including those with hemophilia, end stage renal disease, diabetes, and other chronic conditions that lower resistance to infection.
Shingles	All Medicare prescription drug plans must cover	One shot paid for (and recommended) after age 60. Patient must check with plan to find out specific rules for administration and payment.

The amount you pay for your vaccine will vary depending on where you get vaccinated. Check your Medicare prescription drug plan's documents for information about how the plan covers vaccines. Your out-of-pocket costs will usually be lowest at in-network pharmacies or a doctor's office that can either coordinate with a pharmacy to bill your plan for the entire cost of the vaccination or can bill your plan directly for the vaccination.

If you are vaccinated at an in-network pharmacy, you should only need to pay your plan's approved coinsurance or copay for the vaccination. If you get a vaccine at your doctor's office, ask the doctor to call your plan to find it if your plan can be billed directly. If this is not possible, you may have to pay the full out-of-pocket cost for the vaccination and then request reimbursement from

your plan. You might also have to pay the full out-of-pocket cost for your vaccination if your provider cannot coordinate with a pharmacy to bill your plan for the entire cost. In this situation, you will also have to request reimbursement from your plan. You should be aware that your plan will only reimburse you up to the approved amount, so you will not be refunded for any amount you pay the provider above your plan's approved amount.

If you have Extra Help or the low-income subsidy (LIS), you can go to any provider or in-network pharmacy for vaccines. You will only be responsible for the Extra Help/LIS copay. However, if you get your vaccine from a provider who cannot directly bill your plan, you may need to pay the entire bill upfront and then request a refund from your plan.

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SHADOW WOODS
Independent Living at Bethany

Shadow Woods consists of 40 duplexes differing in sizes and layouts, serving those 55 years and older. All duplexes have riverfront, lakefront or wooded views.



THE PINES assisted living
Assisted Living at Bethany

The Pines offers outstanding Assisted Living Apartments for active people who need some help with tasks of daily living. Floor plans include studio, one and two bedroom units. Coming to Bethany in 2017 will be The Pines CBRF, which will be another type of Assisted Living. This care plan offers 24 hour care, all with private rooms.



THE SPRINGS
Wellness at Bethany

The Springs is Bethany's wellness and fitness center. As a member of the gym you have access to HUR fitness equipment and may attend a variety of classes for all aspects of health and well-being.



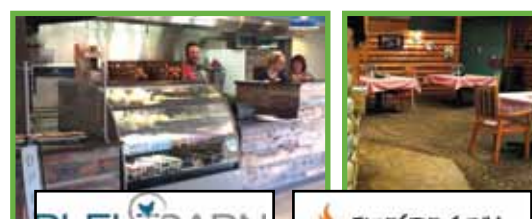
SPRUCE RIDGE
Skilled Nursing at Bethany

Spruce Ridge is Bethany's Skilled Nursing option. Bethany serves residents requiring extensive assistance with daily living activities and skilled nursing care.



HICKORY HEIGHTS
Rehabilitation at Bethany

Hickory Heights is a state of the art rehabilitation unit that Bethany offers for those needing rehab. All rooms are private suites furnished with a fridge, microwave and TV. Each room has a private restroom and shower as well.



BLEU BARN **FIRESIDE GRILL**
WOOD-FIRED SMOKEHOUSE

Bethany has two unique restaurants available right on campus. One is the Bleu Barn, which offers a rustic feel featuring genuine sandwiches, deli foods, pizza, and pastas. The other choice is the Fireside Grill, this one offers a very comfortable and cozy dining setting with home cooked meals.

Bethany Home Inc. is a non-profit leading rehabilitative and healthcare center. Our team of therapists, nursing staff and restorative staff welcome admissions seven days a week.

715-412-0169



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Bethany is an equal opportunity provider.

05343161

The Truth About Aging and Dementia

Adapted from CDC.gov

Your body undergoes many changes with aging. Although there are some normal age-related changes, including in a person's memory and thinking, dementia, or severe memory loss that interferes with daily life, is not part of the normal aging process. Learn what's healthy aging and what's not.

