Our Mission
Jayhawk Area Agency on Aging, Inc. advocates on aging issues, builds community partnerships and implements programs within Shawnee, Jefferson, and Douglas counties to help seniors live independent and dignified lives.

- Is a 501(c)3 non-profit organization
- Is funded by tax-deductible contributions, federal funds, under state general funds and funds through local governments
- Does not discriminate on the basis of race, color, sex, national origin, age, religion, or disability

Katie Sherrow, Topeka's own WW II Rosie the Riveter, meets Mary Jean Eisenhower, granddaughter of President Dwight D. Eisenhower at the event honoring Katie, other Rosies and veterans on June 6th at the Eisenhower Presidential Library in Abilene. (Photo by Nancy Eckert)

www.jhawkaaa.org
Since Alzheimer's was discovered in 1906, we have made great strides in research and treatments. In 1931, the invention of the electron microscope enables scientists to study brain cells in more detail. In 1968, the measurement scale for assessing cognitive and functional decline was developed. The National Institute on Aging is the primary federal agency that supports Alzheimer’s research. The Institute was established in 1974.

In 1980, the Alzheimer's Association was founded. National Alzheimer’s disease month, to help with awareness of the disease was designated in 1983 as the month of November. The prime suspect in nerve cell degeneration — tau proteins — was identified in 1986. First Alzheimer’s drug trial specifically targeting symptoms of Alzheimer’s disease began in 1987. Through this trial scientists identified increased risk factors and several genes associated with the disease. The first Alzheimer’s drug approved by the FDA was in 1993 and in 1999 an Alzheimer’s vaccine was found to be successful in mice. There continues to be marked progress towards finding a cure or treatment of this fatal disease. How are these discoveries funded? Along with government funding these trials and clinical studies are mostly paid for through private donations. How can you help? On September 29, the Alzheimer’s Association will be sponsoring the first walk in Lawrence to raise funds for research. The event will begin at 8:00 a.m. at South Park. Your help on this walk is needed in several ways. You can assist by starting or joining a team and walking in the event. Team members raise funds for the walk. If you would prefer not to walk in the event, you can always donate to a team or volunteer at the event. For further information please call Michele Dillon at 785-832-0754.

Amazing Aging strives to provide readers with the information they need to live independent and productive lives. We also seek to feature stories of seniors who are active as workers, volunteers or engaged in hobbies. If you know a senior you would like to see featured in a future issue, please contact editor Marsha Henry Goff at mhgink@netscape.net or write to her in care of JAAA, 2910 SW Topeka Boulevard, Topeka, KS 66611.
Katie Sherrow of rural Tecumseh, known to her friends as Katie, is a genuine World War II Rosie the Riveter. She was not the model for Norman Rockwell’s iconic painting that graced Saturday Evening Post’s May 29, 1943 cover. However, had the artist been looking for a model who could actually rivet, Katie would have been an excellent representative of the women who worked in airplane factories repairing planes damaged in combat and building new ones.

On June 6th, Katie and seven other Rosies were honored along with World War II veterans at the Dwight D. Eisenhower Library in Abilene. All of them contributed to the victory over Germany, Japan and Italy. In fact, Katie’s reason for becoming a riveter was to help in the war effort. Shortly after America’s entrance into World War II, she and her friend Winnie Berg enrolled in Morton Aircraft School in Omaha, Nebraska to become riveters. Her brothers Alva Francis, Jr. and Charles Leroy were already serving in the military and, Katie says, “I wanted to do something to help.”

Indeed, she did help. Within a matter of months she and Winnie were employed by United Airlines in Cheyenne, Wyoming, where they repaired blood-stained planes damaged in combat. When they learned that Lockheed Aircraft was hiring women for the mechanized line in Burbank, California, the two women headed west.

