

Aging in Vermont

2020 RESOURCE GUIDE & DIRECTORY



Introduction

Welcome to the inaugural edition of the Aging in Vermont Resource Guide. We hope this guide will help you and your loved ones navigate life's later stages.

This book is designed to provide older Vermonters and their families with a list of local (and sometimes national) resources and explain why and how to access them. It can be challenging to know where to begin and where to find the help that you may need along the way. Vermont has a passionate and dedicated support community that can help provide options and answers.

While it is impossible to plan for every eventuality, anticipating challenges down the road can prevent you from being overwhelmed in the midst of a crisis. At times, you will have too many choices; at others, your options may be limited or seem inadequate. Help is just a phone call or website away – it's critically important to ask for help when you need it.

Our list is not exhaustive. You will almost certainly stumble upon other sources of help, whether from a fellow traveler or a Google search. As the U.S. population ages, our society is paying increasing attention and asking how we can support older adults to meet their caregiving, housing, medical, financial, and emotional needs.

We hope this guide eases your journey.

Community of Vermont Elders (COVE) maintains the online and printed Aging in Vermont Resource Guide to enhance public access to information about services and resources available to Vermont residents. The inclusion of any organization, agency, business, or service in this Resource Guide does not imply or constitute an endorsement or recommendation, nor does exclusion imply disapproval. This guide is the result of collaboration among providers and stakeholders, and to the best of our knowledge, the information contained in this guide was correct at the time of publication. The Resource Guide is not exhaustive, and consumers are encouraged to contact COVE or other providers for clarification or additional guidance.

Dear Reader,

Early on in my career with COVE, I was appointed to serve on a working group with over 30 other stakeholders, state employees, and older Vermonters. The intent of the working group was to make recommendations for an Older Vermonters Act that could guide and direct providers, advocates, and policy makers toward better and more complete services and supports for older adults in Vermont. Throughout the course of this working group, many inspiring and important ideas came forward, one of which was the need for information to point people in the right direction. Another was that aging, as a concept, is not restricted simply to health care or human services, but is an experience of all people and therefore touches all areas of our lives. We are all aging. The question that arises for me is: do we have the resources, the information, and the support to do so in a way that grants us the quality of life that we would choose for ourselves? And so COVE began building this guide to point people in the right direction and improve the referral and guidance processes.

With the COVID-19 pandemic this spring, we were galvanized into action. How are people going to find the information they need if there's no central place to find it? How can family members across the country support their loved ones without direction and understanding of Vermont laws and systems? As educators and advocates for older Vermonters, it is central to COVE's mission to improve quality of life for Vermonters as we age, through dialogue, education, advocacy, and empowerment.

This Guide is a first run at what we envision will be an annual publication that will grow in breadth and depth. We know there are essential pieces and services that we have missed, and we look forward to working with our partners and colleagues across the state to improve this Guide going forward. We welcome your constructive comments for improvement.

In light of COVID-19, some of the services and providers listed may have reduced or altered services and/or hours. Please contact providers directly for the most up-to-date information. We hope you find this resource helpful to your experience of aging in Vermont.

Sincerely,

Ruby Baker

Executive Director

Community of Vermont Elders

Get Help

9-1-1

Emergency: call if you can/text if you can't.

Vermont 2-1-1

Dial 2-1-1, vermont211.org

24/7 information and referral service to programs, services, shelters, food, etc.

HelpLine

1-800-642-5119

vermont4a.org

Information and assistance for Vermonters 60 and older. Connect to services including health insurance (SHIP) and Meals on Wheels (MOW).

Vermont Legal Aid

1-800-889-2047

vtlawhelp.org/triage/vt_triage.

Mental health 24/7 support and information in any type of crisis National Suicide Prevention Lifeline: 1–800–273–8255 or Crisis Text Line: Text "VT" to 741741 from anywhere in the US

Domestic Violence Hotline

1-800-228-7395

Sexual Violence Hotline

1-800-489-7273

Veterans Crisis Line

1-800-273-8255, press 1

Vermont Senior Medicare Patrol (SMP)

802-229-4731 or <u>vermontelders.org</u> Report Medicare error, fraud, and abuse.

Adult Protective Services

fw1.harmonyis.net/VTDAILLiveIntake/

1-800-564-1612

Report abuse, neglect, or exploitation of a vulnerable adult.

Attorney General's Office

ago.vermont.gov

Consumer assistance: 1–800–649–2424

File a complaint or report a scam.

Civil Rights Unit: 802–828–3657

Assists victims of hate crimes.

Go! Vermont

1-800-685-7433

connecting commuters.org

Carpool matching, vanpool, statewide bus routes, and other travel options.

Vermont Foodbank

1-800-585-2265

vtfoodbank.org

Department of Disabilities, Aging and Independent Living (DAIL)

802-241-2401, dail.vermont.gov Telecomm Relay Service: dial 711

3SquaresVT

1-800-479-6151

dcf.vermont.gov/benefits

Supplemental Nutrition Assistance Program (SNAP, formerly food stamps)

802Quits

1-800-QUIT-NOW

802quits.org

Free help to quit smoking

Vermont HelpLink

1-802-565-LINK

vthelplink.org

Confidential referrals to treatment and services for alcohol/drug abuse.

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Planning early for management of your or a loved one's financial and legal affairs later in life – and after death – can save time, money, and stress down the road and keep you from having to make rushed decisions in a crisis.



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Financial planning & management

Managing your money can be tricky, whether you have plenty or not nearly enough. Planning how you will finance your later years is further complicated by not knowing how long you'll need it and how much you'll need. This section looks at issues around Social Security and planning for management and disposal of your property.

Applying for Social Security retirement benefits

Social Security benefits are paid from the pool of tax dollars you paid into during your working years. The higher your lifetime earnings, the higher your benefits. The amount you will receive is also affected by the age at which you start taking them.

Deciding when to retire

The decision on when to begin taking benefits can be complicated. You can get Social Security retirement benefits as early as age 62, but your benefit will be lower than if you wait until full retirement age. If you turn 62 in 2020, your benefit would be about 28.3 percent lower than at 66 and 8 months (full retirement age is determined by the year you were born). The chart at ssa.gov/OACT/quickcalc/earlyretire. html will help you understand the effect on you. When you delay collecting benefits beyond your full retirement age, the amount of your retirement benefit will continue to increase up until age 70. There is no incentive to delay claiming after age 70.

Benefits for spouses

Spouses who never worked or have low earnings can get up to half of a retired worker's full benefit. If you're eligible for both your own retirement benefits and spousal benefits, your own benefits are paid first. If your benefits as a spouse are higher than your own retirement benefit, you'll get a total benefit equaling the higher spouse benefit.

Work and receive benefits

You can continue to work and still get retirement benefits without reduction, unless your earnings exceed certain limits for the months before you reach full retirement age.

Sign up for benefits

Apply for retirement benefits about four months before you want them to start. You can do this online at socialsecurity. gov; call 1-800-772-1213 (TTY 1-800-325-0778); or make an appointment at any Social Security office to apply in person. The original or copied documents you may need to apply are listed at ssa.gov/ssi/text-documents-ussi.htm. You can mail them or take them to the closest Social Security office to be photocopied.

Adapted from SSA Publication No. 05-10035 (ssa.gov/pubs/EN-05-10035.pdf)

The right to appeal

You can appeal a decision made on your claim on your own, with free help from Social Security, or choose a representative to help you. For information on appeals and selecting a representative, read "Your Right to Question the Decision Made on Your Claim" (Publication No. 05–10058) at ssa.gov (search for "publications" and then find "the appeals process" under the topics pull-down menu).



Paying tax on benefits

About 40 percent of benefit recipients must pay income taxes on their benefits. At the end of each year, you'll receive a Social Security Benefit Statement (Form SSA-1099). You may find it easier to have Social Security withhold federal taxes than pay quarterly estimated tax. Visit <u>irs.gov</u> or call the IRS toll-free at 1-800-829-3676.

Adapted from SSA Publication No. 05-10035 (ssa.gov/pubs/EN-05-10035.pdf)

Estate plan essentials

Estate planning is important and does not have to be overwhelming. The basic elements of an estate plan depend upon your individual circumstances and goals. A well-thought-out estate plan has meaningful implications for your quality of life now and for the quality of life for those individuals and organizations you care about, after you die.

Elements of an estate plan

An estate plan may involve some or all of the following: a will, a Power of Attorney (which can be made durable), and/or a trust. It sometimes includes an Advance Directive for health care, but these can be created apart from the rest of your estate documents (see Pg. 32).

Other considerations

A good estate plan should also confirm that life insurance, retirement accounts, bank accounts, and other financial instruments or accounts have up-todate beneficiary designations to ensure a smooth transfer of these assets outside of the probate court process upon your death. It should also consider your wishes for the disposition of real property upon your death.

Don't put this off

Estate planning is something that many of us consider but few of us do. The COVID-19 pandemic has reminded us of the fragility of life. With that lesson comes a call to action. Whether you are 28 or 88, there is no better time to arrange your affairs to ensure quality of life, peace of mind, and control over the disposition of your hard-earned assets.

Adapted from a web entry by estate planning attorney Caroline S. Earle, Esq. from Earle & Freeman, PLC., Montpelier cselawvt.com/the-firm.html

Estate resources

Excellent resources are available to help in your estate planning. The Vermont Department of Health (healthvermont.gov/systems/advance-directives) and the Vermont Ethics Network (vtethicsnetwork.org/medical-decision-making/advance-care-planning) have Advance Directive information and fillable forms. The Vermont Ethics Network's low-cost booklet ("Taking Steps: Planning for Critical Health Care Decisions" vtethicsnetwork.org/order-publications) has more information and forms regarding advance planning.

It is helpful for your will's executor to understand the duties and responsibilities of this role. The Vermont Judiciary provides a free, downloadable PDF guide to probating a Vermont estate (vermontjudiciary.org/probate/wills-and-estates) that is easy to understand and provides reliable quidance.

Power of Attorney (POA)

A Power of Attorney is a legal document that allows an individual to give another person the authority to make their financial, medical, and personal decisions or handle business matters. They can be temporary or life-long (see Durable POA entry below). They can be created by a lawyer, or can be created by anyone using a long or short form (available at vtlawhelp.org).

Principals and agents:

The person who creates a POA is called the "principal." The person given the power to act for someone else is called the "agent."

Durable Power of Attorney:

Making a POA durable ensures that it remains valid even if the principal becomes incapacitated. If a Power of Attorney is not durable, the authority of the agent automatically ends when a principal is no longer capable of handling his or her own affairs. All POAs expire upon the death of the principal.



It is critical to assign POA and Advance Directive (see Page 32) agents and complete documentation while the principal is still able to understand and make decisions. These documents are often included in estate plans and can be drawn up by a lawyer or completed by the principal (forms available at vtlawhelp.org).

POA agents can handle financial and business transactions, buy life insurance, settle claims, operate business interests, make gifts, sign documents, and employ professional help, among other duties. Some accounts – notably investment accounts – may require the POA principal to sign a separate POA for specific accounts.

Legally, an agent must act in the best interest of the person they represent. Different POAs can be held by different individuals on behalf of the same person. It is important to choose these individuals carefully. Does a general POA holder have a head for business and money matters? Do they live close by or would they have to travel to manage the principal's affairs? Principals should clearly communicate their wishes to their POA holders beyond the documentation.

