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La Grange Park  
Lyons  
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Ten additional  
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111 W Harris Ave  
La Grange, IL 60525  
708-354-1323

[agingcareconnections.org](http://agingcareconnections.org)

# THANK YOU!

*Thank you.* We truly feel like we haven't said that enough to you - our reader, our supporter, our advocate for aging. Throughout the years (and fiscal year 2012 is no exception), you have demonstrated not just your concern for the well-being, safety and independence of older adults and their families, but the need to invest in aging services for the future. And just like the year before, fiscal year 2012 came with its challenges and successes – all of which you helped us through and celebrated.

One of our significant successes of the year was funding awarded by the Centers for Medicare & Medicaid Services to Aging Care Connections, along with Bridge Coordinating Agencies, to improve transitions between the hospital and other care settings for people with Medicare. As a participant of the Community-based Care Transitions Program (CCTP), this public-private partnership aims to cut preventable errors in hospitals by 40% and reduce preventable hospital readmissions by 20% over a three-year period. Achieving these goals has the potential to save up to 60,000 lives, prevent millions of injuries and unnecessary complications in patient care, and save up to \$50 billion for Medicare over ten years.



Other highlighted successes of the year included:

- the establishment of a Hoarding and Self-Neglect Task Force to consult and intervene on our most challenging, time-consuming self-neglect cases before they escalate to crisis situations. Issues faced by older adults range from compulsive hoarding to the inability to perform essential self-care tasks, such as eating and dressing;
- transforming our senior bus system into a new taxicab voucher program in partnership with PeopleCare, Inc. and;
- closing out our wildly successful 40th Anniversary Lecture Series.

Unfortunately, fiscal year 2012 also came with many challenges for us. Despite persistent attempts to save the Illinois Cares Rx program, which offered assistance to older adults with basic and critical prescription drugs and their Medicare Part D premiums, ended in July, 2012. With thousands of older adults impacted by this crisis, Aging Care Connections researched drug buying plans, pharmaceutical direct options and other supports for prescription costs, as well as connecting seniors to our Benefits Assistance Department and our eleven benefit sites throughout our service area.

We also launched a critical **Program and Capital Campaign: Leading the commitment to aging well** – in response to the continued decrease in funding by government, foundations and community groups. Through this initiative, we will be able to:

- help sustain current and future programs by strengthening our program/service delivery model and;
- make our building more ADA-compliant and accessible, while addressing usage, much-needed repairs and refurbishing.

While Aging Care Connections continues to experience on-going challenges, we also continue to experience many successes. And speaking of more successes, the story you are about to read on the next page is one of many examples in which your on-going support and generosity have allowed for us to serve older adults and families in need. **Thank you** again for continuing to keep our mission alive – helping older adults and families remain well and independent in your community!

**Debra Vershelde**  
Executive Director

**Saranne Milano**  
President, Board of Directors

# One of 8,000 Lives Changed



**Ruth Folkening, Caregiver Specialist**, has been with our organization since May, 1999. She came to us after teaching sixth grade for 15 years. During the course of Ruth's teaching career, she determined that she would love to work with seniors. She wanted to offer seniors the opportunity to stay in their own homes with the help of friends and family, as her parents did. Understandably, she particularly enjoys the teaching aspect of her work at Aging Care Connections.

Ruth works with caregivers and also has a caseload involving more complex situations, such as significantly cognitively impaired clients, those requiring refined care plans and those whose needs are rapidly changing. She teaches educational programs, such as the Early and Late Stage Memory Loss Groups, facilitates some caregiver support groups and manages the financial piece of the respite program which provides relief for caregivers. Following are Ruth's reflections on a most memorable caregiver...