On December 7, 1942, one year after the attack on Pearl Harbor, the women were among the first of their gender hired by Lockheed. Although they were freeing up men for combat, women who worked for Lockheed and other manufacturers were not always accepted by the male employees and were given the toughest, least desirable assignments. At one point, the situation was so bad that Katie and Winnie decided to enlist in the Women’s Army Corps (WACs). Although Katie was working full-time, standing on the metal rods of scaffolding that surrounded the planes in order to reach her work area because she was much shorter than the men, she was deemed to be anemic and did not pass her physical.

Winnie decided if Katie could not join the WACs, neither would she. The two women continued as partners in blind riveting, a skill much in demand. They were so capable that they proved themselves to the men and were assigned to help build a Constellation, the largest plane Lockheed manufactured. Katie said the company was facing a deadline on that plane and not everyone could blind rivet. “We could have asked for the moon,” she says, “and they would have brought it to us to make us more comfortable.”

Berlin had fallen and the war was coming to a close in Europe when Katie received word that her father who lived in Missouri had suffered a stroke. She quit her high-paying ($1.10 per hour) job and rushed home to help out. Her parents lived in a home she had purchased for them with her earnings. Katie’s father died shortly after she returned home, but her mother continued to live in that home for 50 years. Later, Katie realized she likely could have asked for and received a leave of absence from Lockheed, but she was so anxious to get home to help her parents that it did not occur to her.

After the war ended, Katie worked in the court system in Missouri before moving to Topeka where she worked for the Shawnee County Treasurer for five years and Topeka Parks and Recreation for 20 years before retiring in 1989. She and her friend Patricia Martin eventually took over Pat’s parents’ business and raised and trained greyhounds for racing while each worked at their fulltime)...
Rx for Mom: Avoid medically challenged daughters

Editor’s Note: It isn’t easy being a caregiver . . . especially when you are as unsuited to the task as my sisters and I were when our mother was sent home under hospice care with the expectation that she would not live out the day. Despite our lack of nursing skills, she recovered and lived another four years. It wasn’t enough, but we are grateful for every one of those extra days we had with us. —MHG.

By Marsha Henry Goff

“This is an example of really poor planning,” I said to my ill mother. “You have four daughters and didn’t get a nurse among us!”

I am SO not a nurse and the sad fact is that my sisters — Lesta, Bette and Vicki — aren’t a bit better at ministering to the sick than I am. Although we try as hard as we can, our efforts look less like a documentary of Florence Nightengale’s healing labors and more like a film entitled “The Four Stooges Do Medicine.” I suspect that Mom secretly would like to call the hospital and plead, “Get me back there before they kill me!”

Her wish to do that was probably never stronger than when she heard me volunteer Lesta and myself to learn an invasive medical procedure Mom temporarily requires. I missed a great Kodak moment by not having a camera at hand to snap photos of their respective faces — Mom’s stony and Lesta’s aghast. Within seconds, Lesta had withdrawn herself from the volunteer pool.

Later, I missed another great photo opportunity when I suggested that I might practice the procedure on Lesta and Vicki. Vicki’s eyes grew as big as saucers. Currently suffering from a slight limp, she exclaimed, “Oh, no! Mom and I are the only ones who can’t outrun Marsha!”

Except for Lesta’s helpful suggestion that I practice on an orange — “Make that a navel orange,” amended Vicki — I have been on my own in performing the procedure. Still, one sister or another does assist me by holding the flashlight. As for Mom, she grimaces and bears it.

When Mom’s friend (and Vicki’s mother-in-law) Kay came to visit the other day, Mom — presently taking so much medicine that her kitchen looks like a pharmacy — shared with Kay that, “they overdosed me.”

While the statement was quite literally true, there WERE extenuating circumstances involving a lack of communication between Lesta and me. What I understood was that Mom wanted one form of calming medication and Lesta thought another would be a better choice. When I told Lesta to give Mom the pill that Mom preferred, I had no idea that she had already given Mom the other medication. A few minutes after swallowing the second pill, our mother was so relaxed that we could have bulldozed the house down around her without her noticing or caring.