Legal issues

Qualified attorneys can provide advice to people who just need to talk to an expert. A lawyer can help navigate the complexities of estate planning and settlement, long-term care/ Medicaid, guardianship, drafting wills and trusts, tax strategies, and more. An experienced lawyer can save clients emotional and financial hardship down the road.

Do I need a lawyer?

If you want to try to address the problem yourself, first try Vtlawhelp.org and search for what you need. You can try an organization's customer service department or, at a small organization, its management. The Vermont Attorney General's Office (ago.vermont.gov/) offers help and guidance to consumers. Other groups, such as the Area Agencies on Aging, (vermont4a.org) can point you to appropriate resources for your specific need.

How do I find a lawyer?

Just as you would use the services of a real estate lawyer in buying or selling a house, attorneys who specialize in elder law are appropriate for issues we face in life's later stages. You can find numerous elder law attorneys in Vermont online or through groups that help older Vermonters.

If you can't afford the services of a full law firm, Legal Services Vermont (legalservicesvt.org) and Vermont Legal Aid (vtlegalaid.org) provide free consultation, advice, and representation for those in poverty, with a disability, or over age 60. They also address discrimination in housing decisions and health care insurance or services.

How to find free & reduced-cost legal assistance

The Vermont Bar Association (VBA) offers a variety of programs to help low-income Vermonters get legal assistance. VBA's focus includes landlord/tenant disputes, collections, and child-support contempt defense, but VBA also handles other types of cases. To find out if you qualify for free legal help, call 1-800-889-2047 or visit vtlawhelp.org. This is the statewide contact information for Legal Services Vermont and Vermont Legal Aid.

Other legal help sources:

South Royalton Legal Clinic

(VT Law School) 802-831-1500 or vermontlaw.edu

Helps residents from several Vermont counties who can't afford lawyers with issues such as children's rights, family law, housing, and welfare.

Vermont Bar Association's Online Lawver Referral

1-800-639-7036 or vtbar.org/LRS

Lawyers provide initial 30-minute consultations for no more than \$25. Go online or call during regular business hours.

Legal Services Vermont

1-800-889-2047 or

<u>legalservicesvt.org</u>

If this group can help, you will be referred to a paralegal or lawyer at Legal Services Vermont or Vermont Legal Aid. Services are free.



Vermont Association of Area Agencies on Aging











Mission

Providing advocacy, leadership and a voice for the aging network in Vermont

Vision

A Vermont that values and supports us as we age

We are the association of five non-profit Area Agencies on Aging located throughout Vermont to respond to the needs and directions of older Vermonters and their families by offering information and assistance in many areas. We can share available options for caregiver support, health insurance counseling, transportation, senior nutrition programs including meals on wheels, adult day programs, home health services, housing alternatives, exercise and wellness programs and supports for Veterans to live independently in their own homes.

Call our Helpline at 1-800-642-5119 to connect with your local Area Agency on Aging



Maintaining health and wellness as we age can be overwhelming. Understanding the supports available, knowing what to ask, and making decisions now can improve your ability to age comfortably and get appropriate care and support when you need it.



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Health insurance

The ABCs of Medicare

Medicare is a U.S. government program providing health insurance to people 65 and older, certain younger people with disabilities, and people with end-stage renal disease.

Part A (hospital) covers inpatient hospital stays, hospice care, some home health care, and three months of care in a skilled nursing facility (SNF) for nursing care or rehabilitation after an adverse event.

Part B (medical) covers certain doctors and services, outpatient care, medical supplies, preventive services, and some home health care.

Part C (Medicare Advantage Plan) is a private insurance plan that combines parts A and B and may include part D.

Part D (prescription) adds prescription drug coverage to:

- Original Medicare
- Some Medicare cost plans
- Some Medicare private fee-for-service plans
- Medicare Medical Savings Account plans

For details, visit <u>cms.gov/Medicare/</u> Medicare

Adapted from Center for Medicare and Medicaid Serivces (cms.gov)

Enrolling in Medicare

If you're not already getting Social Security benefits, you should contact the Social Security Administration (SSA) about three months before your 65th birthday to sign up for Medicare, even if you don't plan to retire at age 65. If you receive Social Security or Railroad Retirement Board benefits, SSA will send you Medicare enrollment information a few months before you become eligible.

If you live in one of the 50 states, Washington, D.C., the Northern Mariana Islands, Guam, American Samoa, Puerto Rico, or the U.S. Virgin Islands, SSA will automatically enroll you in Medicare Parts A and B. However, because you must pay a premium for Part B coverage, you can choose to turn it down.

SSA will not automatically enroll you in a Medicare prescription drug plan (Part D). Part D is optional, and you must elect this coverage. For the latest information about Medicare, visit medicare.gov or call 1-800-MEDICARE (1-800-633-4227) or 1-877-486-2048 (TTY).

From Social Security Administration Publication No. 05-10035 (ssa.gov/pubs/EN-05-10035.pdf)

Vermont Senior Medicare Patrol (SMP)

1-877-808-2468 and smpresource.org; or 802-229-4731 vermontelders.org.

SMP helps older adults protect, detect, and report instances of Medicare error, fraud, and abuse.

Medicaid

Medicaid is a joint federal and state program that helps people with limited income and few assets cover health care costs. It provides health insurance to eligible low-income adults, children, pregnant women, older adults, and people with disabilities. Medicaid is often used to pay for eligible Vermonters' long-term nursing home care.

Vermont seniors may be eligible for one of several different Medicaid long-term care programs. Eligibility criteria vary with marital status, and Vermont offers multiple pathways toward eligibility.

- Institutional/Nursing Home Medicaid is an entitlement (anyone who is eligible will receive assistance) and provided only in nursing homes.
- Medicaid Waivers/Home and Community-Based Services is provided at home, adult day care, or assisted living.
- Regular Medicaid/Aged Blind and Disabled (MABD) is an entitlement (anyone eligible will be covered) and is provided at home or adult day care.

Be aware that Medicaid has a fiveyear look-back policy, meant to prevent Medicaid applicants from giving away assets or selling them under fair market value in an attempt to meet Medicaid's asset limit. If an applicant is found to have violated this rule, a period of Medicaid ineligibility will be established.

Find a quick reference for determining eligibility, and more information, at medicaidplanningassistance.org/medicaid-eligibility-vermont. Those who do not meet standard eligibility requirements may be able to qualify in different ways.

State Health Insurance Assistance Program (SHIP)

The State Health Insurance Assistance Programs (SHIPs) provide local, in-depth, and objective insurance counseling and assistance to Medicare-eligible individuals, their families, and caregivers, including:

- One-on-one assistance with reviewing health or prescription drug plan options
- Screening Medicare recipients for assistance program eligibility
- Explaining how Medicare works with supplemental policies, retiree coverage, Medicaid, and other insurers
- Offering new-to-Medicare boot camps

SHIP is run by Vermont's regional Area Agencies on Aging.

Contacting SHIP:

Callers can access SHIP at the Area Agency on Aging (AAA) HelpLine number (1–800–642–5119), or at their regional Area Agency on Aging. A SHIP coordinator will call back for a oneon-one consultation.

SSA (Social Security Administration) and Green Mountain Care refer many people to SHIP via the AAA HelpLine number (1-800-642-5119). This number appears on the "Medicare and You" book mailed to all Medicare recipients each September.

Information provided by Pati Kimball, SHIP Coordinator at Senior Solutions

Long-term care insurance

Long-term care (LTC) insurance covers long-term services and supports, including personal and custodial care in your home, a community organization, or other facility if you are unable to care for yourself because of a chronic condition or disability.

Some 70 percent of those turning age 65 in 2019 will need some type of long-term care, according to the U.S. Department of Health and Human Services.

Long-term care policies

While LTC policies became known for premium payment spikes, LTC insurers have made significant changes in how they issue and price their plans. With decades of claims data on which to base underwriting, premiums should become less volatile.

If you want insurance, start looking early. Initial premiums at age 65, for example, are 8 percent to 10 percent higher than those for new customers who are 64. Policies for couples typically cost 30 percent less than separate policies.

Independent agents sell policies from multiple companies rather than a single insurer.

For extra expertise and a wider choice of policies, look for an agent able to sell long-term care partnership policies — part of a national program that has continuing education requirements for insurance professionals.

Without insurance, you need a plan

Medicaid will cover long-term care costs if you're impoverished, and those with adequate resources can likely pay for future care out of pocket. Weigh other factors: Do you have home equity? Nearby children who will pitch in? Or do you have a family history of dementia that puts you at higher risk of needing care?

If you use less than 4 percent of savings each year for living expenses, you may be comfortable going without insurance, but you'll need to plan for that possible expense, saving more than you may have planned, and keeping LTC money separate from an income portfolio for everyday expenses.

Still, if you find yourself priced out of the market or ineligible for health reasons, there are other options to pay for LTC, ranging from reverse mortgages to Medicaid.

longtermcare.acl.gov/index.html

From the U.S. Department of Human Services and U.S. News & World Report

Choices for Care

Choices for Care provides a package of long-term services and supports to Vermonters 18 and older who need a nursing-home level of care. Typically, participants require extensive or total assistance with personal care on a daily basis. Eligible people choose where to receive their services: in their home, their family's home, an Adult Family Care home, Enhanced Residential Care, or nursing facility. Participants must meet a clinical and financial eligibility for long-term care Medicaid in Vermont.

<u>asd.vermont.gov/services/choices-for-care-program</u>

What's available at your local Area Agency on Aging?

Information & assistance

Call the HelpLine at 1-800-642-5119 to be connected to a knowledgeable professional to assist you with questions you may have around caregiver support, Medicare, transportation, housing, long-term care options, transitioning after a hospital stay, wellness, nutrition counseling, preventing falls, supporting veterans in their own homes, Meals on Wheels, and any of the services listed below.

Nutrition & meals

Area Agencies on Aging (AAAs) partner with local agencies to provide meals at community sites and Meals On Wheels to individuals who live at home and need a nutritious meal delivered. Nutrition counseling may also be available to individuals.

Health insurance & Medicare counseling

AAA offices have certified State Health Insurance Assistance Program (SHIP) staff who provide counseling to Medicare beneficiaries and those about to become eligible for Medicare, including:

- Information about eligibility and enrollment in all parts of Medicare:
 A, B, C and D
- Open enrollment and assistance selecting a Medicare Prescription Drug Plan
- Enrollment and eligibility in other health care programs, including Medicaid, VPharm, Medicare supplemental insurance, and/or long-term care insurance

Caregiver supports

Each of Vermont's five Area Agencies on Aging can help to identify local resources, training, and services for caregivers.

Care management

Qualified staff at AAAs are able to provide you and your loved one with options for you to consider regarding:

- In-home care
- Transitioning back home from a stay at the hospital or nursing facility
- Assistance in developing a personal care plan
- Coordinating the services that you need with local community partners and more

Adapted from Vermont Association of Area Agencies on Aging (vermont4a.org)



Health care

How to prepare for your doctor visit

Why prepare?

Your last visit was probably 3 to 6 months ago. A lot may have happened in that time.

- Visit time is approximately 15 minutes.
 Time is precious!
- Your health is too important to not be prepared.
- Your primary care provider is the key person on your health care team.

How to prepare

- If you can, bring someone with you to take notes and help you remember what was said.
- Bring your medication bottles prescription, over-the-counter, and herbal/vitamin supplements.
- Make a list of questions including those concerning tests, medications, and screenings – and note any new problems/symptoms. Bring it with you.
- If you have pain, rate it.
- Bring any logs you keep, such as blood pressure or blood sugar.