WHAT IS NORMAL AGING?

Signs of aging can start as young as age 30. The process of aging includes many changes in the body including:

Changes in vision are a normal part of aging

- **Heart and blood vessels:** Stiffening of arteries and blood vessels makes the heart work harder. Physical activities such as walking long distances or walking uphill may become more difficult.
- **Bones:** Bones shrink and reduce in density, making them more fragile and likely to break. Carti-



lage in joints may start wearing away, which can cause some pain or stiffness.

- **Muscles:** Muscles lose strength, flexibility, and endurance over time. Muscle mass decreases 3-5% every decade after 30 years of age, and that rate increases over age 60.
- **Bladder and bowel:** The ability for the bladder to stretch and then go back to its normal shape may be reduced. This may cause the

bladder to hold less urine than before, resulting in more frequent trips to the bathroom. Changes in bowel can lead to constipation.

- **Skin:** Skin loses elasticity too, resulting in wrinkles in some people. It also thins and becomes more delicate, making it easier to get bruises and cuts.
- **Vision:** Changes in vision can include far-sightedness, a result of the hardening of the lens. Cataracts, a clouding of the lens in the eye that affects vision, may develop. This can cause blurry vision and ultimately blindness if not treated.
- **Mental health:** Aging is a process with many changes, and it may take a little getting used to. Some people may be depressed, although others may have a sense of fulfillment and feel happy with their lives.
- **Memory and Thinking (Cognition):** Normal aging may mean slower processing speeds and more difficulty with multitasking, but routine memory, skills, and knowledge are stable and may even improve with age. It's normal

to occasionally forget recent events such as where the keys were last placed or the name of the person you just met.

WHAT IS NOT NORMAL AGING?

Needing help with everyday tasks can be a sign of dementia.

Although there are some normal age-related changes in memory and thinking, confusion and memory loss that interfere with your daily life are not part of the normal aging process.

Dementia is a term for a collection of symptoms of cognitive decline including disruptions in language, memory, attention, recognition, problem solving, and decision-making that interferes with daily activities. Although 5.8 million people in the U.S. have dementia, it is not normal aging of the brain.

Other signs of dementia include:

- not being able to complete tasks independently
- difficulty with naming items or close family members
- forgetting the function of items
- repeating questions
- taking much longer to complete customary tasks
- misplacing items frequently
- not being able to retrace steps and getting lost

Discussing memory loss with a healthcare provider can help reduce risk

There currently is no cure for dementia, however, there are medications to help with the symptoms. Here are some steps you can take to reduce your risk:

See **AGING** page 9

“WHAT MAKES MUTUAL INSURANCE A BETTER CHOICE?”

Find out how mutual insurance can work for you.
www.ellingtonmutual.com



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Heidi Stein
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Representative
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SHARED PURPOSE. MUTUAL VALUES.™



Governor Evers' Budget

Better, more affordable care, covering more Wisconsinites

Adapted from Wisconsin Department of Health Services

Supporting Waupaca County

Medicaid expansion is the lever that Wisconsin pulls to infuse new federal dollars into the rest of our health care system, with the aim of improving the health and well-being of every citizen. Medicaid is a critical part of our health care system. In Wisconsin, 1.1 million residents rely on Medicaid for high-quality health care. The budget expands Medicaid to cover childless adults, parents, and caretakers with incomes up to 138% of the federal poverty level, which is about \$17,000 per year for a single person. This expansion will enable an estimated 82,000 additional individuals to access affordable health care.