## A Caregiver's Gratitude

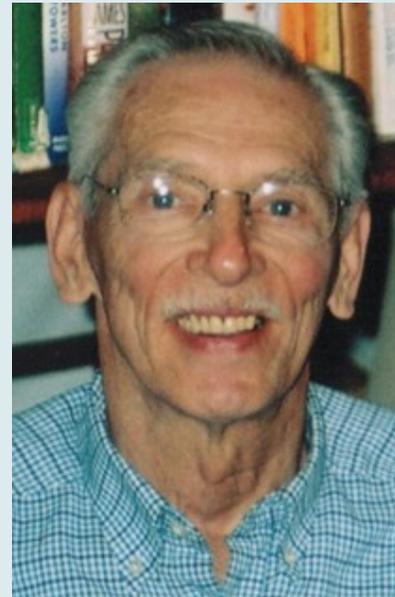
Although Sonia's husband had been diagnosed with dementia five years earlier, Sonia was searching for information to prepare her for what was to come. As a retired teacher in the field of special education, her background and strategies for helping students learn in non-traditional ways had been helpful in dealing with her husband's decline. But she needed more...

In the fall of 2010, when Robert was 82 years old, Sonia enrolled in Aging Care Connections' Early Stage Memory Loss Seminar for Caregivers and those with an early stage diagnosis. She was eager to learn about Robert's condition and, having the goal of keeping him in their home, to find resources to make this possible.

As Sonia soon learned, in-home care coordination makes a significant difference in the lives of dementia patients by extending independence at home. According to Johns Hopkins University research, 70 percent of dementia patients who received in-home care coordination with follow-up visits were still living at home at the end of the 18-month study. Of the patients in the control group, who received an initial consultation and usual care, but no in-home care coordination, only 50 percent remained at home. The other 50 percent of the control group had moved into a nursing home, hospital or assisted-living facility, or had died.

Sonia read the material provided in the Early Stage Seminar and listened intently as a geriatric physician and elder law attorney made presentations. Sonia began to consider enrolling Robert in adult day care to provide socialization for him and much-needed respite for herself. She updated their Advance Directives and made sure their medical information was in order. Sonia especially appreciated the File of Life coordinated by Aging Care Connections' Aging Well initiative. The File of Life program facilitates the work of paramedics called to a senior's home in an emergency situation. The older adult's medical profile and critical contact information are gathered in a convenient packet adhering magnetically to the refrigerator. Emergency personnel are trained to look for the packet, so that vital information can be transmitted immediately to the hospital to expedite treatment. The results can be truly lifesaving.

After the eight-week seminar was completed, Sonia attended two Aging Care Connections' support groups: the Lunch Bunch, which met monthly at a local restaurant to give caregivers a break from their tedious routines, understanding, and the opportunity to share resources, and the Alzheimer's Caregiver Group. The groups offered not only coping strategies for easing the grief and tedium, but invaluable information on hospice care and medical services which Robert would need in the future.



A recent study found that caregivers who used coping strategies, specifically a problem-focused approach (i.e. problem solving), saw a slower rate of decline in those with dementia than those who reported using this strategy less. The more they used these approaches, the better the results for the person with dementia.

Good social support and changing how one looks at a situation were also found to be helpful. Positive coping strategies also led to less caregiver stress. The study concludes with the recommendation that caregivers research how the dementia may progress and when to get professional help from such resources as a local social service organization serving older adults and a support group. “Don’t wait until you’re in the thick of it.” Sonia’s instincts had been right on.

Sonia frequently turned to me with questions and concerns as Robert became increasingly impaired. One day, Sonia frantically called to describe his very unusual behavior. I advised her to call the physician and the paramedics. Robert was hospitalized and eventually went to rehab. As his condition worsened, he was placed on hospice and died peacefully in a rehab facility.

Sonia shared that she was “at peace with Robert’s passing.” All of the information and support she had received from Aging Care Connections had “prepared her for this journey.” She confided that while Robert was in the hospital and in rehab, she re-read the information she had received in the seminar and through the support groups at night when she returned to their home. She made the decision to donate all of the memorial contributions for Robert to Aging Care Connections--the place where she found solace, education and understanding through their long journey. She did not face their situation alone...with Aging Care Connections, she found the strength to help not only Robert, but herself.