Patient portals

Most health care providers now offer online patient portals. These personal web pages, which are password-protected, may allow you to review test results, contact your doctor or nurse, read your after-visit summaries, renew prescriptions, check on upcoming appointments, or pay your bill. Your provider's office can provide you with details or help you set up an account.

At your visit

- Request a copy of medical tests and results.
- Ask why and how to make any change in nutrition.
- If your medication is changed, ask why, what possible side effects are, and food interactions.
- If you don't understand something, ask!
- If tests are done (like blood work) and you don't get results within a week, call.
- Make sure you understand why treatments or tests are being prescribed.
- Schedule a time for further discussion, if needed.
- Take notes.
- If you brought questions, ask your provider to write down answers.
- Ask for clarification if needed and repeat back to your provider what you have heard.

Organize your health information

Start a binder for your health information, including:

- Advanced Directive/COLST form
- Medication list
- Allergies
- Health problem list
- After-visit summaries
- Test results

Feeling overwhelmed?

If you need help navigating your health care, you can contact:

- Community Health Teams through your primary care office
- If you participate in SASH programming, make an appointment with your SASH wellness nurse or coordinator (See Pg. 54).

What is a Federally Qualified Health Center (FQHC)?

The federal government supports FQHCs as the nation's primary safety-net system for health care. FQHCs provide comprehensive services in medically underserved regions. They accept patients regardless of ability to pay, and they work with their communities to address barriers to health, such how to access care without transportation.

FQHCs:

- Offer medical, dental, oral, vision, mental health, and enabling services.
- Have 68 Vermont locations, across every county in Vermont.
- Accept all patients, regardless of insurance or ability to pay, and offer sliding-fee payment scales.
- Have a patient-majority governing board and are rooted in their own communities' needs.

For a full directory of FQHCs licensed in Vermont, visit: <u>dlp.vermont.gov/federally-qualified-health-directory</u>.

Information adapted from Green Mountain Care Board (gmcboard.vermont.gov)



Veterans Home Based Primary Care program

The Veterans Association in Vermont offers Home Based Primary Care (HBPC) to veterans. Services are provided by a team supervised by a VA physician and including a primary care provider, nurses, rehabilitation staff, a social worker, and a dietitian.

This program may be right for Veterans with complex health care needs who have a hard time getting to a clinic. HBPC may also be right for patients who are isolated or whose caregiver needs support and assistance. Home Based Primary Care is part of the VHA Standard Medical Benefits Package. All enrolled Veterans are eligible IF they meet the clinical need for the service and it is available.

If you qualify for Home Based Primary Care, your care plan will include:

- Home primary care visits
- Regular home nurse visits
- Case management through the nurse
- Help with coordination of services by the HBPC team
- Evaluation by a physical or occupational therapist, with ongoing home visits if needed
- Nutrition evaluation and counseling from a dietitian
- Help with managing medications

Your physician or other primary care provider can answer questions about your medical needs and whether you are eligible for HBPC. Or call the program at White River Junction VAMC at 802–291–6200.

Adapted from White River VA Medical Center (whiteriver.va.gov)

Geriatric-care coordinators/managers

Usually RNs or social workers, these managers can assess the needs of an older person and create and implement care plans; assist older adults and their families with access to medical, mental health, and financial resources; and guide resolution of family conflicts around long-term-care planning.

Geriatric-care providers:

Geriatric-care providers address the complex and multifaceted health issues faced by people as they age; and promote health, stressing prevention and treatment of disability and disease. Geriatricians – physicians who do this work – monitor care among diverse specialists to ensure safety and optimal outcomes.

Telemedicine

What is telemedicine?

The COVID-19 pandemic led many health care and mental health providers to adopt – or increase the use of – telemedicine (sometimes called telehealth) to provide safe care from a distance. Remote visits are arranged using teleconferencing platforms such as Zoom through your smartphone or computer, using a secure connection that complies with HIPAA. During these visits, your doctor or other provider will evaluate your condition, consult with you, make diagnoses, and arrange for appropriate treatment.

Visits provided via telemedicine are billed to your insurance the same way in-person visits are billed.

Telemonitoring

Telemonitoring gives people the tools to improve their safety at home.

Easy-to-use touchscreen tablets prompt you to measure and record your vital signs daily and transmit them wirelessly to a nurse, who reviews your data.

Daily monitoring allows providers to respond more quickly to biological changes and can prevent an emergency visit or hospitalization.

When telemonitoring is indicated

Telemonitoring may be a good option if you:

- Have had frequent hospitalizations or emergency room visits
- Have a chronic disease such as heart disease or a respiratory disorder
- Have been diagnosed with congestive heart failure
- Are struggling to control diabetes
- Your physician or home health nurse thinks a telemonitor could be helpful
- Have had heart surgery
- Are juggling multiple medications and medication changes

Telemonitoring provides you with:

- Needed care from your home.
- A sense of security
- Greater connection to your nurse and active care partnership
- The knowledge to better manage your disease
- Immediate identification of and action on problems
- A daily health routine

Find a Vermont telemonitoring provider

Use the agency finder map on vnavt.org or call 1-855-484-3862 to find your local home health agency. Ask your health care provider if they offer it.

Adapted in part from vnavt.org

Mental health assistance

Depression, anxiety, addiction, and other mental health issues are a normal part of aging. Left untreated, they can lead to fatigue, illness, and even suicide. One in four older adults experiences some mental disorder such as depression, anxiety, or dementia.

While disabilities due to mental disorders are a major public health concern, there are a number of effective confidential programs for older adults that address mental health and/or addiction issues.

Crisis Text Line:

text "VT" to 741741

Suicide Prevention Lifeline:

1-800-273-8255

Vermont Peer Support Line:

1-833-888-2557

Veterans Crisis Line:

1-800-273-8255 (Press 1)

LGBTQ Support Hotline:

802-863-0003

Vermont HelpLink:

802-565-LINK

802Quits:

1-800-QUIT-NOW

Geriatric psychiatry

A geriatric psychiatrist is a medical doctor with special training in the diagnosis and treatment of mental disorders that may occur in older adults. These include dementia, depression, anxiety, and late-life schizophrenia.

Because older adults have special physical, emotional, and social needs, the geriatric psychiatrist approaches diagnosis and treatment by listening and responding to the concerns of the older adult, helping families, and (when needed) working with other health care professionals to develop effective approaches to treatment.

Coexisting medical illnesses, medications, family issues, social concerns, and environmental issues are integrated into a comprehensive program of care.

In Vermont, geriatric psychiatrists are on staff at UVM Medical Center, Rutland Regional Medical Center, and the VA Medical Center. Contact your primary care provider for other local recommendations.

Adapted from healthyplace.com (healthyplace.com/anxiety-panic/articles/what-is-a geriatric-psychiatrist)



Wellness

Preventing falls

Falls are a main cause of injury and loss of independence in people over 65. As we age, our sense of balance declines, and illness, injury, and medication side effects can leave us unsteady on our feet or with balance issues. You can take steps to prevent falls:

Maintain health

- Keep your bones strong. Get enough vitamin D and calcium, and get weight-bearing exercise.
- Have your vision and hearing checked each year or if you notice a change.
- Have foot problems checked early, and make sure your shoes fit snugly.
- Get up slowly from a sitting position.
- If you are weak or dizzy, don't walk around. Call your doctor right away if you lose your balance.
- Drink plenty of water.

If you live alone

- Consider wearing an alert device or carrying a portable phone.
- With another person, learn how to get up from a fall. If you can get up alone, practice doing so. If you can't get up by yourself, see a physical therapist.

Learn how to keep your balance

- Learn a few exercises for strength and balance and practice these daily.
- Wear low-heeled, supportive, nonskid shoes in good shape.
- Make sure your walker or cane is fitted to you and the rubber is not worn.

Falls Free Vermont

Find a listing of many falls prevention classes and other resources for individuals, families, and caregivers at fallsfreevermont.org. Most hospitals, physical therapy clinics, and senior centers offer balance training and fall-prevention programs. Ask your doctor if one is advisable.

Adapted from the University of Vermont Medical Center website (uvmhealth.org/medcenter)

Foot care supports your health and mobility

As we age, foot problems can limit our mobility and lead to more serious health conditions. Routine foot care is important for:

- Maintaining muscle and bone strength by supporting mobility and physical activity
- Proper foot and body mechanics, which help prevent falls
- Identifying early signs of more serious health issues, such as diabetes

Foot care is best provided by Registered Nurses trained in foot-care assessments. This includes:

- Visual inspection of foot and lower leg for skin changes and breakdown
- Toenail clipping
- Massage
- Prevention of common foot problems through education
- Referrals to medical specialist when necessary

Available foot care:

- The VNAs of Vermont provide regular foot clinics for a nominal fee. Contact vnavt.org or call 1-855-484-3862.
- Local senior centers or meal sites often host local foot clinics.
- Podiatrists and other foot-care providers offer this service.

Adapted from the VNA's of VT (vnavt.org)

Keeping safe in extreme heat

When temperatures soar, so do heat-related illnesses. Older people and those with physical or mental illness are more susceptible to these. Know what to watch for.

- Hot, red, dry, or damp skin
- Fast pulse
- Headache
- Dizziness and/or nausea
- Confusion
- Passing out
- Cold, clammy skin
- Muscle pain or spasms

If body temperature reaches 103F or higher, you are vomiting, or your symptoms worsen or last more than an hour, **call 911 immediately.** Move to a cool place, loosen your clothes, take a cool shower or bath, or apply cool cloths to the body. If your pulse is weak, sip water.

A bad sunburn, which may include blisters, can be treated with cool water and moisturizing lotion. Stay out of the sun and do not break blisters.

If you develop heat rash – small red blisters that look like pimples – stay cool and dry, and use body powder to soothe the rash.

Adapted from the Vermont Department of Health (healthvermont.gov)



Beat the heat

- Take a cool bath or shower.
- Check on people most likely to become ill from heat: older adults, people who live alone, and people who are physically or mentally ill or have a disability.
- If you don't have air conditioning, go someplace that does – a senior center, library, mall, or cooling shelter.

Durable medical equipment (DME)

DME is equipment that helps people complete daily activities. It includes wheelchairs, walkers, lifts, and oxygen tanks.

Medicare usually covers DME if:

- It can be used multiple times.
- It is designed to help a medical condition or injury.
- It is primarily meant for use in the home.
- It is likely to last three years or more.

To be covered by Medicare:

- DME must be prescribed by a primary care provider, among other conditions.
- For those who are in a skilled nursing facility or are hospital inpatients, DME is covered under Medicare Part A.
 Otherwise, it is covered by Medicare Part B.

Look for durable medical equipment at:

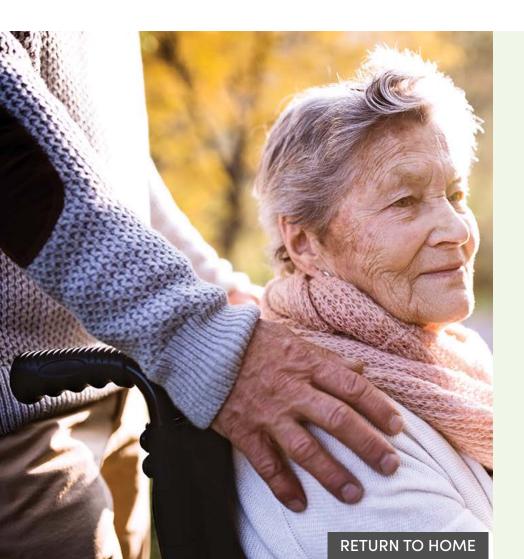
- Medical supply stores (Medicare may cover some of the cost – supply store staff will know.)
- DAIL Assistive Technology Program atp.vermont.gov/services
- Craigslist vermont.craigslist.org/search
- Front Porch Forum <u>frontporchforum.com</u>

Check with the local senior center, home health agency, physical/occupational therapists, or Area Agency on Aging to find free loaner programs for some equipment.