The next day, Mom’s oxygen was removed in order to get her up into a chair for a while. About 10 minutes after she was put back to bed, I went into her room and found the oxygen nose-piece still lying on the bedside table. I hastily replaced it on Mom’s face and, after ascertaining that she was no worse for the experience, told Lesta, “Mom has to be a lot tougher than we think or we would have killed her by now!”

So much of what my sisters and I know about medicine has been learned on the wrong CONTINUED ON PAGE FIVE
side of a stethoscope. A nice clinical overview in an academic setting would have been vastly preferable to the force-feeding of knowledge we have received from doctors treating our mother in the midst of yet another health crisis.

Furthermore, we’ve had to become familiar with intimidating machines that we wish had remained a mystery to us. Vicki has never forgotten sitting by our mother’s bed in an ICU unit after Mom suffered a heart attack many years ago. Vicki glanced anxiously at the monitor where the line graphing heart function looked anything but normal. Finally, Mom detected Vicki’s concern and craned her own neck to see the monitor. “I’ve watched enough Trapper John, M.D. on television,” Mom exclaimed with alarm, “to know that that’s not right!” Both Mom and Vicki were greatly relieved to discover from the nurse who responded to their frantic call, that it was the monitor — and not Mom’s heart — that was malfunctioning.

It may indeed have been poor planning on Mom’s part not to steer a daughter toward a career in medicine, but she provided such a wonderful growing-up environment by simply loving us and allowing us to follow our own dreams that all four of us absolutely adore her. So have no doubts about it: if the prescription that will heal Mom is love, we can fill it — and keep refilling it — until she is well.

*Published in Jest for Grins, Lawrence Journal-World, December 17, 2000.*

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**Caregiver Support**

Support groups are a place to receive and give support.

Many family caregivers need time to vent in a safe place.

1st Monday of the month at Topeka/Shawnee County Public Library, Perkins Room
1515 SW 10th Street  2:00PM

1st Wednesday of the month at Baldwin Methodist Church
708 Grove, Baldwin City  1:00PM

2nd Tuesday of the month at First Southern Baptist Church
4300 W 6th Street, Lawrence  1:00PM

2nd Monday of the month at Topeka/Shawnee County Public Library, Anton Room
1515 SW 10th Street, Topeka  3:30PM

3rd Wednesday of the month at Lawrence Public Library
707 Vermont Street, Lawrence  3:00 PM

3rd Thursday of the month at Topeka/Shawnee County Public Library, Perkins Room
1515 SW 10th Street, Topeka  2:00PM

The meeting once a month is a gentle reminder that family caregivers need to put themselves first even if only for a couple of hours each month!
Katie Sherrow
CONTINUED FROM PAGE THREE

Katie was accompanied to Abilene the afternoon before the event commemorating the 75th Anniversary of D-day Normandy by Pat and Pat’s niece Nancy Eckert who served as their driver. They checked into their motel then headed to the library to pick up the next day’s schedule. Shortly after returning to their motel, Katie heard a knock on their door and opened it to see her twin brothers Ron and Don who had traveled from Florida — with their respective wives Omah Jean and Edna — and her niece Judy Simmons who lives in Kansas City, Missouri. Her family had come to support her and see her honored for her work as a Rosie in a surprise visit planned by her sister-in-law Edna and Pat’s niece Nancy. “I couldn’t believe it!” Katie says, “It was such a surprise.”

Her twin brothers, ten years younger than she, joined the Air Force at 17 after their mother signed permission for them to enter the service. A rough boot camp experience in Texas caused them to reconsider their eagerness to join the military, according to Katie, but their mother advised them to stay put and they have praised her good advice ever since. Although Don later switched to the Army for its better educational opportunities, the twins stayed in the military until retirement from their respective branches of the service, as did their brother Charles who retired after 26 years with the US Navy.

