



**Alzheimer's &
Dementia Services**
of Memphis, Inc.

CareLines

WWW.ADSMEMPHIS.ORG

MARCH 2021

ADS ONLINE SUPPORT GROUPS FOR THE MONTH OF MARCH

General Support Group
Wed, March 3, 10:30
Topic: Coping with Bathing

General Support Group
Tues, March 9, 12:30
Topic: Palliative Care vs. Hospice

General Support Group
Thurs, March 18, 2:30
Topic: Self-Care

Spousal Support Group
Wed, March 24, 4:00

**Join meetings from your
computer, tablet or
smartphone.**
[https://global.gotomeeting.com/
join/303620541](https://global.gotomeeting.com/join/303620541)

**You can also dial in using
your phone.**
US: +1 (872) 240-3212
Access Code: 303-620-541

For questions, please call Adina
901-372-4585
or email:
asamberg@adsmemphis.org

*CareLines is partially supported by
the Aging Commission
of the Mid-South.*

Do you know someone who might benefit from receiving the CareLines Newsletter?

Do you know someone who might benefit from our online Support Groups?

Please have anyone who may be interested in the newsletter and/or support groups, call or email Adina:
901-372-4585
asamberg@adsmemphis.org

Please inform Adina if you would like to be removed from our mailing list.



YOUR DAILY GRAPES!!

- ◆ G—Be GENTLE with yourself
- ◆ R— Do something RELAXING
- ◆ A— Recognize your ACCOMPLISHMENTS
- ◆ P — Do something that brings you PLEASURE
- ◆ E—EXERCISE
- ◆ S—SOCIALIZE and connect with others

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ELDER LAW TERMS AND LEGAL DOCUMENTS DEFINED



Creating a cohesive legal, financial and medical plan for an uncertain future is a complex process. Most people believe that drawing up a will is sufficient, but there are a number of other documents needed to create a comprehensive strategy for safeguarding one's health, property and finances. A reputable elder law attorney can assist with creating a personalized plan, but it is very helpful to familiarize yourself with the basic legal tools that make up your portfolio of documents before planning begins.

Wills indicate how a person's assets will be distributed among beneficiaries after the person passes away. The writer of the will (known as the testator) can also specify a person (the executor) to manage the probate process and distribution of the estate. A will does not take effect until the testator dies.

Advance Directives are written instructions for future medical care in case a person is unable to make or communicate decisions (for example, if you are unconscious or mentally incapacitated). These are also called healthcare directives. These directives may include:

- **Living Wills** provide instructions for use while the testator is still alive. A living will goes into effect when the testator is no longer able to communicate their wishes for health care or competent to make such decisions. This document is a type of advance directive that describes how a person wants emergency and/or end-of-life care to be managed. Many people have strong opinions regarding life support, and a living will allows one to detail which life-sustaining procedures one does or does not want. It is important to be specific when composing a living will, but it is not possible to describe preferences for every possible medical scenario. Working with your physician and an elder law attorney can ensure that the instructions are clearly articulated and the document meets specific validity requirements in your state of residence.
- **Do Not Resuscitate (DNR)** is completed by a physician or health care provider stipulating that a patient does not wish to receive life-prolonging treatment if cardiac or respiratory arrest occur. These procedures include CPR, intubation, use of a ventilator, defibrillation and other related methods of resuscitation. Obtaining a DNR does not affect the provision of other medical treatments or care. DNR forms are typically completed by a physician at a patient's direct request or in accordance with a patient's living will or other advance directives. DNRs are often obtained by individuals with a terminal illness, those who are opposed to certain life-saving measures and those who are at risk of cardiac or respiratory arrest.
- **Physician's Orders for Scope of Treatment (P.O.S.T)** forms go into further detail regarding specific treatments like antibiotics and feeding tubes. Like DNR orders, P.O.S.T forms are intended to be a condensed version of your living will that medical professionals can quickly and easily consult when deciding on a plan of care.