Wheelchair assessments

Before buying or renting a wheelchair, consider getting one that meets your individual physical and social needs. An occupational therapist completes comprehensive wheelchair assessments by evaluating functional seating and positioning to recommend wheelchair and seating options. The therapist can place equipment orders and follow up with proper fitting.

Wheelchair and equipment reimbursement depends on individual insurances and requires an appropriate medical diagnosis and doctor's order. Most Vermont hospitals have occupational therapy services. Ask your doctor to recommend a therapist.



What you can do to stop DME fraud:

- Make sure your doctor has assessed your condition and orders the durable medical equipment (DME) or supplies.
- Never sign a blank form from your doctor or equipment supplier.
- Always read your Medicare summary notice (MSN) or explanation of benefits (EOB).
- Look for charges for items you do not need or did not receive.
- Refuse and report any equipment or supplies you are offered.

If you have questions about DME fraud, call VT-SMP at 802-229-4731.

Assistive technology can make aging in place safer

There are a variety of affordable tools for people who want to increase safety while aging in place.

Medical alert systems

These monitor at-risk people and alert preset contacts and emergency services if the user falls or pushes the alarm button. Medical alert systems are available as easy-to-use smartphone apps and as wearable devices, such as a necklace or bracelet.

Smart home devices

Voice-controlled home devices such as Amazon Echo and Google Home are for the casual user who wants assistance with automated lighting, reminders for medication and appointments, calling friends, and easy ordering of groceries.

Automatic smart lighting can prevent stumbling around in the dark. Easily mounted, inexpensive cordless wall lights will turn on when you walk by, and many systems can provide scheduled lighting.

Assistive seating

For help getting out of a comfortable chair, consider an electric or self-powered lifting seat, which slowly tilts you forward to help you into a standing position. These seats increase independence, prevent overworking sore muscles, and can lessen anxiety about getting hurt while trying to get up.

Adapted from Assisted Living Today: (assistedlivingtoday.com)



Everyone can play adaptive sports

Vermont Adaptive Ski and Sports helps people connect and use adaptive equipment so they can continue to enjoy winter and summer sports. The group provides access and instruction to sports and recreational activities with the belief that they provide a physical, mental, and social experience that promotes self-confidence and independence.

Opportunities exist in alpine skiing, snowboarding, and other winter sports; kayaking, canoeing, stand-up paddle boarding, sailing, cycling, hiking, rock climbing, tennis, horseback riding, wellness retreats, and more.

Vermont Adaptive Ski and Sports also offers programs designed for injured service members, veterans with disabilities, and their families. Programs and events are designed to include those with both physical and invisible disabilities such as post-traumatic stress disorder (PTSD) and brain injuries.

Adapted from Vermont Adaptive Ski and Sports (vermontadaptive.org)

Stay strong & active: exercise

Being physically active can help you stay strong and independent as you age. If you are overweight or obese, weight loss can improve your quality of life and reduce the risk of disease and disability.

- Adults at any age need at least 2½ hours (150 minutes) of moderate-intensity physical activity each week. You can break this into smaller segments—aim for at least 10 minutes at a time—and try to exercise at least 3 days a week.
- Find an activity that is appropriate for your fitness level. If you are not active, start by walking or riding a stationary bike.
- Being active will make it easier to enjoy other activities such as shopping, playing a sport, or gardening.
- If you are not sure about your level of fitness, check with your doctor before starting any exercise program or vigorous physical activity.
- Be sure to drink water when doing any activity that makes you sweat. If your doctor has told you to limit your fluids, check before increasing the amount of fluid you drink while exercising.

Adapted from the US Department of Agriculture (choosemyplate.gov/browse-by-audience/view-all-audiences/adults/older-adults)



Senior center exercise programs

Senior centers in Vermont offer a wide range of evidence based and promising exercise programs, including:

- Tai Chi for Fall Prevention
- Chair Yoga and other types of yoga
- Arthiritis Foundation Exercise Programs
- Bone Builders
- Pilates
- Zumba
- Qi Gong
- Walking groups and other outdoor activities, dance classes, and more

Most programs are free or low cost and can provide social engagement as well as opportunities to improve balance, strength, bone mass, and cardiovascular fitness.

Take care when shoveling!

Although it may not seem like a typical workout, shoveling snow can be strenuous. The cold weather combined with the physical exertion of shoveling can stress your heart and cause a heart attack. About 100 people die in the U.S. each year while shoveling snow. Older adults, individuals with pre-existing heart conditions, and people who are usually sedentary are all at higher risk for a heart attack while shoveling snow. For help clearing snow, ask a neighbor or contact Vermont 2-1-1 (vermont211.org) or your local Area Agency on Aging (vermont4a.org).

Range of exercise can improve health & physical ability

Research has shown that it's important for us to get different types of exercise: endurance, strength, balance, and flexibility. No matter your age, you can find activities that meet your fitness level and needs!

Endurance

Endurance, or aerobic, activities increase your breathing and heart rates, improving the health of your heart, lungs, and circulatory system. They can delay or prevent diseases such as diabetes, colon and breast cancers, and heart disease.

Endurance activities include brisk walking/jogging, yard work, dancing, swimming, biking and climbing stairs.

Safety tips:

- Do a little light activity, such as easy walking, to warm up and cool down.
- Endurance activities should not cause dizziness, chest pain or pressure, or a feeling like heartburn.
- Use safety equipment, such as a helmet when bicycling.

Strength

Strength exercises help you stay independent, make everyday activities easier, and help your balance – preventing falls and fall-related injuries. These exercises include lifting weights, even your own body weight, and using a resistance band. Add strength-building activity at least two days a week.

Safety tips:

- Don't hold your breath breathe regularly.
- Breathe out as you lift or push, and breathe in as you relax.

Balance

These exercises help prevent falls, a risk of aging that can have serious consequences. Balance exercises include Tai Chi, yoga/chair yoga, and weight shifting.

Safety tip:

Have a sturdy chair or a person nearby to hold on to if you feel unsteady.

Flexibility

Stretching can improve flexibility, making it easier to tie your shoes or look over your shoulder when you back out of the driveway.

Safety tips:

- Stretch when your muscles are warmed up.
- Stretch after endurance or strength exercises.
- Don't stretch so far that it hurts.
- Breathe normally while holding a stretch.

Talk with your doctor if you are unsure about doing a particular exercise.

Adapted from the National Institute on Aging (nia.nih. gov/health/four-types-exercise-can-improve-your-health-and-physical-ability)



Food access & nutrition

Vermont has many avenues to access healthy meals and food. In addition to grocery stores and local markets, older adults may be eligible for free or reduced-cost foods through the following:

Meals on Wheels (MOW)

AAA HelpLine (1-800-642-5119) or 2-1-1 for local MOW contact information Home-delivered nutritious meals for eligible Vermonters. Days, meal types, and times may vary.

Community Meals

1-800-642-5119

vermont4a.org

Many senior centers, community centers, and faith groups offer community meals. Inquire with local organizations or contact the AAA Helpline at the above numbers/website.

Food shelves and food pantries

1-800-585-226

vtfoodbank.org

These local organizations offer regular access to free groceries. Food items and frequency will vary by site.

Commodity Supplemental Food Program (CSFP)

1-800-214-4648

vtfoodbank.org/share-food/csfp

This U.S. Department of Agriculture program offers free monthly nutrition information and nutritious foods to income-eligible older adults through the Vermont Foodbank. Each eligible person receives their own food box at one designated site.

3SquaresVT

1-800-479-6151

dcf.vermont.gov/benefits/3SquaresVT/ or vtfoodbank.org/nurturepeople/3squaresvt

Vermont's Supplemental Nutrition
Assistance Program (SNAP), formerly
called food stamps, 3SquaresVT
provides extra money each month to
help people buy food at stores and
participating farmers' markets. Older
adults may be eligible for assistance
even if they don't meet the income
eligibility guidelines.

Farmers' markets

nofavt.org/programs/community-foodaccess

Each region of the state has many farmers' markets that offer produce and other edible goods available for purchase. Some accept SNAP/3SquaresVT.

VeggieVanGo

1-800-585-2265, nfo@vtfoodbank.org
This traveling truck provides thousands
of pounds of fresh food and produce to
families and individuals in need each
month.

AAA HelpLine

1-800-642-5119

vermont4a.org

The AAA HelpLine is an information and assistance resource for people 60 and older. Knowledgeable professionals at Vermont's Area Agencies on Aging's HelpLine can answer questions and help identify resources to assist people in aging successfully, including health insurance (SHIP) and Meals on Wheels (MOW).

3SquaresVT

3SquaresVT, called SNAP elsewhere, can help Vermonters 60 and older put healthy, nutritious food on the table every day.

Who is eligible?

- Anyone with a gross household income equal to or less than 185% of the federal poverty level, regardless of the resources owned.
- Households including someone age 60 or older may still qualify if income is over that limit, but owned resources are considered (for example, bank accounts), except for a home and certain retirement accounts.

The best way to determine eligibility is to apply.

How do I apply?

1. Fill out an application:

- a. Online at <u>dcf.vermont.gov/</u> <u>mybenefits</u>.
- b. By mail call 1–800–479–6151 or visit a district office to get a paper application.
- c. In person at the closest district office.
- 2. A phone or in-person interview is required. You'll be informed about the interview process after you apply.
- 3. After you apply, you may be asked to provide more documentation (such as driver's license, ID card, immigration documents, pay stubs, bills, forms, etc.) to verify certain information. Send copies of personal documents. Originals may not be returned.

Adapted from Department for Children and Families (dcf.vermont.gov/benefits/3squaresVT)

What if I have questions or need help applying?

- Call Vermont Economic Services Division at 1–800–479–6151.
- Call Vermont's Senior Helpline at 1–800–642–5119.
- Text VFBSNAP to 85511 to see if you may be eligible.
- Email <u>3SVT@vtfoodbank.org</u>, or call 802-477-4136 or 1-855-855-6181.

How much can I get?

The amount of support depends on household size, income, and expenses. You may get a higher monthly benefit if you also get fuel assistance or spend more than \$35 a month on medical costs not covered by insurance (for example, co-pays). The average monthly benefit for an older adult living alone is about \$163.

How do monthly payments work?

- If everyone in your 3SquaresVT household is 65 or older, your benefits will be deposited as cash directly into your bank account.
- If anyone in your household is under 65, your monthly benefit will be added to an EBT card called Vermont Express. It can be used to buy eligible food items at participating stores and farmers' markets, much like you'd use a bankcard or credit card.



Commodity Supplemental Food Program (CSFP)

This federal nutrition program provides a free monthly box of nutritious food (approximately \$50 value) to adults 60 and older who have lower incomes.

More than 600,000 people participate nationally. About 2,500 Vermonters participate, and many more are eligible. You can sign up for CSFP and other programs, such as 3SquaresVT, at the same time.