The entire family drove to the Brookville Hotel for a special chicken dinner and a wonderful evening of catching up with each other. As Katie went to the cashier with Pat to pay the bill, she told the cashier she was there for the Eisenhower 75th Commemoration of D-Day because she was a Rosie the Riveter. “The cashier’s mouth just dropped,” Pat says, “and she couldn’t talk.” The manager came out and posed for a photo with Katie. “Even the little kids want pictures with her,” Pat says. “Everywhere she goes, people who don’t even know her come up to her and I never know what she’s going to say.”

The first part of Pat’s statement refers to Katie’s charismatic personality; the latter is a reference to Katie’s quick wit.

The morning program of the commemoration was held outdoors. The keynote speaker was Gen. Richard Myers, USAF (Ret.), president of Kansas State University and former Chairman of the Joint Chiefs of Staff. Mary Jean Eisenhower also spoke and veterans’ names were read. Music by the Abilene High School Women’s Select Chorus, a wreath-laying ceremony and the playing of taps with rifle salute concluded the morning’s program.

Katie and Pat admit to disappointment that Katie was not requested to speak. The veterans in attendance were asked to stand, but the eight Rosies in attendance were not. “I thought they would ask the Rosies to stand,” Pat says, “so they could have some recognition from the crowd.”

After lunch, however, that recognition came when Katie took part in what was dubbed "Call Kevin at (785) 841-9417 to place your display ad in the Fall 2019 issue of Amazing Aging! The deadline is October 15.

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Katie Sherrow

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IKEducation Hands on History Station: “Rosie the Riveter” with real-life “Rosies!” This living history event moved inside to the museum. Katie and the other Rosies had bought mementos of their World War II work to display and visitors could view them and visit with the Rosies. As usual, Katie was popular. “A lot of people came to see her and shake her hand and have pictures taken with her” Pat explains. “Little kids wanted to put on that bandana. They’d go through the line to shake hands with Katie and then they’d go back and do it again.”

Katie had informal interviews with a great many visitors and answered many questions about her work in helping to win World War II. She also participated in two formal educational interviews, one of which was filmed. She was promised a DVD of that interview which will become a permanent part of the library.

In summing up her special day in Abilene, Katie says, “I was honored to be there and thankful that Mary Jean invited me and that she really appreciated what I had done as a Rosie the Riveter.” But perhaps the most special thing about that memorable day for Katie was having her family and friends celebrate with her.

Protect yourself from thieves targeting your mail

By Marsha Henry Goff

You need to pay a bill so you write a check, place it in an envelope, stamp it and take it to your mailbox where you raise the flag to alert the mail carrier that there’s something in your box he needs to pick up. Sadly, you are also notifying an opportunistic crook who may open your mailbox, remove your check and — by using a procedure known washing — write in their name as payee as well as any amount they wish, then take it to a bank to cash. A more sophisticated thief may use software to alter the check and steal your money.

A friend recently told me that someone had stolen mail she placed in her mailbox for the mail carrier. She knows the risk of placing checks in her mailbox, so the thief only caused her a minor inconvenience.

However, her next-door neighbor had placed a personal check to a utility company in her mailbox and the thief took that, causing the woman a major amount of time and trouble. She had to stop payment on her check, change her bank account, get new checks, notify Social Security and other pension plans that made direct deposits into her accounts of the change in bank numbers. She also had to notify those companies that debited her account for bills she owed. The neighbor who transported her to the bank and various businesses says that it took one whole afternoon and most of the next morning. The woman’s daughter, who lived out of town, later visited her and helped her tie up loose ends.

There are ways to protect yourself from opportunistic crooks:

• Have new check orders sent to your bank instead of your home and pick them up there.

• Do not use a collection box (thieves have been targeting them searching for personal checks). Instead, place your envelope containing a check in the mail slot in the post office. Do not send cash through the mail.

• Lock your mailbox if that is an option.

• Don’t leave mail in your mailbox overnight. Know about when your mail is delivered and do not leave outgoing or incoming mail in the box for long.

• Collect mail promptly if you are expecting checks or credit cards.

• If you cannot be home to collect your mail, ask a trusted friend or neighbor to pick it up for you.

• Ask your post office to hold your mail if you plan to be out of town.

