

Caregivers

unsung heroes



"I think a hero is an ordinary individual who finds strength to persevere and endure in spite of overwhelming obstacles."

-Christopher Reeve



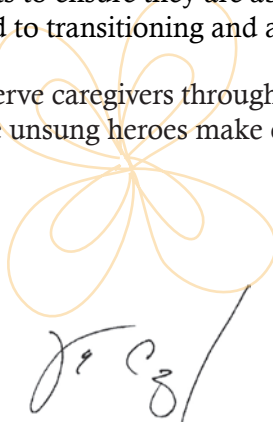
From the Executive Director

Caregiver programs have long been a part of the Area Agency on Aging of Western Michigan (AAAWM). However, in recent years, there has been more attention given to caregivers about the stress and sacrifices they make. Caregivers are the backbone of the aging network; providing 80% of all long term care.

AAAWM has a history of serving caregivers by providing them with education and support. This has been done through a variety of programs in FY 2012, including:

- **Caregiver Classes:** AAWM collaborated with community organizations to design gender-specific caregiving classes that address identified needs. Classes allow caregivers to learn new skills, problem solve with their peers and enjoy a break from providing care.
- **Choices for Independence (CI):** Many times caregivers and family members don't know what resources are available to enable them to stay in their own home. CI staff meet with an older adult and their entire support system to talk about services (private pay and community programs). Discussing options often reduces caregiver stress and provides options for the senior.
- **Nursing Facility Transition Program (NFT):** Designed to help older adults return home from the nursing home, NFT also helps caregivers. NFT staff evaluate older adults to ensure they are able to live independently, handle the details related to transitioning and arrange in-home supports.

AAAWM will continue to serve caregivers throughout our region. We appreciate the sacrifice these unsung heroes make every day to help seniors stay in their own homes.

A large, stylized orange flower graphic is positioned behind the signature. The signature itself is written in black ink and appears to be 'Tom Czerwinski'.

Tom Czerwinski,
AAAWM Executive Director



Larry and Patricia (Pat) were married in 1958, right out of high school. They moved to Grand Rapids while he worked in sales and management and she was a homemaker and mother to their four children.

In 2005 Pat was diagnosed with early stage dementia and later suffered a major seizure. Larry, who was retired, but working part-time, transitioned to her full-time caregiver. “I do everything, didn’t used to be that way, but I had to learn to cook, clean, to bathe her, dress her, sometimes feed her. Pretty much be with her all the time so she doesn’t fall,” he says.

Larry (age 74) went nearly five years without a break and, like many family caregivers, he was overwhelmed. “I was trapped” he said, “at the time I was pretty well burned out.”

He and his wife started going to an early stage dementia class through the Alzheimer’s Association that led to Larry’s participation in a class for male Veteran caregivers (Creating Confident Caregivers) and eventually to *Conquering the Kitchen*, a cooking class for male caregivers. In addition to caregiver and cooking skills, the classes provided him with respite and a chance to connect with other men in similar situations.

He now uses in-home respite for doctor’s appointments and other errands. When he finally was able to have a few hours to himself and play a round of golf “it was like a vacation.”

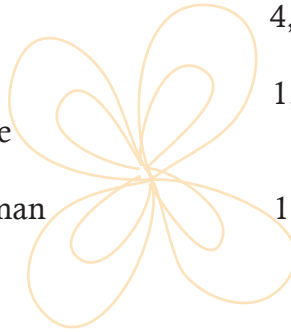
Caregiver Programs:

The Caregiver Resource Network, a collaboration of 115 organizations, reached out to caregivers by creating a Facebook page and adding resources to their website, www.caregiverresource.net. A variety of educational opportunities were made available to caregivers throughout the year, including the November series attended by over 500 people.

Conquering the Kitchen, cooking class for male caregivers, was developed by AAWM staff. The four week class helps male caregivers feel more confident in the kitchen while also providing respite and the opportunity to learn from other men in similar circumstances. The class received a Best Practice Award by the Healthy Aging Dietetics Practice Group.

Older Americans Act Services

Type of Service	Clients	Units
Adult Day Care	86	28,402
Care Management	265	2,202
Caregiver Services	625	261
Congregate Meals	4,345	220,224
Counseling	119	430
Disease Prevention/Health Promotion	364	78
Elder Abuse Prevention Education	408	302
Grandparents Raising Grandchildren	68	509
Home Delivered Meals	4,391	770,069
Home Support	52	451
Homemaker	1,077	37,714
Information and Assistance	----	20,481
Legal Assistance	412	577
Long Term Care Ombudsman	1,351	1,255
Medication Management	25	313
Outreach and Assistance	918	3,635
Personal Care	150	9,580
Respite	468	27,525
<i>(home chore, home health aide, homemaker, in-home, overnight, and personal care)</i>		
Senior Center Staffing	----	4,697
Transportation-Assisted	983	15,578
Transportation-Public	134	9,490



Older Americans Act Services

In FY 2012, the Respite service definition was expanded to include home chore, home health aide, homemaker, in-home, overnight and personal care. This change was made to offer additional options to relieve the stress on family caregivers. Instead of just an in-home or overnight respite option, they now can choose to have the respite include additional assistance such as home chore (i.e. installing storm windows), homemaking (i.e. laundry and light cleaning), and personal care (i.e. bathing and personal hygiene).