Medicaid expansion will also allow the state to draw down new federal funds and save Wisconsin taxpayers \$324.5 million. The budget proposes to reinvest these savings into new initiatives to improve health care access and quality for all Waupaca County residents, not just those enrolled in Medicaid. The expansion plus the new initiatives will enable us to

draw down a total of \$1.6 billion in new federal funding. When we combine these new initiatives with all other investments for Department of Health Services programs—from both the state and federal government—the budget provides a total of \$2.6 billion in new funding. Of this, \$2.4 billion will be invested in Wisconsin communities, including \$20 million in Waupaca County.

\$20 million of new investments in Waupaca County

- \$5.9 million Expanding Medicaid to an estimated 630 Waupaca County residents
- \$549,000 Expanding access to behavioral health, including crisis intervention and telehealth services
- \$453,000 Preventing childhood lead poisoning through lead abatement and supporting children with lead poisoning through the Birth to 3 Program
- \$397,000 Improving access to dental services by increasing payments to dental providers, including those who serve people with disabilities, and

- expanding the Seal-A-Smile program
- \$988,000 Enhancing Medicaid benefits and services, including support for the new community health benefit and postpartum coverage for new mothers
- \$558,000 Increasing funding for physicians
- \$213,000 Increasing hospital funding
- \$1.2 million Increasing funding for providers in long-term care programs and services—including Family Care IRIS, and nursing homes—and boosting personal care worker wages
- \$44,000 Increasing access to dementia care specialists
- \$10.3 million Increasing funding for current Medicaid, BadgerCare Plus, SeniorCare, and Food-Share Employment and Training program members, and permanently ending the waitlist to serve all eligible children in the Children's Long-Term Support Waiver Program
- \$46,000 Supporting the Mental Health Consultation program, conditional and supervised release, and the Dispatcher Assisted Cardiopulmonary Resuscitation program

Aging from page 8

- Chronic disease prevention:
 - If you are a smoker, stop smoking.
 - Maintain a healthy blood pressure level.
 - Manage cholesterol levels with exercise and, if needed, cholesterol medications.
 - Keep blood sugar within a healthy range.
 - Get to and maintain a healthy weight.
 - If you drink alcohol, do so in moderation up to one drink per day for women and up to two drinks per day for men.

- Reduce hazards in your environment that could lead to falls or head injury.
- Healthy living:
 - Eat whole foods with plenty of nutrients and vitamins.
 - Exercise, including aerobic physical activity.
 - Get good quality sleep.
- Keep your mind active and stimulated, with challenging tasks such as learning a new activity.
- Maintain social contacts.

Be empowered to discuss memory problems

More than half of people with memory loss have not talked to their

healthcare provider, but that doesn't have to be you. Get comfortable with starting a dialogue with your medical provider if you observe any changes in memory or an increase

in confusion, or just if you have any questions. You can also discuss health care planning, management of chronic conditions, and caregiving needs.



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NCEA
National Center on Elder Abuse

This document was completed for the National Center on Elder Abuse situated at Keck School of Medicine of USC and is supported in part by a grant (No. 90AB0003-01-01) from the Administration on Aging (AOA), U.S. Department of Health and Human Services (DHHS). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging or DHHS policy.

Post-Operative Depression

By the GWAAR Legal Services Team
(for reprint)

Depression after surgery is common, but it's rarely talked about. Doctors spend time prepping someone for surgery in terms of practical needs (like what to eat, wear, and how to manage pain), but there's not enough focus on emotional needs. Some studies show that depression and anxiety can make it slower and harder to heal after the surgery. Therefore, it's helpful for people and their family members to understand why this happens and what can be done about it.

Surgery is an invasion of a person's body, which can be quite traumatizing, whether they realize it or not. Depression can be caused by a number of things, including pain and discomfort, a lack of mobility, an increased dependency on others, and financial stress. For patients who have had an organ or body part removed, a feeling of loss can also play a role.

It can be difficult to tell the difference between post-operative depression and normal feelings of sadness that come with recovery. Some symptoms are the same, such as fatigue and irritability, but post-operative depression lasts longer than two weeks. If left untreated, it can actually go on for months. Surprisingly, feelings of hopelessness can persist even when a patient had a successful surgery and is on their way to a full recovery. And, it doesn't matter how small or large the operation is.