• If you do not get the check you are expecting, immediately report suspected theft to the police, then place a call to Postal Inspectors at 877-876-2455 and follow prompts.

• You may also ask your bank for secure checks that cannot be altered.

It is sometimes impossible or very difficult for a frail older person who doesn’t drive to follow this advice. If you absolutely must place an envelope in your mailbox, do so very close to mail delivery and watch that box until it is picked up by the mail carrier. Crooks are out there; don’t make it easy for them to steal from you.
Editor’s Note: Because of the upcoming Open Enrollment period, I am including in this issue a chapter from my book, Everything I know about medicine, I learned on the Wrong Side of the Stethoscope. I wrote the book to help people navigate the health care system with the goal that they can read it before they need it. MHG

By Marsha Henry Goff

Obamacare or not, insurance has always been confusing to consumers, thanks in part to the codes used when billing insurance claims. Coding Systems are confusing.

One reason is because there have been three different coding systems used in the past by health plans, healthcare providers and medical billing companies: the American Medical Association’s Current Procedural Terminology (CPT), Medicare’s Healthcare Common Procedure Coding System (HCPCS) and The World Health Organization’s International Classification of Diseases (ICD). Codes were originally developed to ensure a dependable and consistent way for insurance companies to process claims and pay for health services delivered by healthcare providers. The problem was that, while not impossible, it was difficult for patients to look up the codes to determine for what service the provider was billing the insurance company.

However, as of October 1, 2015, all health care providers, health plans, and health care clearinghouses are required to use ICD-10 codes which will simplify billing. Best of all, patients will be able to look up the codes free of charge online at www.icd10data.com, a free reference website that contains all of the official American ICD-10-CM (diagnosis) and ICD-10-PCS (procedure) medical billing codes. You may use this site to search for any code, and to learn how the structure of the new coding set works. Correctly entered by the provider, the diagnosis and procedure codes ensure that your health condition and the services you receive match.

Why is this important? For your medical provider to be paid or for you to be reimbursed by insurance, the treatment you receive must match the condition for which you are being treated. If you are being treated for pneumonia and your doctor orders an x-ray of your elbow, the x-ray charge likely will not be paid because it is unrelated to the pneumonia.

The codes are a combination of letters and numbers (e.g., the code S93.4 indicates a sprained ankle). Mistakes happen. A simple typo by the person entering the code could cause your insurance company to deny the claim, might cause an overpayment to the doctor, thus increasing your out-of-pocket expense, or label you with a health condition you do not have.

Do not hesitate to call your doctor or health plan if your claim is denied or if you are billed for something you do not understand. A friend was recently billed $5 for a visit to a hospital emergency room. The amount he was responsible for was small, but he has Medicare and a top-of-the-line supplemental insurance policy and did not understand why any payment should be due from him. When he called the hospital, the explanation was simple. Medicare does not pay for medicine one can take oneself. The $5 was for a single blood pressure pill that was administered by the nurse in the emergency room.

While checking your statements, be on the lookout for fraud. While your healthcare provider likely is not one of them, the world contains many crooks who fill their pockets with unearned dollars. Medicare health care expenditures in 2012 were $572.5 billion. It is estimated that 3 to 10 percent of health care expenditures each year are lost to fraud so an estimated $17 billion to $57 billion was lost that year due to Medicare fraud.

But Medicare is fighting back and, in an effort to control fraud, has initiated an incentive reward program where you can report suspected Medicare fraud. You may get a reward of up to $1,000 if the Inspector General’s Office reviews your suspicion, the suspected fraud isn’t already being investigated and your report leads directly to the recovery of at least $100 of Medicare money. You may call 1-800-MEDICARE for more information. Fraud hurts everyone (except, of course, those perpetrating the fraud . . . at least until they are caught).