How does CSFP work?

- Fill out a brief two-page application to get certified for a year. After Year 1, fill out a short two-page recertification form.
- You can assign a friend or family member to pick up your box. Just drive up and someone will put the box into your car.

Who should I contact for more information? Contact the VT Foodbank at 1-800-214-4648 or email csfp@vtfoodbank.org.

How does CSFP help older Vermonters meet nutritional needs?

- The supplemental items in the box can help with meal planning.
- When possible, extra items such as fresh fruits and veggies are added.
- Food includes nonfat dry and fluid milk, juice, farina, oats, ready-to-eat cereal, rice, pasta, peanut butter, dry beans, canned meat, poultry or fish, and canned fruits and vegetables.

Information provided by Emily Cohen, Senior and Adult Programs Manager at the Vermont Foodbank

Who is eligible for CSFP?

- Must be over 60 years of age
- Must live in Vermont and meet income quidelines

CFSP can save you up to \$50 per month on groceries. For more information or to apply, call 1-800-214-4648 or visit wtfoodbank.org/share-food/csfp.

Meals on Wheels eligibility requirements

Applicants for Meals on Wheels must meet the following criteria:

- Be 60 or older and unable to leave the home without considerable difficulty and/or assistance
- AND experience a physical or mental condition making them unable to obtain food or prepare meals on a temporary or permanent basis
- The spouse of an eligible participant (regardless of age)
- People younger than 60 with a disability, if they reside with or are in the care of people receiving Meals on Wheels

Preference will be given to people who are low-income, minority, limited-English proficiency, and at risk for institutional placement.



Getting enough fluids

Your body needs plenty of fluids each day. Water helps you digest food, absorb nutrients, and get rid of unused waste. Drinking water lets you add fluids without adding calories.

As we age, it can become harder to drink enough water: you might lose some of your sense of thirst, and some medicines might require you to drink more fluids.

Try these tips:

- Don't wait until you feel thirsty to drink water or other fluids.
- Take sips of water, milk, or juice between bites during meals.
- Add liquids throughout the day.
- Drink a full glass of water when you take a pill.
- Have a glass of water before you exercise.

If you drink alcoholic beverages, do so sensibly and in moderation: up to one drink per day for women and up to two drinks for men.

Don't stop drinking liquids if you have a urinary control problem. Talk with your doctor about treatment.

Your plan for healthy eating

Choosing healthy foods may lower your chance of having a heart attack or stroke.

- Eat at least 5 servings of vegetables and fruit every day.
- Eat 3 servings of fiber-rich whole grains a day. Choose whole wheat bread, brown rice, and oatmeal.
- Eat fish at least twice a week such as salmon, sardines, and trout.
- Eat healthy fats, found in foods such as fatty fish, vegetable oils, avocados, and nuts.
- Limit bad saturated fats, found in foods like fatty meats, whole milk, butter, ice cream, and cheese.
- Don't eat trans fats, found in foods like packaged baked goods, snack foods, and fast foods.
- Eat legumes such as beans or lentils, or eat a small handful of nuts.
- Use a notebook or an online tool or app to track what you eat.
- Cut calories, portion sizes, and salt. This is more important if you are overweight or have high blood pressure or high blood sugar.

For more information about hearthealthy eating plans, visit www.nhlbi.nih.gov/files/docs/public/heart/new_dash.gotf

Special nutrition concerns for older adults

Our daily eating habits change as our bodies get older.

- Add flavor to foods with spices and herbs instead of salt, and look for low-sodium packaged foods.
- Add sliced fruits and vegetables to your meals and snacks. Look for presliced

fruits and vegetables on sale if slicing and chopping is a challenge.

- Ask your doctor to suggest other options if the medications you take affect your appetite or change your desire to eat.
- Drink water or milk instead of sugary drinks.
- Consume foods fortified with vitamin B12 such as fortified cereals.

End-of-life planning

Advance Directives: Stating your care preferences

If a patient is unable to speak for themselves, an Advance Directive communicates how medical care choices should be made and who should make them. The Advance Directive requires that you select a health care agent; this should be someone who understands your wishes and who can be a strong advocate.

Create and register an Advance Directive

- 1. The Vermont Ethics Network
 (vtethicsnetwork.org, 802-8282909) offers information and the
 necessary forms (vtethicsnetwork.
 org/forms) to complete an Advance
 Directive for Health Care. Your doctor
 may also have forms available. This
 document allows an individual to
 provide instructions regarding:
 - Appointment of a health care agent (known in other states as Power of Attorney for Health Care or health care proxy)
 - Health care goals and spiritual wishes
 - Preferences for end-of-life treatment
 - Organ/tissue donation and burial/ disposition of remains
 - Signature and witnessing
- 2. Register your advance directive with the Vermont Department of Health's Advance Care Directives Directory. Optional but recommended, registering allows for immediate access by any medical provider.

- At this time, COLST (Clinician Orders for Life Sustaining Treatment) and DNR (Do Not Resuscitate) orders are not authorized to be submitted to the registry.
- 3. Communicate your health care decisions and end-of-life guidance to your family and primary care physician. Talk with them about your preferences regarding:
 - End-of-life treatment wishes, which may include comfort care orders, ventilation, nutrition/hydration-tube feeding, dialysis
 - Do Not Resuscitate orders
 - Hospice care

Find tools to help guide these discussions on starttheconversationvt.org

Review your Advance Directive every year or so – your wishes may change as you age, or your agent may no longer be available.

IMPORTANT: In Vermont, Advance Directives have taken the place of Living Wills and other similar tools. If you are moving from another place, be sure your current documents are legal and registered in Vermont.

DNR/COLST:

A Do Not Resuscitate (DNR) order stipulates that a patient does not want to be resuscitated in a health emergency. A Clinician Orders for Life-Sustaining Treatment (COLST) form directs treatment of the patient, including limitations on medical interventions. A COLST can include a DNR order. Both directives are completed and signed by your clinician based on your medical condition, your values, and your wishes.

Making medical decisions

When you make medical decisions for someone else, you act as a surrogate, used here as a general term.

There are three kinds of medical decision-makers:

- An Advance Directive authorizes a health care agent to make health care decisions for someone if they can't make decisions for themselves.
- Courts can appoint a guardian to make health care decisions for someone else. A guardian answers directly to the appointing court.
- Family members, close friends, or people with a close relationship can be asked to serve as a surrogate without legal appointment.

The authority of each role is slightly different, but all share the same responsibilities and challenges.

Being a surrogate allows you to act in the patient's place to:

- Get necessary medical information
- Talk with and ask questions of the medical team about treatment options
- Ask for consultations and second opinions
- Consent to or refuse medical tests or treatments
- Decide whether to transfer care to another doctor or health care facility
- Get the medical team to communicate with the patient if they can understand the information

A surrogate should first learn what would matter most to the person if they were seriously ill. Having these conversations before a crisis arises is key.

Adapted from the Vermont EthicsNetwork (vtethicsnetwork.org)

Palliative & hospice care

Palliative care is a holistic approach designed for patients with serious or chronic illness, and their families, to optimize quality of life and alleviate pain. Although it is frequently employed as part of hospice care – near the end of life – it is not solely end-of-life care.

Hospice care promotes dignity and quality of life during the last months of life. This specially coordinated, comprehensive program provides quality medical care and support to children and adults with terminal illness, allowing them to enjoy their last months surrounded by the people they love.

The hospice team, which includes nurses, social workers, licensed nursing assistants, trained volunteers, chaplains, support staff, a bereavement coordinator, and a medical director, delivers the hospice care. Team members work to manage symptoms, with a special focus on pain control.

Hospice encourages individuals to keep as much control as possible over their circumstances, care decisions, and environment, while also supporting the family. Care is tailored to the needs of each patient and family.

Hospice care is available in private homes, nursing homes, assisted living facilities, hospitals, or at Vermont Respite House (a dedicated residence for hospice patients).

Speak with your doctor about hospice as part of your care plan. You can include your wishes for hospice care in your Advance Directive.

Alzheimer's disease & related dementias

The increasing rates of Alzheimer's disease and related dementias – both in Vermont and across the U.S. – is notable. Dementia is not a disease, but a general term for loss of memory and other mental abilities caused by physical changes in the brain. Symptoms differ from person to person, but may eventually become severe enough to interfere with daily life.

Early symptoms can be nonspecific and are easy to confuse with the general forgetfulness that many experience. While there is currently no cure for Alzheimer's, treatment of symptoms is available and more effective if started early. So it's important to know what symptoms to look for (see next page).

Dementia care

Dementia can be diagnosed and managed with the primary care provider or a specialist. All three academic medical centers in our region offer comprehensive specialty care for Alzheimer's and related dementias, using a multidisciplinary team approach. The multidisciplinary team evaluates, diagnoses, and treats memory disorders and manages the conditions that can produce them.

UVM Medical Center Memory

Program 802-847-1111, <u>uvmhealth.org/</u> medcenter/Pages/Departments-and-<u>Programs/Memory-Program.aspx</u>

Albany Medical Center – The Alzheimer's Center 518-262-0800 or 518-262-5226,

amc.edu/patient/services/ neurosciences/alzheimers_disease/ index.cfm

Dartmouth-Hitchcock Medical Center Neurology Memory Clinic

1-603-650-5104, dartmouth-hitchcock.org/neurologymemory-clinic.html

Alzheimer's/dementia-specific resources

Alzheimer's Association HelpLine 1-800-272-3900, alz.org

Alzheimer's Association Vermont Chapter 802-316-3839, alz.org/vermont

The Alzheimer's Association has extensive resources online and via phone:

- 24/7 HelpLine
- Links to online education programs
- Local support-group search
- National phone support groups dealing with bereavement, caregivers with a loved one in a facility, and younger-onset dementias
- Local resource search
- A virtual library of resources, books, and articles
- Registration for virtual online programs across New England
- COVID-specific resources

Adult day centers provide respite and daytime care for people suffering from cognitive decline such as Alzheimer's, stroke, or dementia. All adult day centers in Vermont are medical and can offer nursing care, bathing, nutritious meals, social activites, and much more. For a full listing of licensed providers, visit: asd.vermont.gov/services/adult-day-services.

10 early signs of Alzheimer's or other dementias

Having one or more of the signs below is a significant health concern that should be evaluated by a doctor. Get checked – early detection matters.

Memory loss that disrupts daily life

Forgetting recently learned information, important dates or events; asking the same questions repeatedly; increasingly relying on reminder notes, electronic devices, or family members for things they previously handled

Challenges in planning or solving problems

Difficulty following a familiar recipe, keeping track of monthly bills, concentrating; taking much longer to do things than before

Difficulty completing familiar tasks

Having trouble driving to a familiar location, organizing a grocery list, or remembering the rules of a favorite game

Confusion with time or place

Losing track of dates, seasons, and the passage of time; having trouble understanding something if it is not happening immediately; forgetting where they are or how they got there

Decreased or poor judgment

Changes in judgment or decisionmaking

Trouble understanding visual images and spatial relationships

Having problems with vision, balance, reading, judging distance, determining color or contrast; often most noticeable when assessing driving

New problems with words in speaking or writing

Having trouble following or joining a conversation; stopping in the middle of a conversation with no idea how to continue; repeating things; struggling with vocabulary; having trouble naming a familiar object, using the wrong name for something (e.g., calling a "watch" a "hand-clock")

Misplacing things and losing the ability to retrace steps

Putting things in unusual places, losing things and being unable to go back over their steps to find them again; accusing others of stealing

Withdrawal from work or social activities

Changes in the ability to hold or follow a conversation, leading to withdrawal from hobbies, social activities, or other engagements; having trouble keeping up with a favorite team or activity

Changes in mood and personality

Mood and personality changes; becoming confused, suspicious, depressed, fearful, or anxious; being easily upset at home, with friends, or out of their comfort zone

Adapted from alz.org



While Alzheimer's is the most prevalent dementia, others – including Creutzfeldt-Jakob disease (CJD), Lewy Body dementia, frontotemporal dementias (FTD), and dementia associated with Parkinson's disease – are just as devastating, if not more so. Learn more about different dementias and their symptoms at alz.org/alzheimers-dementia/what-is-dementia/types-of-dementia.