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Powers of Attorney (POA) documents allow a person (the principal) to give a trusted individual (the agent) the ability to make decisions on their behalf. A POA can be written to grant an agent the ability to act in very broad terms or to only take specific actions. This document can also be customized to take effect upon its creation (durable POA) or upon the principal's incapacitation (springing POA). If a person becomes incapacitated without drawing up POA documents, their family members may have to go through the long and expensive process of seeking guardianship to be able to manage their affairs. There are two general areas in which powers of attorney are granted: health care and finances.

- **Healthcare Power of Attorney** gives a designated person the authority to make health care decisions on behalf of the principal. A medical POA essentially gives someone you trust the ability to oversee your medical care and ensure that your advance directives are followed. Without appointing a POA for your healthcare, your family members may not be able to access your medical information or actively participate in decision making. Medical POA is sometimes referred to as a health care proxy.
- **Financial Power of Attorney** gives a designated person the authority to make legal and/or financial decisions on behalf of the principal. When someone becomes incapacitated, whether permanently or temporarily, bills and other financial matters do not stop. Without a financial POA, bills may go unpaid, which can have serious, lasting consequences, and family members may not be able to access one's accounts to cover health care costs. The type and extent of the agent's powers are entirely customizable. For example, the agent may be authorized to manage all of a principal's finances and property or they may only be able to oversee certain investments or transactions.

Consult an Elder Law Attorney

While there are many resources available to help families plan for the future and navigate legal issues, an experienced elder law attorney can learn about your situation and recommend the best course of action. To find a legal professional in your area, search in the AgingCare.com Elder Law Attorney Directory.

Adapted from article by Ashley Huntsberry-Lett, last updated 12/27/17, agingcare.com

Balance plays an important part in my life. It keeps me healthy — physically and emotionally. Balance is a blend of knowing I can be there for someone else and for myself at the same time. It's knowing what I can do and what I can't do. It is a mixture of doing what needs to be done along with doing what I like to do. Balance helps keep my life in proper perspective.

Source: Coping with Caring by Lyn Roche. Journey Publications 2006.

Dear Diary:

Caregivers Write Their Feelings

A caregiver's journey is full of "dear diary" moments—those times when you just wish you had some way to discharge the knotted mass of emotions swirling around in your head.

Today mom threw her bowl of oatmeal at me.

I ducked under the spinning projectile. But, despite my maneuvering, I still came up covered with stray grey flecks.

For a second I just stood there, watching the gloppy remnants ooze down the wall and plop onto the floor among still-teetering pieces of smashed ceramic.

When did she get so strong? How can she hurl a full bowl of oatmeal like she's channeling Walter Johnson, but, she can't open her pill bottle or get out of a chair on her own!?

Sometimes I just feel so alone....

Now mom's gone. My friends don't understand why I can't come to visit, and my sister is too busy with her family and her job to care...



For many, feelings of loneliness and isolation are part of the caregiving package. One of the key benefits of journaling is that it can give a caregiver someone (or something) to talk to.

While it is important for a caregiver to cultivate social relationships with flesh and blood people, sometimes your best buddy may be a non-judgmental piece of paper. A caregiver's journey is littered with conflicting emotions. Brief moments of happiness and gratitude are sparsely sprinkled over prolonged periods of anger and sadness.

Psychologist Melanie Greenberg, Ph.D., (www.melanieagreenbergphd.com) feels that getting these feelings down on paper can help caregivers in a variety of ways. She says that a journal can provide a caregiver with a safe place to feel their feelings, helping them avoid the negative consequences of burying their emotions.

Adapted from article by Anne-Marie Botek, Agingcare.com Dec 2011

ADS WISH LIST

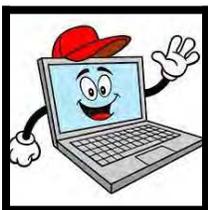
Critical Items We Need !