Insurance companies sometimes delay paying bills to providers or reimbursing policy holders for procedures that are covered. My mother’s private insurance clearly stated that it covered a procedure her physician had performed. Yet for months the insurance company refused to pay for it. After a flurry of written correspondence and numerous phone conversations between Mom and her insurance company, I wrote to the company and noted I was copying our then state insurance commissioner. When Mom next heard from her insurance company, it was in the form of a check. “It’s frustrating,” admitted a current state insurance commissioner, “when an insurance company finally does what it should have done in the first place only because we’re involved.”

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Mom persevered, but many would simply give up and pay the bill themselves. Do not ever do that. And do contact your state insurance commissioner if you are having an insurance problem. They can help.

Research insurance companies before you select a plan. Make sure you are comparing apples to apples on various policies and ask friends for recommendations. Be as selective as you would be if you were buying a new car. Each year evaluate your policy to ensure you are in the best plan for your needs. This is especially true in choosing a Medicare Part D (prescription drug) plan. Costs for those plans vary wildly and can change from year to year.

In 1992, the federal government implemented SHIP (Senior Health Insurance Program), an independent program funded by federal agencies and not affiliated with the insurance industry, to help people make informed healthcare benefit decisions about their Medicare, Medicaid, supplemental, long-term care and Part D policies. Each state’s Area Agencies on Aging operate their own federally-funded SHIP program. My state of Kansas dubs their program SHICK (Senior Health Insurance Counseling for Kansas) while Ohio calls their program OSHIP (Ohio Senior Health Insurance Program). You may find your state’s program by visiting http://www.seniorsresourceguide.com/directories/National/SHIP/.

Area Agencies on Aging serve every part of the country and are an excellent resource when you need help finding the right policy. Best of all, their service is free of charge. Jayhawk Area Agency on Aging, which serves three Kansas counties, uses trained volunteers to assist seniors in selecting the best and most cost-effective choices for their Part D drug insurance policies. During the fall open enrollment period in 2014, SHICK volunteers saved the 500 clients for whom they had trackable data (i.e., those who had a Part D plan in 2013), an average annual saving of $569.05 or about 49% per person.

One client was in a plan that, with premiums and co-pay, cost $15,657 a year. A volunteer found a plan with a $1,071 annual cost, resulting in an astounding savings of $14,586. While a savings of that amount is an extremely rare occurrence, saving just $20 a month can be a real blessing to many people.

Stay on top of your policies and check every year to be sure you are in the best and most cost-efficient plan for you.

**Medicare Open Enrollment**
**October 15 through December 7**
Check out the many ways JAAA can help you decide on the best Medical Supplement and Part D Rx plans for you!

**Schedule an appointment with JAAA**
We will have appointments available at JAAA Monday-Friday 8:00 a.m. to 4:30 p.m. during open enrollment. We will begin taking appointments in late September for Open Enrollment. Appointments are available Monday through Friday from 9:00 a.m. to 4:00 p.m. Appointments fill up fast so the best time to schedule your appointment is late September or early October.

**Take part in a walk in clinic at JAAA**
We are having the Saturday Clinics for Open Enrollment on the following Saturdays:

- October 19, 2019
- October 26, 2019
- November 2, 2019
- November 9, 2019
- November 23, 2019
- December 7, 2019

From 9:00 a.m. to 1:00 p.m. — first come first served, those in door prior to 1:00 p.m. will be helped no matter how late we have to stay to do so. Please be aware that there may be a lengthy wait time.

**Attend JAAA’s DIY Medicare Part D Classes at Topeka/Shawnee County Public Library**
We encourage everyone to consider attending the Medicare Part D DIY classes that JAAA provides at the Topeka/Shawnee County Public Library on the second Thursday of the month at 9:30 a.m. We will walk attendees step by step through the Medicare Plan Finder and explain how to navigate and understand the information being provided to you so that you can make an informed choice regarding your Medicare Part D plan. We provide this training year round so don’t wait until open enrollment and take the opportunity now!
Call 211 when you need help and don’t know who to call

By Marsha Henry Goff

It is sometimes hard to know who to call when you need help. All you have to remember are three little numbers: 211. By calling 211, you will be referred to the social service agency or community organization that can help. Best of all, you may call in the midst of a crisis or simply for everyday needs.