DISCOVER REAL POSSIBILITIES IN VERMONT

AARP is in Vermont creating real, meaningful change. We're proud to help all our communities become the best they can be. Like providing family caregivers with tips to take care of loved ones, helping to make our communities more livable and hosting fun, informative events all across the state.

AARP is here to help you take on today-and everyday with *Real Possibilities*.

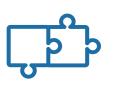
Get to know us at **aarp.org/vt**.







As you grow older, you can stay active and productive or fill your days with leisure and relaxation. Many choose to find a balance between these as they approach their later years. Staying connected and engaged is important. These resources can help.



social connection & engagement

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Technology

Connecting through technology can take you beyond your everyday environment and out into the world. Be aware of the benefits and risks to being out there in the technosphere. Assistive technology is available that allows people with different challenges access to the benefits of technology and the internet.

Internet Essentials through Comcast

1-855-846-8376 or

internetessentials.com

You may qualify for affordable internet service and an affordable laptop or desktop computer if:

- You live in an area with Comcast internet service AND
- Someone in your household is eligible for at least one of the following public programs: 3SquaresVT (SNAP), Fuel Assistance (LIHEAP), Head Start, Medicaid, National School Lunch Program, Federal Public Housing Assistance (FPHA), Reach Up (TANF), Supplemental Security Income (SSI), Tribal Assistance, VA Pension, or Women, Infants and Children (WIC).

Lifeline

1-800-234-9473 or

LifelineSupport.org

Lifeline is a federal program that lowers the monthly cost of phone and internet. Eligible customers will get up to \$9.25 toward their bill. Participating Vermont companies discount phone service only.

Many Vermont telecommunications companies offer discounted landline phone services to older adults and people with disabilites. Check with your provider to see if you qualify.

Work

Senior Community Service Employment Program

If you're 55 or older with a low income, local organizations are ready to help you refresh your job skills and reenter the workforce.

Associates for Training & Development

(A4TD) provides training and employment services to mature workers. Reach them at 1–800–439–3307 or email them at info@a4td.org. vermontassociates.org.

A4TD host training sites are expected to provide the participant with meaningful job skills training. They also encourage and help participants in their job search efforts. In exchange, they receive the benefits of having a talented and mature individual as part of their team. Note: Host sites that can commit to hiring a participant upon successful completion of their training receive priority.

Trainees are placed in a part-time community service training assignment. They can serve their communities – at libraries, hospitals, senior centers, and other local organizations – while expanding skills and earning an income.

The Senior Community Service Employment Program (SCSEP), a program of A4TD, enrolls eligible job seekers 55 and older into part-time training positions and assigns them to public agencies or 501(c)(3) nonprofit organizations in the local community.

SCSEP offers a "stepping stone" back into the workforce; all assignments are temporary. SCSEP participants undergo an assessment, testing, and additional skills training while enrolled in the program. Computer skills, occupational skills training, and industry-recognized credential acquisition are common among participants. They train in a variety of areas; the most common include: retail sales, health care, customer service, general office, and food preparation.

Information provided by Associates for Training and Development <u>a4dt.org</u>

Volunteering

After leaving a career many retirees take up volunteering to make a difference in the lives of others. Volunteer opportunities for older adults are plentiful, but finding the right role for you is not always straightforward. Volunteering helps the organization you're serving, but also provides several benefits to the volunteer, including keeping physically and mentally active, reducing social isolation, and creating a stronger sense of community.

Consider these tips:

- Identify why you want to volunteer and what you want to get out of it.
- Focus on your passions and talents.
- Start local.
- Use a volunteer agency.
- Understand the volunteer process and requirements.
- Don't overcommit.
- Bring a friend or spouse.
- Don't be afraid to say no.

Adapted from US News & World Report (<u>money.usnews.com/money/retirement/baby-boomers/articles/9-tips-for-volunteering-in-retirement</u>)

There are many ways to volunteer. Try connecting with local nonprofits to see what their needs are. Become a volunteer driver, foster animals at home, or help at a senior center. Call 2–1–1 to connect with other opportunities for volunteering in Vermont.

Vermont Memory Cafes

Memory Cafes are a welcoming place for individuals with any form of dementia or brain disorders. They can be helpful for people with all forms of mild cognitive impairment. Individual Memory Cafes focus on different aspects, for a unique experience. Some are activities based; others focus on education or the connections of demographic-appropriate music and dancing or crafts and painting. Some simply guide the participants in exercises that foster reminiscing.

Memory Cafes in Vermont:

Barre

Vermont History Center, 60 Washington Street Check current dates and times with Barb Asen, 802–476–2681 or basen@cvcoa.org

Bennington

Brookedale: Filmore Pond, 300 Village Ln. Check current days and times with Aaron Brush, 802–772–7835 or abrush@svcoa.net

Burlington

Queen City Memory Cafe
Thayer House Garden Commons Room,
1197 North Avenue.
Check current dates and times with
Janet Nunziata, 802–656–4220 or
at QueenCityMemoryCafe.com

Rutland

The Maples Senior Living, 3 General Wing Rd. For current dates and times, contact Aaron Brush, 802–772–7835 or abrush@svcoa.net

Social connection

Your local library is a valuable resource

Today's library is far more than a place to borrow books. Vermont's libraries offer a wide range of programming and services that help people explore, discover, and connect with a vast world of library programs, activities, public library services, and information. Libraries promote civil discourse and information about today's pressing topics.

Your local librarian can help you by:

- Teaching you how to navigate in today's increasingly technological world
- Helping you find and search for information
- Connecting you to virtual book lending through Listen Up Vermont, a free service that allows you to download audio or e-books
- Linking you to a broad range of free online educational resources
- Providing you with activities and often the tools you need, from snowshoes to museum passes – that interest you
- Bringing you informative programming, both in person and through online meetings and discussions
- Giving you a place to connect with your neighbors or new people



Vet to Vet Vermont Visitor Program

This free volunteer-based home visiting program conducted by veterans provides companionship and support to fellow veterans. "For veterans, by veterans" is the basis of the Vet to Vet VT program. It's the same buddy system learned in basic training, and it's just as important now as it was then.

Request a visitor

For yourself or someone you care about

- Visitation and friendship
- Telephone reassurance
- Help with forms and correspondence
- A friendly chat over a meal
- Sharing projects and hobbies
- Exercise and activities
- Trips for shopping, errands, or appointments

Become a volunteer visitor

Contribute time and support to a veteran in need – make a difference in their life and yours. Call the AAA HelpLine at 1–800–642–5119 for information.

Adapted from Senior Solutions website (seniorsolutionsvt.org/home-visitors-helpers/vet-to-vet-vermont-visitor-program/)

Green Mountain Passport Program

802-241-2401

DAIL.Vermont.Gov

The Green Mountain Passport Program offers free day-use passes to Vermont State Parks and historic sites.

Who is eligible?

Vermont residents at least 62 years of age and Vermont veterans of the uniformed services.

How do you get a passport card?

- Complete an application at your town office
- Submit a one-time \$2 fee
- Receive a Green Mountain Passport card – good for life! (non-transferrable)

Adapted from Department of Disabilities, Aging and Independent Living (dail.vermont.gov)

Senior activity centers

Vermont's senior centers are a vital part of the Aging Services Network cited in the State's Plan on Aging, and they offer a wide variety of opportunities for socialization, engagement, lifelong learning, and healthy aging. Senior centers also serve as crucial gateways to a myriad of other important resources and aging services, such as: helping to prevent social isolation and falls; providing opportunities for connection; and helping people contribute to their community. Senior centers vary in their offerings, size, and organizational structure.

Some of the services, programs, and activities you may find at your local senior center are:

- Wellness activities (exercise classes, balance screenings, foot clinics, and health-related talks, all specifically intended for adults age 50+)
- Home-delivered Meals on Wheels with wellness checks
- Lifelong learning opportunities (book discussions, language classes, art classes, technology guidance, etc.)

- Social and holiday events, special meals, and entertainment
- Volunteer opportunities for people of all ages
- Transportation coordination to/from the center as well as within the community
- Medical equipment lending or exchange
- Group travel trips
- Drop-in activities incluing games, support groups, and outings
- Intergenerational programs with youth and younger adults
- Community partnerships with local schools, nonprofits, and businesses

Live well at every age with Vermont's senior centers. To find a senior center near you, call the AAA Helpline at 1–800–642–5119 or check out the Vermont senior center map at asd.vermont.gov/services/vermont-senior-centers.

Information provided by Deanna Jones of the Thompson Senior Center and Janna Clar of the Montpelier Senior Activity Center



Vermont Senior Medicare Patrol (SMP) is looking for qualified volunteers to join forces with other trained retired seniors to help Medicare beneficiaries understand their healthcare rights, to identify billing errors and to combat Medicare fraud and abuse.

A sampling of roles & ways you can help:

- Be a presenter: theatrical educators & game hosts wanted!
- Provide data entry & office assistance
- Act as a community liaison
- Conduct research & writing for program publications
- And much more!

SMP Volunteers are awarded certification after completion of the SMP Foundations and Job-Specific training programs. Work alone or within a team. You can even create a role that better utilizes your skills to further develop the Vermont SMP program mission! SMP provides mileage and some expense reimbursement.



To become a vital part of our project, contact Anita at 802-229-4731 or by email: anita@vermontelders.org

PROJECT IS SPONSORED BY COVE





Keeping yourself or a loved one safe is a priority. Physical, emotional, and financial threats lurk in the home, online, on the phone, and in the community. Education is an important first step toward protecting you and your family. Know where to turn if you or your loved one is a victim of abuse or fraud.

safety & protection

VERMONT OF TEXT IF YOU CAN'T

Do you have an emergency?

Are you hurt or fearing for the safety of yourself or someone else? Do not delay in contacting emergency services (9–1–1) if you have a health or safety emergency.

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Do you want to report concerns of elder abuse, neglect, or exploitation or deceptive business tactics or scams?

What do you want to do?	Who should you call?
Report elder abuse, neglect, or exploitation (physical or financial)	Do BOTH of these, in this order: 1. Call your local or state police, so that they can begin investigating and responding to the potential crime. 2. Call Adult Protective Services at 1–800–564–1612. APS has different powers and responsibilities than the police and can only take action if the victim legally qualifies as a "vulnerable adult."
Report Medicaid fraud	Call 802-828-5511 (Attorney General Office's Medicaid Fraud and Residential Abuse Unit).
Complain about a business or scam	Call 1-800-649-2424 (Attorney General Office Consumer Assistance Program).
Report Medicare fraud	Call 877-808-2468 (VT Senior Medicare Patrol) or go to smpresource.org.