The following is a list of possible symptoms—a person with post-operative depression may feel:

- fatigue
- difficulty making decisions
- eating much more or less than normal
- sleeping much more or less than normal
- feeling a loss of interest in regular activities
- feelings of anxiety, stress, irritability, or aggression
- fidgeting or restlessness
- feelings of despair or hopelessness with no cause
- thoughts of harming oneself or others

The following is a list of possible signs of what you may notice in a person with post-operative depression:

- weight change
- withdrawal from others
- irritability
- changes in self-care/appearance
- personality changes
- tearfulness
- indecisiveness/confusion
- disorganization
- forgetfulness
- self-criticism

People with a history of mental illness are at the highest risk for developing depression after surgery. No one knows the exact cause of post-operative depression, but some triggers may be:

- reaction to anesthesia, antibiotics, or certain painkillers;
- pain and discomfort while recovering;
- physical, mental, and emotional stresses caused by the disorder and/or surgery; and



- facing the possibility of death.
- Having a strong support system is key to recovery. Other things you can do to combat the condition include spending time outdoors (sunlight is a natural mood enhancer), getting enough sleep, maintaining a healthy diet, spending time with loved ones, and finding ways to pass the time, like listening to music, reading, or playing games, while you recover from your procedure. When your body (and brain) is ready, you can slowly get back into your usual routine.



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Changing Relationships in Caregiving

Jane Mahoney
Older Americans Act Consultant
Greater Wisconsin Agency
on Aging Resources

There are many challenges and changes that occur as you start caring for a loved one. One of the most impactful is a change in your relationship with the person you are caring for and with other family members.

If you are caring for an aging parent, you find yourself in a role-reversal situation, taking care of the person who used to take care of you. It may feel awkward

to be the one taking charge and making decisions for the person you call mom or dad. And conversely, your parent may be resistant to your help; either embarrassed or frustrated by their lack of independence or unwilling to let their "child" take care of them.

If you are caring for your spouse, the relationship that was once an equal partnership now turns into a caregiver/care-receiver relationship. You have spent years sharing the day to day tasks, but now you are the one left to make decisions and run the household. And your spouse may no longer be able to express feelings of love to you, leaving a huge gap in what was once an intimate relationship.

There may also be changes in relationships with other family members. Each person has a different idea of what's best for the person needing care which can lead to disagreements. And there may be a lack of awareness about how difficult it is for the main caregiver, resulting in hurt feelings and unrealistic expectations.



Whatever your situation is, as a caregiver you will be coping with changing relationships which will undoubtedly be emotionally difficult. Here are some things that can help you adjust to these changes.

- **Adjust your perceptions and expectations of the person receiving care.** Try to understand what his current needs and capabilities are and accept him as he is now. Letting go of the way things used to be can be painful, but it is necessary to adjust to what is real now. If he is treating you differently, remember that he's not doing it on purpose, it is a result of his disease/condition.
- **Encourage the person receiving care to be as independent as possible.** Don't automatically do things for her. Find out what she can do and help her do as much she can on her own. Not only will this lighten your load, but it also increases her self-confidence and self-worth.
- **Hold a family meeting to help define roles in the caregiving situation.** Setting aside time for everyone to communicate their thoughts and ideas creates a feeling

of teamwork. Involving all family members in a plan of action helps disperse the tasks needed to be done and creates an understanding of each person's role.

- **Talk about how you are feeling.** Sharing your emotions with someone you trust can be very healing. Bottling up your feelings and trying to look stoic will not help. A support group is a safe place to share your emotions with others who are experiencing similar feelings, and you may also learn coping techniques as well.

The most important thing to remember is that these relationship changes are normal, as are the feelings of fear, guilt and anger. Once you've accepted these changes you will be ready to move on and make sense of your new relationships and find peace and satisfaction in your caregiving role.