The Federal Communications Commission (FCC) reserved the 211 dialing code for community information and referral services in 2000. The United Way of the Plains, located in Wichita, handles calls from 98 of the 105 Kansas counties, including Jefferson, Douglas and Shawnee. The other seven counties — Doniphan, Franklin, Johnson, Leavenworth, Linn, Miami and Wyandotte — are handled by United Way of Greater Kansas City.

Calling 211 simplifies the process of getting help, providing a shortcut to wandering through the sometimes complex web of health and community services. They can refer you to the right agency and even, on occasion, directly connect you to that agency. According to the FCC, dialing 211 can assist you with the following needs:

- **Basic Human Needs Resources** – including food and clothing banks, shelters, rent assistance, and utility assistance.

- **Physical and Mental Health Resources** – including health insurance programs, Medicaid and Medicare, maternal health resources, health insurance programs for children, medical information lines, crisis intervention services, support groups, counseling, and drug and alcohol intervention and rehabilitation.

- **Work Support** – including financial assistance, job training, transportation assistance and education programs.

- **Access to Services in Non-English Languages** - including language translation and interpretation services to help non-English-speaking people find public resources (Foreign language services vary by location.)

- **Support for Older Americans and Persons with Disabilities** – including adult day care, community meals, respite care, home health care, transportation and homemaker services.

- **Children, Youth and Family Support** – including child care, after-school programs, educational programs for low-income families, family resource centers, summer camps and recreation programs, mentoring, tutoring and protective services.

- **Suicide Prevention** – referral to suicide prevention help organizations.

If you are an older or disabled person who is calling 211 from Jefferson, Douglas or Shawnee County, you very likely will be referred to JAAA. But when we cannot help, 211 may refer you to an agency that can.

As caregivers, we can learn to do a great many things for those we love. This book is free to the first person who correctly identifies the procedure I did for my mother as described in the article “Rx for Mom – Avoid medically-challenged daughters” which begins on page 4 of this issue. If you are the first to email the correct answer to me at mhgink@netscape.com, I’ll email you back and tell you when your book will be available for pick up at JAAA.
Homecoming Celebration planned for Douglas County’s Senior Resource Center

The Senior Resource Center’s staff and the seniors they serve are eager to return in September to their newly renovated home at 745 Vermont Street. A big Homecoming Celebration, the exact date to be determined, is planned. On January 20, 2017, SRC temporarily relocated to the Dwayne Peaslee Technical Training Center at 2920 Haskell Avenue while the building was remodeled.

SRC will be returning to the home it has occupied for almost four decades. The agency moved into the former Police-Fire building in the spring of 1979 in space previously used by the Police Department. The city allocated $278,000 to transform police offices, a jail and municipal courtrooms into space for the agency that was then called Douglas County Senior Services.

Fire station No. 1, which remained at the Vermont location when the Police Department moved into their new quarters in the judicial building behind the Douglas County Court House, also relocated during the current remodeling. The Fire Department is being renovated and enlarged by regaining space previously used by SRC for senior dances and a congregate meal site.

The cost of the current renovation of the building was originally $5.33 million, but change orders for additions have increased the tab to over $7 million. The Police-Fire Station/Community Building was completed in 1951 and is listed on the National Register of Historic Places.

SRC continued its programs, including the popular Senior Wheels transportation service, from its temporary location, but plans to initiate some exciting new programs once back in its downtown location.

10 absolutes when caring for people with Alzheimer’s and Dementia

1. Never argue, instead agree.
2. Never reason, instead divert.
7. Never say “you can’t,” instead do what they can.
8. Never command/demand, instead ask/model.

Jo Huey, 1996
JOIN THE FIGHT FOR A FIRST SURVIVOR.

Walk with us and carry flowers representing your connection to Alzheimer’s — a disease that currently has no cure.

September 29
South Park
Register today to walk as an individual or form a Walk team!

alzwalklawrence.org