- **Paper Towels
- **Bleach
- ** Copy Paper
- **Disinfecting Spray
- **Disinfecting Wipes
- **Facial Tissues
- **Fresh Vegetables
- **Liquid Antibacterial Hand Soap
- **Toilet Paper
- **Wet Wipes

Online and Telephone Support Options for Caregivers.

For virtual community events and support:

- ◆ See front page for info about ADS online Support Groups
- ◆ Call 901-372-4585 to talk to an ADS Social Worker on the phone
- ◆ alzfdn.org
- ◆ alztennessee.org
or call 24/7 Helpline: 800-259-4283



Tips for the Month of March

- ☉ If your loved one has to be with you constantly and is right behind you every time you turn around, you are experiencing shadowing. It is a condition that will pass, but can be unnerving. Some caregivers have found relief by writing a note which explains why they are out of the room and states that they will return soon.
- ☉ If your loved one is disoriented upon waking in the mornings, don't rush her. Take time for a good conversation before breakfast. Keep things quiet and low-key while she adjusts to being awake.
- ☉ If your loved one is adamant about not wanting to take a shower or a bath, don't force something that could be dangerous for both of you. Thorough sponge baths may be the solution for a while. Continue to offer showers in a friendly, non-controlling and non-judgmental manner. The resistance may suddenly disappear.
- ☉ Cutting your loved one's food into bite size pieces may make mealtimes easier for him. Don't cut it at the table. This is embarrassing and demeaning. When you eat out, quietly explain to the waiter you would like both of your meals pre-cut in the kitchen before he brings the food to the table.
- ☉ You may not be able to figure out what causes some of your loved one's fears. Try to keep her environment as simple, peaceful, and familiar as possible. Changing furniture can be frightening. New locations for familiar things might cause panic if she can't find them.
- ☉ Just as your loved one's body language reveals his feelings to you, he is aware of your body language as well. We all give non-verbal messages to each other by the way we look and by the things we do. The look of love is calm and supportive. We can do things like hugging, kissing, and smiling to communicate love.
- ☉ If your loved one is having difficulty locating some things, try putting labels or signs on drawers, cupboards, and doors. They can be big printed words or pictures of objects if the printed word no longer has meaning for her. Photographs of familiar objects pasted to where they belong often helps. If she is able to cook or help in the kitchen, consider putting items into clear plastic containers.

Source: *Coping with Caring* by Lynn Roche, Elder Books, 1996.

How Can Music Help People Who Have Alzheimer's Disease?

Research suggests that listening to or singing music can provide emotional and behavioral benefits for people with Alzheimer's disease and other types of dementia. Musical memories are often preserved in Alzheimer's disease because key brain areas linked to musical memory are relatively undamaged by the disease.

Music can:

- Relieve stress
- Reduce anxiety and depression
- Reduce agitation



Music can also benefit caregivers by reducing anxiety and distress, lightening the mood and providing a way to connect with loved ones who have Alzheimer's disease — especially those who have difficulty communicating.

If you'd like to use music to help a loved one who has Alzheimer's disease, consider these tips:

- **Think about your loved one's preferences.** What kind of music does your loved one enjoy? What music evokes memories of happy times in his or her life? Involve family and friends by asking them to suggest songs or make playlists.
- **Set the mood.** To calm your loved one during mealtime or a morning hygiene routine, play music or sing a song that's soothing. When you'd like to boost your loved one's mood, use more upbeat or faster paced music.
- **Avoid overstimulation.** When playing music, eliminate competing noises. Turn off the TV. Shut the door. Set the volume based on your loved one's hearing ability. Opt for music that isn't interrupted by commercials, which can cause confusion.
- **Encourage movement.** Help your loved one to clap along or tap his or her feet to the beat. If possible, consider dancing with your loved one.
- **Sing along.** Singing along to music together with your loved one can boost the mood and enhance your relationship. Some early studies also suggest musical memory functions differently than other types of memory, and singing can help stimulate unique memories.
- **Pay attention to your loved one's response.** If your loved one seems to enjoy particular songs, play them often. If your loved one reacts negatively to a particular song or type of music, choose something else.