My husband died on December 21, 2011. He had Alzheimer's. I was fortunate to read an article in the local paper about Aging Care Connections and contacted them. They immediately gave me information about their many programs and I started attending the Early Stage meetings. It was amazing the amount of information I was given...then late stage, ongoing and adult day care information. **I felt that I was not alone.** There are many self-help books and information out there, but this was a personal support group with professionals who gave you information to help you and help you make important decisions for your loved one. Many of us have friends and family, but it is not enough. Unless you live with the Alzheimer's person, you cannot understand the enormous responsibility of the day-to-day situation. The professionals at Aging Care Connections do.

I hope that Aging Care Connections will be able to help hundreds more and also be able to expand and reach out to others. With support from organizations like this, they can be in the comfort of their homes.

I will forever be grateful for the help that I received and especially to Ms. Ruth Folkening who is the heart of Aging Care Connections. **Thank you!**

Sincerely, *Sonia Lawrentz*

# How We Care

*We're making our community a better place to age well!* **Between October 1, 2011 and September 30, 2012...**

## Information and Assistance...

*Aging Care Connections took 9,394 phone calls from 4,663 individuals seeking help with aging issues.* The caller may have asked a simple question or required more intensive assistance through referral for assessment of an older adult's declining ability to remain safely at home in the community.

## Care Coordination...

*Aging Care Connections completed assessments for 1,490 older adults and provided 1,044 older adults with ongoing care coordination amounting to 7,370 hours of service.* The process begins with an assessment in the home, a local rehab facility or the hospital and takes into consideration multiple factors such as physical, emotional, and financial needs, as well as the strengths and support systems unique to each older adult. The result is a plan of care utilizing public and private resources, family support, and the older adult's preferences. Continued coordination of services and ongoing care management are provided to ensure that services are adequate and appropriate to the changing needs of the older adult.

**Caregiver Support...** *Aging Care Connections provided 1,864 hours of support and much-needed respite to 256 different caregivers of older adults.* Family members and others play important roles in caring for older adults, which may give rise to questions and concerns, as well as stress and exhaustion. Our Caregiver Specialist is available to suggest resources, lead support groups and arrange respite, so that caregivers are able to re-energize and take care of personal needs. Their ability to be effective caregivers is only as good as how refreshed, confident and supported they feel.

## Education and Health Promotion...

*Aging Care Connections provided 2,823 hours of educational programming related to aging issues to 1552 individuals.* Seniors and their families and caregivers are able to make much better decisions about the often complex and multi-dimensional issues related to aging when they are well-informed. We are dedicated to presenting the most cutting-edge information on resources and health and wellness to enhance the well-being and independence of older adults.

## Elder Abuse Investigation...

*Aging Care Connections investigated 301 cases of elder abuse (including 58 self-neglect cases) in 30 communities with the average report taking 20 hours for a total of 6,020 hours.* Elder Abuse, which can be in the form of physical, emotional, financial, neglect, abandonment and self-neglect, is increasing in alarming numbers as the economy continues to be in a downturn. In fact, self-neglect cases are on the rise, becoming the most common form of elder abuse. In addition, we are finding that the level and danger involved in recent cases has escalated significantly.

## Benefits Assistance...

*Aging Care Connections provided help with energy costs, pharmaceutical benefits and Medicare issues to 1,167 older adults.* Our trained staff and volunteers are available to educate and assist seniors about benefits and services to which they may be entitled.

## Aging Resource Center...

*Aging Care Connections' Aging Resource Center (ARC) Program helped 440 older adults make a smooth, seamless transition from the hospital or a skilled nursing facility.* The ARC Program offers older adults and their families the opportunity to explore and secure community resources and services prior to discharge from Adventist La Grange Memorial Hospital and local skilled care facilities. On-site assessment for services, connection to information about community resources, and follow-up in the community are provided through the ARC Program to ensure a smooth transition back home.

## October 1, 2011 - September 30, 2012

### Major Revenue for Government Agencies

\$270,620

\$745,242

State Grants and Local Governments

Federal Grants

### Major Revenue for Non-Government Agencies

\$685,995

### Total Expenses

\$357,399

\$62,295

\$1,319,442

Fundraising

General & Administrative

Program