Judy (age 69) would say she began caring for her father, Edward, (age 97) about a year ago after he fell in his own home, causing broken ribs and a bruised spleen. But, like many caregivers, she was providing care before considering herself a caregiver. “It got to a point, when he was staying with me on the weekends, that he needed assistance with everything; getting out of bed, getting to the bathroom, dressing. It really is very involved.”



She recalls a few times where she spent all day with her father only to realize she hadn't eaten or taken her morning medication. “It is wrapped up in guilt because it's difficult to meet all my father's needs and my own; to get some kind of balance and not feel like a selfish person,” she says.

Edward was always very active and involved in the community. In fact, he was still volunteering into his 90s and only needed assistance more recently. “He continues to maintain that he needs no help, so it's kind of a struggle, but I think it's hard for him to see himself really needing help,” she says. “He used to joke that he walked like an 80 year old man when he was 95.”

Judy and her father met with a Choices for Independence Living Consultant to see what services were available to help him stay in his own home. They were given a number of options and the meeting was very beneficial to both of them.

“I felt like there was support, many options and areas of help that would enable both of us to carry on and have hope,” says Judy.

Choices for Independence

The Choices for Independence program educates adults age 60 and over and their support systems (caregiver, friends, family, etc.) about services available to maintain independent living. They can then choose which services to put into place, but are under no obligation to do so.

In FY 2012, 153 individuals and families met with an Independent Living Consultant to learn about individual and community resources.



Gloria, age 85, grew up in Bristol and was active in the church, playing piano and teaching Sunday school. She was diagnosed with dementia in 2005, but it was a mild heart attack in 2011 that brought her to the Lakeview nursing home in Cadillac. Her husband Merle (Teddy) stayed by her side, like he has since they were married in 1971.

The nursing home referred to the couple as “the lovebirds” because they would walk down the hallway from rehab and sit on the loveseat together.

For 15 months, Teddy (also 85 years old) drove twenty miles each way to the nursing home where he would stay with Gloria for at least 10 hours each day. “We’ve always been very close, so if she’s gonna be there, by golly, I’m gonna be there with her,” he said.

The lovebirds were connected with the Nursing Facility Transition program (NFT) to help move Gloria back home. Working closely with the nursing home, an AAAMW Social Worker and Registered Nurse met with the couple to set up in-home supports.

Teddy is her primary caregiver and does practically everything for his wife; dressing, bathing, toileting and more, but they do have respite. “I hate to be away from my wife for too long, but I know she’s in good hands,” he says. The respite allows Teddy to run errands and get a break from providing care and “it’s a big help,” he says.

The NFT program was also a help to Gloria. “She’s happier to be at home and to be closer to me,” Teddy says.

Nursing Facility Transition

The Nursing Facility Transition (NFT) program helps those currently living in a nursing home return to the community. Referrals for this program come from nursing facility social workers, family, friends and clients themselves.

In FY 2012, NFT successfully transitioned 179 individuals out of a nursing facility and back into the community.

MI Choice Medicaid Waiver (MI Choice)

MI Choice is a Medicaid funded program which provides in-home services to older adults and individuals with a disability who are at risk of nursing facility placement. MI Choice participants partner with a Care Management team (made up of a licensed Social Worker and a Registered Nurse) to develop a care plan centered on an individual's needs.

Qualifications:

- Adult (18-64) with a disability or those 65 and over
- Medically eligible for nursing home placement
- Meet Medicaid income and asset requirements
- Need community-based services

MI Choice assists people who qualify for long term care services in their own homes as well as in group settings (adult foster care and homes for the aged), allowing for a broader choice for long term care assistance.

In FY 2012, AAAWM served 726 MI Choice clients.

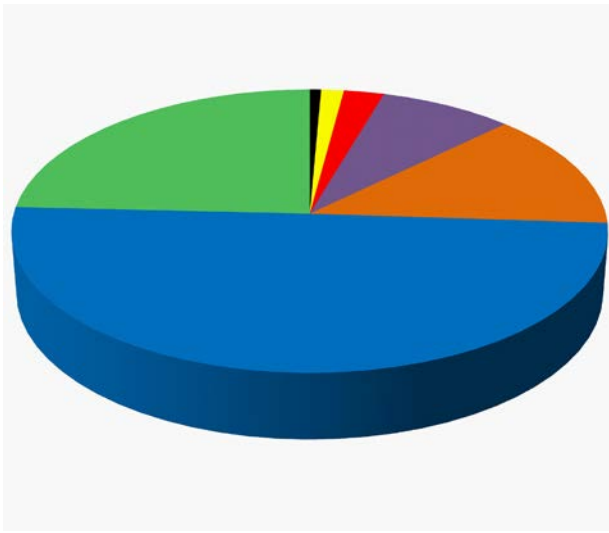


Michigan Medicare/Medicaid Assistance Program (MMAP)

A region-wide team of 50 dedicated MMAP team members spent nearly 5,000 hours assisting Medicare and Medicaid beneficiaries in FY 2012.