Adapted from mayoclinic.org; interview with Jonathan Graff-Radford, MD



Activities at ADS

February has been an unusual month indeed —with unprecedented weather, followed by the challenges of water issues.

Prior to the temporary closure of the centers, “Friends” participated in varied crafts and games, and enjoyed special cake for Valentines Day.

We are all looking forward to enjoying Spring weather and activities in the month of March!

Blueberry Banana Smoothie

Recipe shared by a Past Caregiver



2 cups coconut water
2 cups baby spinach
2 cups frozen blueberries
1/2 frozen banana (I use 1 whole banana)
(Optional 2 tablespoons spirulina or 1 cup ice)

Add ingredients into a blender and blend until smooth.

Serves 4. 90 calories, 1g fat, 4g protein, 18g carbohydrates
4g fiber, 11g sugar, 440mg potassium, 10% DV iron.

LEAF STUDY

If you take care of a family member with **Alzheimer's Disease**, you probably already know that this can be a demanding, stressful job. Family caregivers often suffer with higher levels of stress, anxiety, depression, and impaired physical health, and many provide care with little or no support.

Researchers at UCSF and Northwestern University are testing a program for **family caregivers of people with Alzheimer's Disease** designed to **increase levels of positive emotion**, which in turn can **help lower stress and support ways of coping** with the stresses of caregiving.

We are seeking caregiving adults nationwide to participate in the LEAF Study. English-speaking participants **with access to wifi internet** will receive a positive-emotions building program and a tablet computer the study will supply to you. Because the program is conducted online, **caregivers can participate from wherever they are** in the USA. Participants will take part in an hour-long learning session once a week for six weeks, plus home practice activities and online surveys.

LEAF is funded by a grant from the National Institute on Aging (division of the National Institutes of Health).

If you are interested, fill out an eligibility study at leafstudy.ucsf.edu.

Email: LEAFstudy@northwestern.edu

Call: 415-514-2935 (Pacific time) or 312-503-5247 (Central time)



Alzheimer's Foundation of America's
VIRTUAL EVENTS
For Caregivers and Loved Ones:
Music, Art, Fitness, Meditation and more!

Go to alzfdn.org/events to view the calendar and find details.



If You Knew Then What You Know Now: Hindsight for Caregivers

Let's face it. Whatever we do as caregivers seems to be wrong in the eyes of some onlookers, generally people without all of the facts, and often people who couldn't do what we do no matter what.

Still, we are sensitive to their judgment. The problem is, we often aren't aware that we are judging ourselves even more harshly than outsiders may judge us.

This is particularly true in retrospect.

Understand that imperfection is human, and your best was – and still is – good enough.

Remember precious moments rather than perceived mistakes.

Remember that you made a difference.

Move on from self-imposed blame and admire yourself for stepping into the difficult role of being a caregiver and seeing it through to the best of your ability.

Adapted from article by Carol Bradley Bursack, Agingcare.com



Maintaining Hope and a Sense of Humor

Laughter and hope among family members and friends can brighten dark moments and promote more relaxed and encouraging feelings. Members of a support group for people with Alzheimer's in the San Francisco Bay Area in California advise their family members:

"Have a sense of humor! It helps us to lighten up about things we may have trouble with."

"Sometimes I feel like a big kid. Every day is a new day with new discoveries because I can't remember anything I've already discovered! I laugh about it and that keeps me young at heart."

"Keeping active, getting around, and doing things gives me hope because if I don't keep doing things, I mope." A positive attitude is also essential. Another man says, "Looking on the positive side of things gives me hope. The negative doesn't do any good."

Although humor can be therapeutic, support group members also advise their family members and others to be sensitive about its use. They suggest that humor is not helpful if it is making fun of someone in a hurtful manner; if it leaves someone feeling left out; or when it's hard to understand. They caution that the use of humor could stifle other more serious feelings

Adapted from: Perspectives Newsletter, Vol. 17, #1, Fall 2011, p. 6.