Need help as a Caregiver?
Contact the Aging & Disability Resource Center!
ADRC@co.waupaca.wi.us
715-258-6400



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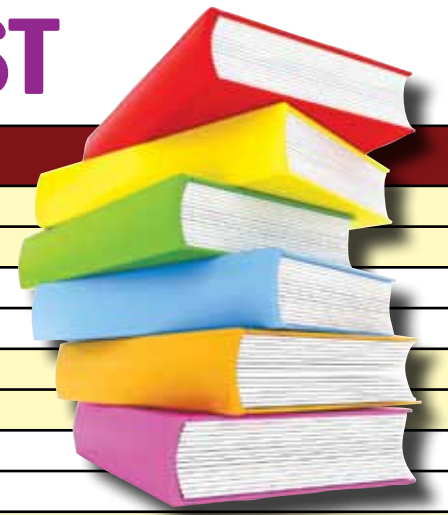


Transforming People and Communities



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CAREGIVER BOOK LIST



Title	Author
A Funny Thing Happened on My Way to the Dementia Ward	Charles Schoenfeld
A Guided Journal for Caregivers	Marion Karpinski
Ambiguous Loss: Learning to Live with Unresolved Grief	Pauline Boss
Coach Broyles' Playbook for Alzheimer's Caregivers	Frank Broyles
Confessions of a Prayer Wimp	Mary Pierce
Coping With Caring	Lyn Roche
Creating Moments of Joy	Jolene Brackey
Daily Comforts for Caregivers	Pat Samples
Finding Hope When Dreams Have Shattered	Ted Bowman
I Still Do, Loving and Living with Alzheimer's	Judith Fox
I'm Still Here: A New Philosophy of Alzheimer's Care	John Zeisel
Life is Change, Growth is Optional	Karen Kaiser Clark
Loss of Dreams: A Special Kind of Grief	Ted Bowman
Mayo Clinic book series on various conditions	
My Journey Into Alzheimer's Disease	Robert Davis
Share the Care	Cappy Capossela & Sheila Warnock
Still Alice	Lisa Genova
The 36-Hour Day	Nancy L. Mace & Peter V. Rabins
The Best Friends Approach to Alzheimer's Care	Virginia Bell & David Troxel
Through the Wilderness of Alzheimer's	Robert and Anne Simpson
When Did My Life Become a Game of Twister?	Mary Pierce

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Senior Dining



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Waupaca County Senior Dining Sites	Contact Information
Clintonville Senior Dining Site Clintonville Community Center Building 30 S. Main Street – Clintonville WI, 54929 Serving Time: 11:30 am	Site Manager: Patti Peters Phone: (715) 823-7667 Caterer: Main Street Café, Marion, WI
Iola Senior Dining Site Iola Living Oaks 505 W. Iola Street – Iola, WI 54945 Serving time: 11:00 am	Site Manager: VACANT Phone: (715) 445-2548 Caterer: Schueller's Great exSPECHTations
Manawa Senior Dining Site Town of Little Wolf Town Hall E6325 County Rd N (P.O. Box 98) Manawa, WI 54949 Serving Time: 11:30 am	Site Manager: Brogan Bartel Phone: (920) 596-3320 Caterer: Schueller's Great exSPECHTations
Marion Senior Dining Site Lions Point 325 W. Garfield Ave. (P.O. Box 253) Marion, WI 54950 Serving Time: 11:30 am	Site Manager: Mary Riske Phone: (715) 754-2482 Caterer: Main Street Café, Marion, WI
New London Senior Dining Site Washington Center 600 W. Washington Street – New London, WI 54961 Serving Time: 11:30 am	Site Manager: Beth Wells Phone: (920) 538-6286 Caterer: Main Street Café, Marion, WI
Waupaca Senior Dining Site Trinity Lutheran Church 206 E. Badger Street – Waupaca, WI 54981 Serving Time: 11:30 am	Site Manager: Joanne Samack Phone: (715) 258-9598 Caterer: Schueller's Great exSPECHTations
Weyauwega Senior Dining Site Weyauwega Community Center 109 E. Main St (P.O. Box 628) Weyauwega, WI 54983 Serving Time: 11:30 am	Site Manager: Shani Appleby Phone: (920) 867-3213 Caterer: Schueller's Great exSPECHTations

Eligibility: Persons who are 60+ years of age, the spouse of someone 60+ years of age who is participating in the program *or* a disabled adult under age 60 who is living with a eligible older person participating in the program.