Older adults and those with disabilities were educated and empowered to make informed decisions regarding Medicare, Medicaid and prescription drug coverage. One-to-one contacts were made with 3,910 individuals.

MMAP team members also participated in over 100 outreach activities through articles, radio interviews, health fairs and educational presentations totaling an additional 795 hours of team member work.



- Donations, Local Match and Program Income
- Title V Employment Program
- Nutrition Services Incentive Program
- State of Michigan
- Federal Administration on Aging
- Medicaid Waiver
- Kent County Senior Millage

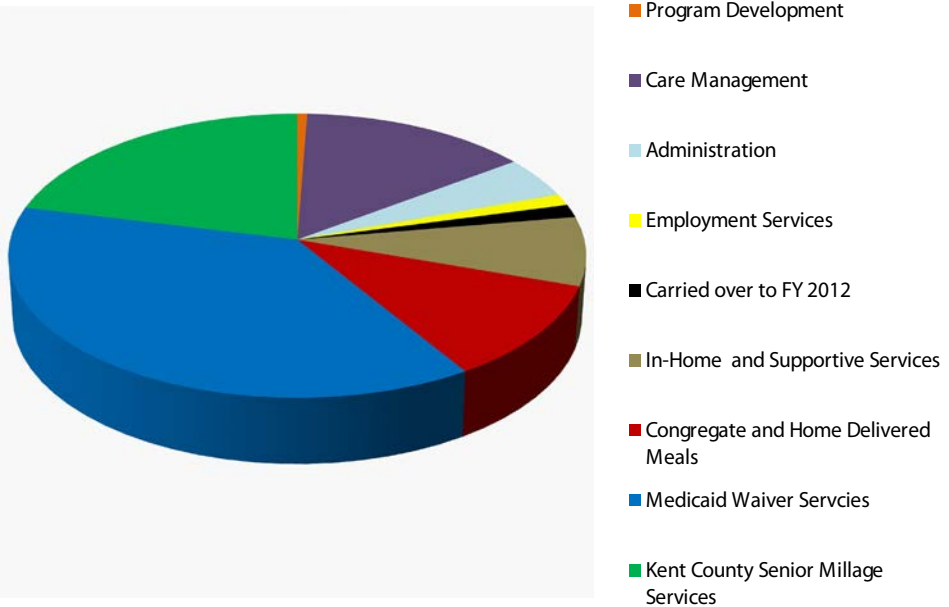
FY 2012 Revenues

Program Income	\$ 16,962
Donations	19,000
Local Match	152,864
Title V Employment Program	376,702
Nutrition Services Incentive Program	671,075
State of Michigan	2,232,330
Federal Administration on Aging	3,635,461
Medicaid Waiver	13,565,424
Kent County Senior Millage	6,614,127
Total	\$ 27,283,945

AAAWM receives program funding from the Older Americans Act and Older Michigianians Act through the Office of Services to the Aging. Other programs are funded through the Michigan Department of Community Health and the Kent County Senior Millage.

FY 2012 Expenditures

Program Development	\$ 168,490
Care Management	3,895,541
Administration	1,279,806
Employment Services	356,108
Carried over to FY 2013	403,803
In-Home Services	1,157,582
Supportive Services	980,241
Congregate Meals	815,590
Home Delivered Meals	2,165,504
Medicaid Waiver Services	10,268,469
Kent County Senior Millage Services	5,792,811
Total	\$ 27,283,945



Board of Directors

AAAWM Board of Directors consists of elected officials and consumers from our nine county region and the city of Grand Rapids.

Board members provide leadership to the organization and ensure the agency is fulfilling the mission of helping older adults and those with disabilities live with independence and dignity.

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* denotes former members

Advisory Council

The AAAWM Advisory Council consists of representatives from nine counties and the city of Grand Rapids.

Advisory Council members help identify the needs of older adults, disseminate information about available services and the aging network in their communities, identify available untapped resources, advocate on behalf of older adults in West Michigan, and present their recommendations to the Board of Directors.

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* denotes former members



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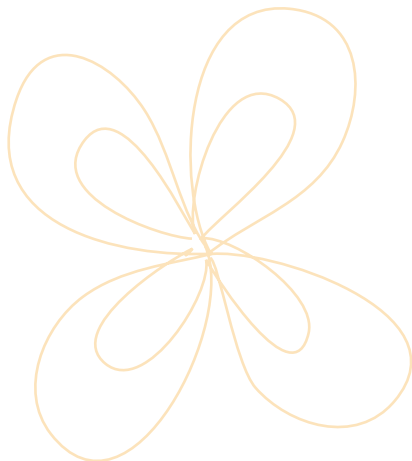
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www.aaawm.org

www.facebook.com/AreaAgencyOnAging



Established in April 1974, the Area Agency on Aging of Western Michigan (AAAWM) exists to help older adults and persons with disabilities live in their community with independence and dignity. AAWM is part of a national network of 629 Area Agencies on Aging and a statewide network of 16 Area Agencies on Aging.