Identity theft & protection

Older adults are particularly vulnerable to financial scams and identity theft. Know the signs of fraud and scams and protect your bank account and good name

Tips to protect yourself and your health care benefits

Protect your identity

- Protect your Medicare and prescription drug plan numbers. Don't give out personal information, such as Social Security number, bank account numbers, or credit card numbers to plan marketing representatives. If someone offers to buy your Medicare or Social Security number, don't do it!
- Don't keep mail in your mailbox for more than one day. Rip up or shred all health care paperwork before throwing it away.

Medicare fraud, abuse, and errors

- Always read your Medicare Summary Notice, Explanation of Benefits, prescription drug benefit statements, and other health care billing statements. Your Medicare Summary Notice is stamped "This Is Not A Bill" and comes in the mail every quarter in which you receive medical care. Compare it with your provider billing notices. Look for the following on your billing statement:
 - Charges for an item or service you didn't receive
 - Billing for the same thing twice
 - Services or prescriptions that were not ordered by your doctor

 Before buying equipment, health care services, or "miracle" products through the internet or commercials, talk to your health care provider and research a product and the company selling it.

Enrollment and marketing fraud

- Be cautious when talking to people you don't know about picking a drug plan. Only talk with people you know and trust.
- Medicare prescription drug plans will have the "Medicare-approved" seal on their materials. Watch out for lookalike envelopes or materials made to look like they are from Social Security, Medicare, or approved Medicare and prescription drug card plans.
- Door-to-door marketing is prohibited.
 Prescription drug plan representatives may come to your home if you make an appointment over the phone or send in a postcard requesting additional information.
- Telemarketing of Medicare prescription drug plans is allowed with limitations. Plan representatives can only call between the hours of 8 a.m. and 9 p.m. You cannot be enrolled in a plan or be asked to pay for a drug plan over the phone.
- Plans can request that you call them back to enroll, offer to send information, or arrange an appointment for a representative to visit your home. Any telemarketing of Medicare prescription drug plans must comply with the National Do-Not-Call Registry. To avoid all telemarketing calls, register with the federal "do not call" list at 1-888-382-1222 or go to donotcall.gov.



Vermont Senior Medicare Patrol (VT SMP)

VT SMP is part of a national program funded by the Administration for Community Living (ACL) to reduce, detect, and report Medicare error, fraud, and abuse. Medicare fraud costs \$90 billion annually in the form of higher taxes, premiums and co-pays, and reduced services.

Community of Vermont Elders (COVE) has hosted VT SMP since 2002, and since 2003 has reached an average of 5,000 older Vermonters annually. It focuses on educating and empowering Medicare beneficiaries to be active partners in their health care decisions. Vermont SMP staff, partners, and trained volunteers increase awareness of these problems, including how they occur and what to do if a problem is identified. Live education includes training lectures, games, theatrical performances, and podcasts. The project offers monthly and quarterly updates upon request.

VT SMP staff and volunteers often bring programs to communities but can also reach Vermonters in their homes via conferencing platforms. Technology allows programs to reach most Vermonters.

VT SMP staff can:

 Assist with or refer for investigation complaints of error, fraud, and abuse. Often resolve issues directly through contact with Medicare, Vermont state agencies, or ACL, though some issues require involvement of a higher level of authority. Using either pathway is easier than navigating the Medicare system independently.

Medicaid fraud

Medicaid fraud affects everyone.
Although most providers are honest and dedicated to providing quality care to their patients, dishonest medical providers steal millions of dollars each year through fraudulent or abusive practices. Reporting fraud helps the Vermont Medicaid Fraud and Residential Abuse Unit return this money to the system so it can provide a health care safety net to those most in need. The mere suspicion of fraud is enough to make a report.

Examples of fraud in health care:

- Billing for services not rendered or for more services than were delivered
- Providing and billing for unnecessary services
- Billing for a higher level of services than were delivered
- Charging higher rates for services to Medicaid than other providers
- Coding billing records to get higher reimbursement
- Misrepresenting an unallowable service on a bill as another allowable service
- Falsely diagnosing so Medicaid will pay more for services

Call 802-828-5511 or email <u>ago.</u>
<u>mfraureport@vermont.gov</u> to report
Medicaid provider fraud.

Important contacts

If you have questions or concerns about your health care billing and suspect errors or abuse, contact Vermont Senior Medicare Patrol (SMP): 802-229-4731 or toll-free at 1-888-865-2683 or visit vermontelders.org.

If you have questions about your Medicare plan, contact your regional State Health Insurance Assistance Program (SHIP) coordinator by calling the Senior HelpLine at 1-800-642-5119.

Vermont Attorney General's Office

Vermont Consumer Protection Unit

Vermont's Consumer Protection Unit (CPU), part of the Attorney General's Office, investigates and prosecutes violations of Vermont's consumer laws, which prohibit businesses from engaging in unfair or deceptive acts or practices. It represents the State of Vermont, and thus the public, in these ways:

- The Consumer Assistance Program (CAP) uses a "letter-mediation" process to resolve individual consumer complaints.
- It investigates serious or widespread allegations of consumer fraud.
- It files suit, where appropriate, against those who have violated the Vermont Consumer Protection Act or related laws or regulations.
- It resolves serious or widespread consumer fraud abuses in a way that restores consumer losses and deters future violations of law.
- It issues consumer fraud regulations to define in detail what conduct is unfair or deceptive.

- CPU staff appear before the Vermont Legislature to discuss consumer protection issues.
- It comments on federal laws and regulations of interest to Vermont consumers.
- It enforces Vermont's charities laws and oversees paid fundraiser registrations.
- It conducts consumer education and works to encourage fair business practices.

Consumer Assistance: 1-800-649-2424

File a complaint online:

<u>agocapcomplaint.atg.state.vt.us/</u> <u>forms/consumer-assistance-program-</u> complaint-form

Elder Protection Initiative

The Elder Protection Initiative (EPI) promotes the safety and security of older Vermonters through enforcement actions, legislative advocacy, public education, and collaboration with stakeholder agencies and organizations. The EPI staff comes from the Attorney General Office's Criminal, Public Protection, and Human Services divisions. For more information go to: ago.vermont.gov/epi

Scams

In 2019, Vermonters filed 5,447 scam reports with the Attorney General's Consumer Assistance Program (CAP). As old scams persisted, new scams emerged. Scam reports total more than 40 percent of all contacts CAP had with consumers in 2019, making scams one of the most common consumer issues affecting Vermonters. Vermonters can report a scam or sign up for the Scam Alert system by going to ago.vermont.gov/cap or by calling the Consumer Assistance Program at 1-800-649-2424.

2019 top 10 scams in Vermont:

- Social Security number phishing: An attempt to obtain your Social Security number by telling you it has been compromised, stolen, or expired. Official agencies would never call to ask for your personal information or threaten you.
- 2. Computer tech support: A phone call or pop-up message on your computer asking to access your computer remotely to remove a virus or fix a "problem." Customer service does not use pop-ups, and major companies don't call to tell you about malware on your computer.
- 3. Fake sweepstakes: A caller or mailing claims you have won money but have to pay to get it. Legitimate sweepstakes will contact you in person or use overnight delivery services. A mailed, unsolicited check is usually a scam.
- Phony relationships (not grandchild): Someone contacts you by phone or email, pretending to be a relative or a friend of a relative claiming to need money and asking you to send it immediately.
- 5. Spoofing/reflector calls: These use a number that appears to be from Vermont asking for money or telling you that your data has been breached. Ignore the call or hang up if it starts with a long pause. Don't call back.
- Debt collection threats: A caller says you will be arrested or sued if you don't repay a debt. Actual debt collectors are not allowed to threaten you with arrest. Hang up.

- 7. Grandchild imposter: Callers claim to be a grandchild (or friend of the grandchild) in prison or the hospital and request that you wire money or send gift cards immediately. Call the grandchild or family members at a known number to ensure the grandchild is safe.
- 8. IRS imposter: A phone call claims you owe back taxes or payments from the IRS or "US Treasury and Legal Affairs." They may threaten you with arrest or investigation. The IRS will never call you at home to threaten legal action.
- 9. Amazon credit card phishing: An automated call claims your credit card has been charged by Amazon or you have an outstanding balance. You are asked to call back to get a refund or resolve the charge. If you do, they request your card number and try to access your computer. Amazon will not call you unless you ask them to. Hang up and do not call back.
- 10. Online classified listings: A scammer may respond to a seller post, overpay with a check, and ask for the remainder to be wired back. Posts may be for fictitious rental property asking for a deposit and first month's rent. If you are suspicious, stop the purchase.

Rising scam: "Sextortion": You receive an email threatening to send sexually explicit photos or videos of you, or of you watching online pornography, to your contacts unless you pay a large sum of money, often in a digital currency. They may have one of your user names or passwords. Ignore the call and change the password on every account for which you use it.

Adapted from Vermont Attorney General's website and AARP.org



General guidelines

- Be wary of responding to unsolicited contacts and never provide personal information to unknown contractors or individuals, especially over the phone.
- Never provide remote access to your computer or accounts. Use reputable tech support companies.
- Never pay up front to receive winnings.
- Never wire or otherwise send funds unless you can verify the emergency and the caller's identity.
- If you are concerned about charges to your card, call your credit card company directly.

Make a report with Adult Protective Services

Adult Protective Services (APS) investigates allegations of the abuse, neglect, and exploitation of vulnerable adults and implements protective services, as necessary, to limit future maltreatment. You should make a report if you feel that a vulnerable adult has been harmed because of actions (or inaction) taken by a specific person or persons other than themselves. APS does not provide emergency services. If a vulnerable adult is in a life-threatening situation or needs immediate intervention to protect someone from harm, call 911. A report to APS can be made after emergency services have been provided.

Vulnerable adult:

Regardless of residence or whether any type of service is received, a vulnerable adult is anyone 18 or older who:

- Is a resident of a facility required to be licensed under chapter 71 of Vermont Title 33: Human Services, Chapter 069
- Is a resident of a psychiatric hospital or a psychiatric unit of a hospital
- Has been receiving personal care services for more than one month from a home health agency certified by the Vermont Department of Health or from a person or organization that offers, provides, or arranges for personal care; OR
- Regardless of residence or whether any type of service is received, is impaired due to brain damage, infirmities of aging, mental condition, or physical, psychiatric, or developmental disability:
 - That results in some impairment of the individual's ability to provide for his or her own care without assistance, including the provision of food, shelter, clothing, health care, supervision, or management of finances; OR
 - Because of the disability or infirmity, the individual has an impaired ability to protect himself or herself from abuse, neglect, or exploitation

More information: <u>legislature.vermont.</u> <u>gov/statutes/section/33/069/06902</u>

General guidelines for making a report

Please provide as much information as you can. If you don't have exact information, please provide what you believe is helpful or relevant. The less information you provide, the harder it will be for APS to make an accurate decision on whether to investigate, which could delay assistance to the vulnerable adult. Here is the information that APS needs to best help a vulnerable adult:

- Describe why you suspect a vulnerable adult has been abused, neglected, or exploited. If possible, include a description of any incidents, including locations and dates and how you became aware of this issue.
- Tell us if this abuse, neglect, or exploitation is ongoing or poses additional risk at the current time.
- Tell us who you are, how you know the vulnerable adult, how to contact you, and how you know about this situation.
- Tell us who the alleged victim is, how to contact them, and how it is they are vulnerable. Let us know if reaching out to them could put them in danger.