Suggested Donation: \$4.25 per meal *No eligible person will be denied a meal due to inability or unwillingness to contribute toward the cost of their meal

Volunteer Opportunity: If you are interested in delivering Meals on Wheels or interested in volunteering at the Senior Dining Sites please call our Volunteer Coordinator: (715) 258-6277

MyMobility Plan

Adapted from CDC.gov

What can you do to stay independent?

Many people make financial plans for retirement, but not everyone plans for other changes that may come with age. This includes changes in your mobility – your ability to get around.

It's not easy to talk about, but as we get older, physical changes can make it harder to get around and do things we want or need to do – like driving, shopping, or doing household chores.

You might not have mobility problems now, but you could in the future. You may even know others who already do – perhaps a parent, relative, friend, or neighbor. While it may not be possible to prevent all of these changes, there are actions you and your loved ones can take today, and as you age, to help keep you safe and independent tomorrow.

MySelf. MyHome. MyNeighborhood.

MySelf is a plan to stay independent. Staying healthy and managing chronic conditions help maintain your mobility. A simple checklist below can help you start building your plan.

- Get a physical checkup each year
- Review all of your medicines with a doctor or pharmacist
- Get a medical eye exam each year
- Follow a regular activity program to increase your strength and balance.

MyHome is a plan to stay safe at home. To continue your MyMobility plan, schedule a time to go through the following home safety checklist to help prevent falls.

- **FLOORS:** Keep objects off the floor, remove or tape down rungs, coil or tape cords and wires next to the wall and out of the way
- **KITCHEN:** Put often-used items within easy reach (about waist level), for items not within easy reach, always use a step stool and never use a chair
- **BEDROOMS:** Use bright light bulbs, place lamps close to the bed where they are within reach, put in night lights to be able to see a path in the dark, for areas that don't have electrical outlets – consider battery operated lights.
- **STAIRS & STEPS:** Check for loose or uneven steps & repair if needed, make sure carpet is firmly attached to every step or remove carpet and attach non-slip rubber treads, check for loose or broken handrails & repair if needed, consider installing handrails on both sides of the stairs, use bright overhead lighting at the top and bottom of the stairs, consider putting light switches at both the top and bottom of the stairs
- **BATHROOMS:** Put non-slip rubber mat or self-stick strips on the floor of the tub or shower, consider installing grab bars for support getting in and out of the tub or shower and up from the toilet



Take action today to help stay safe, mobile, and independent tomorrow. Create your own MyMobility Plan in these three areas:

MySelf	MyHome	MyNeighborhood
How to stay independent	How to stay safe at home	How to stay mobile in your community



Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

Learn more and download the MyMobility Plan:
www.cdc.gov/motorvehiclesafety/older_adult_drivers/mymobility

MyNeighborhood is a plan to stay mobile in my community. Finish your MyMobility plan by filling out the below table. Think of all the places you go and how you get there. Then, consider how you would get to these same places if you couldn't use your current way.

Where do I go now?	How do I get there now?	How will I get there in the future?
Ex: Meet friends for lunch	Ex: drive myself	Ex: get a ride from a friend

TORNADO WARNING

A tornado is happening or imminent. Take shelter immediately.

VS.

TORNADO WATCH

A tornado is possible.

- Stay tuned to local radio/TV for info.
- Know where you'll shelter if you have to.

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