ing Bruce's status, and helps Bea

move Bruce from bed to wheelchair

before taking over to assist him with

ous assistive devices, including an

electric stair lift, it's now easier for Bruce to transition to daily activities

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Tender, Loving Care

How home care help has changed life for one Lamorinda couple By Laurie Snyder

www.lamorindaweekly.com



The love story of Bruce and Bea Cunningham, now in their 80s, began when Bea met Bruce, who was rooming with her brother at San Jose State University. Photo Ohlen Alexander ing, gets a briefing from Bea regard-

ging is not for amateurs. Joints crackle and pop. Progressive lenses only seem to make eyes progressively worse. Previously subtle snoring becomes an earth-shaking rumble. But as indignities go, these pale in comparison to Mother Nature's most wicked curveballs.

According to a report published aga's annual 4th of July dog parade. in The Journal of the Alzheimer's Association, "People with Alzheimer's and other dementias who live alone are exposed to higher risks - including inadequate self-care, malnutrition, untreated medical conditions, falls, wandering from home unattended and accidental deaths." As many as half do not have identifiable caregivers, and it is estimated that one in seven with Alzheimer's - roughly 800,000 Americans – are living alone.

Even when a caregiver is present and a loved one's declines are mostly physical rather than cognitive, the toll taken on those serving as primary caregivers can quickly overwhelm.

familycaregiving101.org, the dawning awareness often begins when your "mood is sometimes upbeat – you're proud you've been able to provide such wonderful care and make decisions that support your care recipient's best wishes," but you begin noticing a longing "for the days before caregiving. And, you're tired."

may remember Bea and her husband, ence with one local home care agency Bruce, as Moraga's 2003 Citizens of Bea found Senior Helpers in Moraga. the Year, the first duo ever so honored "There are 'caregivers," says Bea, by town leaders. Bruce guided and groomed generations of current and future community leaders – as a base- Helpers arranged for Kim Polen to ball coach and Boy Scout troop help the Cunninghams on weekdays. leader, and as the president and dis- Now, Polen arrives early each morn-

trict governor for Kiwanis. Bea served on the Parks and Recreation Commission and as the president of Moraga Women's Society, raising funds for everything from an Oakland homeless shelter to annual scholarships for Campolindo girls. Up until last year, she helped coordinate Mor-

Their lives changed, though, after Bruce had two strokes. His speech ultimately wasn't affected – but his walking was. He went from wheelchair to walker to cane with the help of his physical therapist (PT). But after he came home from rehabilitation, he grew increasingly reluctant to exercise - something that often happens with stroke survivors. So, Bea brought in PT help. It was expensive, though, so she tried PT assistants but they weren't a good fit.

Bea's days would have been hard for someone twice her size and half her age – assisting Bruce from bed to wheelchair to the shower before helping him dress and make his way down their L-shaped staircase. Three years ago, Bea realized she was also answering more and more questions for Bruce during their interactions with others. They saw a doctor who noted he might have mild dementia.

Although their children were relatively close by and willing to help, Bea wanted them to be free to live Take Bea Cunningham. Readers their own lives. After a failed experi-"and there are care givers."

Kevin Reneau, CSA of Senior

work; then, Polen leads Bruce take the pressure off," says Bea. through leg lifts and other exercises she re-assumes the role of primary caregiver around noon on weekdays and all day Saturdays and Sundays.

Polen helps Bruce maintain his memory with puzzles and with Jeopardy and other brain-teasing television programs. Meanwhile, Bea recharges her batteries - mentally and physically. It's easier to get to the grocery store and ophthalmologist; she even finds time to lunch again with

downstairs. Bea and Bruce eat break- her friends of 70 years. "Kim is what fast while Polen does light house- my kids wanted for me - someone to

A former pre-school teacher, which improved his stamina in just Polen has an obvious soft spot for one month's time. His increasing Bruce. "He's got a great sense of strength makes it easier for Bea when humor; he really makes me laugh," she says. Polen urges readers who might be living alone to arrange for Life Alert and for anyone caring for a loved one to "consider having someone from a home care agency come in to help. There's nothing to be afraid

> Bea counsels readers to begin planning now. Life can change in an instant, but with a bit of planning, life can still be golden.

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Vanessa Valerio, RN VP and COO for Patient Care

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Questions with home care?

End of life: comforting a terminally ill loved one...

DEAR VANESSA,

Ask Vanessa

I have an elderly family member who is critically ill and when we were at a doctor's visit recently, the doctor had mentioned the option/possibility of hospice care. I have heard of this type of care but am not sure exactly what hospice is. Why is it important and how does it differ from regular health care? What does it focus on and what types of services does hospice provide? Is this a kind of service that is covered by health insurance and are there other methods of payments as well? I hope that you can provide for me a better understanding of this part of health care and how one goes about utilizing these services. STEPHANIE

DEAR STEPHANIE,

Hospice is a type of care that focuses on the palliation of a terminally ill patient's symptoms. It is special because it concentrates on care--not cure; the goal is to provide comfort during the final months and days of life. It addresses the needs of the entire family, not only of the patient. Hospice care services are provided by a team of health care professionals who create a holistic plan of care that addresses pain and comfort, as well as physical, emotional, social and spiritual needs; it can be provided as long as your uncle's doctor and hospice care team certify that his condition remains life-limiting (life expectancy is usually 6 months or less). If your uncle decides to receive hospice care at home, members of the hospice staff will make regular visits to his home. However, it is also available at hospitals, nursing homes and dedicated hospice facilities. A primary care doctor and the hospice program's medical director will oversee your uncle's end-of-life care; nurses will address symptom management and concerns about end-of-life issues; home health aides can provide extra support for routine care; spiritual counselors provide spiritual guidance for the whole family; social workers provide counseling and support and will help address insurance and financial concerns; volunteers offer a variety of services depending on your uncle's needs; and bereavement counselors offer support and guidance before and up to one year after the death of a loved one in hospice. Remember that your uncle, his family and friends are important members of the team, too.

Medicare, Medicaid, the Department of Veterans Affairs and private insurance may pay for hospice care. While each hospice program has its own policy regarding payment for care, services are often offered based on need rather than the ability to pay. Be sure to ask about payment options before choosing a hospice program.

To find out about hospice programs in your area: contact your uncle's physician, your state or local health department, your state hospice organization, your spiritual leader, or a home health care agency. The National Hospice and Palliative Care Organization also offers an online provider directory: www.nhpco.org or 1-800-658-8898.

Ask your uncle if he has advance directives in place. These are documents that allow him to state what kind of health care preferences or types of special treatment he does and doesn't want in the event that he becomes unable to communicate. And consider the benefits of hospice care. It can make the difference between a comfortable existence and one that involves much suffering; it's been helping make life--and its loss--a little easier for many people.

Got Questions & Answers about Home Care is written by Vanessa Valerio, RN, VP and COO for Patient Care at Home Care Orinda. If you would like more information about senior care and how home care can help, please email Vanessa Valerio at vanessav@careindeed.com, call her at (925) 317-3080 or visit their website at www.homecareorinda.com/.