- Tell us who the alleged perpetrator is, how they are related to the alleged victim, and how to contact them.
- Tell us if there are any risks to our investigator, such as potentially violent investigation participants or aggressive dogs at an investigation participant's home.

Adapted from Adult Protective Services (<u>dlp.vermont.gov/aps</u>)



Reporting options

You can make a report to APS in the following ways:

Online: fw1.harmonyis.net/VTDAILLiveIntake/

If your browser has a popup blocker, turn it off before attempting to file an online report. This is the preferred method to make a report.

Email: APS@vermont.gov | Telephone Toll Free: 1-800-564-1612

Mail: Adult Protective Services Intake, HC 2 South, 280 State Drive, Waterbury, VT 05671-2020



Vermont is committed to providing a broad array of services that allow older adults to age in the setting they choose. Choosing a long-term residential setting that fits your lifestyle and budget can feel impossible. Whether you opt for in-home care, a small group setting, or a larger residential facility, numerous supports exist to help older Vermonters where ever they live.



housing & transportation

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Housing

Housing options for older Vermonters

Note: At the time of publication, Vermont's Department of Aging and Independent Living was reviewing and updating licensure requirements for long-term residential care facilities.

Independent living

There are numerous options for independent senior living communities, apartment buildings that cater to Vermonters older than 55. Vouchers specifically designated for older adults can cover the cost of rent for low-income Vermonters older than 60. Learn more about vouchers through the Vermont State Housing Authority (vsha. org).

Homesharing

HomeShare Vermont arranges livein "matches" between Vermonters
who have a living space to share
and others who need a place to live.
Some arrangements include personal
or housekeeping support in lieu of a
portion of rent. HomeShare Vermont
(homesharevermont.org) operates
in Addison, Chittenden, Grand Isle,
Lamoille, Washington, and Orange
counties. HomeShare Vermont
also helps seniors and people with
disabilities find paid caregivers to help
them remain in their homes.

Residential care homes and assisted living residences

Vermont offers two licensed residential care home options: Level III Residential Care and Level II Assisted Living Residences. These homes provide help with personal care, nursing overview, and 24-hour oversight. Approved

homes may accept Medicaid through the Choices for Care program and/or private pay for services.

Residential care homes provide care to people unable to live wholly independently but not in need of the level of care and services provided in a nursing home.

Home directory: dlp/files/documents/Residential-Care-Home-Directory-Alpha_0.pdf

Regulations: dail.vermont.gov/sites/dail/files//documents/Res_Care_Hom_Licensing_Regulations_2000.pdf

Assisted living residences combine housing, health care, and services to support resident independence and aging in place. Someone in an assisted living residence who develops a need for a higher level of equipment, treatment, or care – or a terminal illness – may be able to remain in the residence by applying for a waiver.

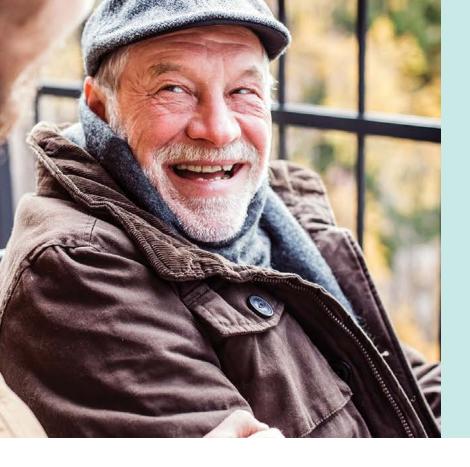
Facility directory: dlp.vermont.gov/sites/dlp.vermont

Regulations: dail.vermont.gov/sites/dail/files//documents/Assisted_living_regs_final_2003.pdf

Citations of Assisted Living and Residential Care

Seven Days newspaper has an online database of citations and complaints about Vermont residential care homes and assisted living residences reported between 2014 and 2019: eldercare. sevendaysvt.com

The results of many inspections are also posted on the Division of Licensing and Protection website: dlp.vermont.gov/survey-cert/survey-statements



Cold? Here's help

Living in a cold home can increase the risk for heart and respiratory diseases, make arthritis worse, and increase stress and depression.

Older adults and babies tend to suffer most in a cold home. If you need assistance with your fuel costs (dcf.vermont.gov/benefits/fuel-assistance), weatherization services for your home (dcf.vermont.gov/benefits/weatherization), or help finding housing this winter (dcf.vermont.gov/benefits/housing), please contact Vermont 2-1-1 (vermont211.org/).

Memory care

In Vermont, memory care units are licensed and regulated as high–level assisted living facilities; some are separate units in assisted living facilities. These units care for mostly older residents who are disabled or have dementia, and those whose underlying medical issues make self–care impossible. They offer nursing care between assisted living and nursing homes levels, and more hours of personal care. Most offer a tiered–level care structure, with prices that increase with the tier.

Adult Family Care home

Adult Family Care (AFC) homes, for individuals in Vermont's Choices for Care Medicaid program, (vtlawhelp. org/vermont-choices-care-cfc) offer 24-hour, home-based, shared living. Authorized agencies contract with private, unlicensed family homes that serve one to two people unrelated to the family home provider, who receives a stipend to cover services to residents.

Nursing facilities

Level I Vermont Licensed Nursing Facilities (commonly known as nursing homes) follow all federal and state regulations for providing care. Most accept Medicare and Medicaid coverage for services, in addition to private pay. Nursing facilities provide a high level of care, with 24-hour nursing services, and include room and board. The State enforces Vermont and federal statutes and regulations for Vermont Skilled Nursing Facilities (SNFs).

Facility directory: dlp.vermont.gov/sites/dlp/files/documents/Nursing-Home-Directory_1.pdf

Regulations: dail.vermont.gov/sites/dail/files//documents/Nursing_Home_Regulations_2018.pdf

The Vermont State Housing Authority (vsha.org) provides information on accessible and affordable housing options.

SASH® (Support and Services at Home)

Support and Services at Home (SASH®) is a leading national housing-and-health model shown to improve community health, reduce costs, and enable people to age in place safely and healthfully. It helps older adults avoid the distress and expense of unnecessary hospitalization or nursing care. Research shows that SASH® participants have better health, well-being, and confidence in making health decisions than their non-SASH® peers.

SASH® is funded by OneCare Vermont as part of Vermont's All Payer Model.

Participants receive individual support from a care coordinator and wellness nurse, working with a team of community partners to provide regular comprehensive assistance. These coordinated efforts can include family members, friends, and health providers.

Care based at home

SASH® uses the home as a platform to provide comprehensive care management and coordination. It primarily serves Medicare recipients in congregate housing and in the surrounding community. Its services are available in every Vermont county and are currently delivered to about 5,000 people.

SASH services can be provided in rental or privately owned homes. To connect with a local SASH panel, visit sashvt.org/connect

Home safety & accessibility assessment

Older Vermonters who want to age in their homes should consider hiring an occupational therapist to perform a home safety and accessibility assessment. Geared toward individuals with limited abilities and mobility, these home reviews look for possible fall risks and make sure the building is accessible and convenient for anyone who has impaired vision, uses a wheelchair, or may be at greater risk of falls or injuring themselves.

Such home evaluations can also be done by a licensed physical therapist, and may be done automatically upon discharge from a hospital or rehabilitation facility.

While it's possible to inspect the home yourself or have a family member do it, bringing in a professional makes sure all the bases are covered.

USDA home modification grants

If an assessment at a home located in a rural area finds that significant home modifications are needed, funding may be available from the USDA through its Rural Repair and Rehabilitation Grants: Home Modification Help for the Elderly, also referred to as the Section 504 Home Repair program, the Very Low-Income Housing Repair program and the RD 504 Loan program. (payingforseniorcare. com/home-modifications/usda-rural-repair-grant)

5 home modifications to facilitate aging in place

Taking a proactive approach to modifying the home means that adults can age in place independently and more safely.

Widen doorways

If an older adult relies on a walker or wheelchair at home, widening doorways is critical. Depending on the insulation and placement of electrical switches and outlets, costs vary greatly for widening doorways.

Install ramps

- Exterior ramps can make navigating entrances easier and safer. Licensed contractors are trained in building and installing ramps of the correct height and rise.
- Indoor threshold ramps may be necessary for older adults who use wheelchairs. These provide smooth transitions from one surface to another and are often made of rubber, so they adjust easily to accommodate thresholds of different heights.
- Mobile ramps are easy for a single person to install. Consider adding traction tape to stairs and elevated walking surfaces.

Kitchen modifications

Aging adults may find that their kitchens are harder to navigate, especially from a wheelchair. Professional contractors can adjust the counter height and lower the sink. Microwaves can be easier to reach in a microwave stand.

Shower and bathtub modifications

A bathtub can be replaced with a walkin shower or walk-in tub. Less expensive changes can also help prevent slips and falls: add a safety bar or safety strips.

A bathtub transfer bench straddles the side of the tub, enabling bathers to sit while getting into the tub one leg at a time, reducing the risk of a fall. A bathtub chair, which sits inside the bathtub, is also an option.

Flooring modifications

Shag carpeting and area rugs can be navigational hazards. Consider replacing carpeting with a short-nap style, and remove or securely tape down small rugs on slippery floors.

Adapted from Assisted Living Today: <u>assistedlivingtoday.com/blog/home-modifications-for-seniors-aging-in-place</u>



Transportation

Volunteer drivers

Give a lift, get a lift

Volunteer drivers provide cost-effective transportation to community members going to medical appointments and social service providers. Anyone with a reliable vehicle who enjoys driving and meeting people can be part of this vital connection for older adults and people with disabilities.

How it works: Volunteers decide how often they can provide rides and how far they're willing to drive. Most trips center on medical appointments but may also include rides to senior centers, affordable food locations, counseling, prevention treatment, or various human services programs. While most appointments are local, others can be as far as New Hampshire or Boston. Drivers are offered reimbursement for each trip at the standard IRS mileage rate.

Becoming a volunteer driver

Each local provider has more information on becoming a volunteer driver, and on Dial-A-Ride services. To ensure drivers' reliability and the safety of riders, interested volunteers will need to:

- Share their location to connect with the nearest transportation agency (see the map at the link below).
- Complete and submit an application online or via email.
- Complete the application process through a follow-up email/phone call from the local transportation agency.
- Provide a valid driver's license and auto insurance (with a good driving record), and complete a full background check.

To apply, call 1-800-685-RIDE (1-800-685-7433) or find your local program at connectingcommuters.org/programs/community-rides-info.

Bus service

Get on the bus!

Taking the bus reduces the cost and environmental impact of commuting. Vermont's 10 regional bus companies make up a network designed to help you get around locally and statewide. All Vermont bus companies also provide special services for older and disbled Vermonters who may need assistance.

Riding the bus for first-timers

Don't know? Just ask! Drivers can help newbies navigate the first few rides and confirm that riders are on the right bus, explain how to request a stop, or show how to place a bicycle in the rack.

Go! Vermont can help riders find route maps, fare information, schedules, bus stop locations and more.

Locate buses in real time with the Transit App

The Transit App is a real-time bus locator and trip planning tool. Use the all-in-one app to get departure times for nearby lines and plan trips across multiple routes. The app works in over 175 cities worldwide and makes trips easy and predictable. (connectingcommuters.org/transit-bus-app)

To find out more about your transportation options, call: 1–800–685–RIDE (1–800–685–7433) or visit connectingcommuters.org.

VETliftVT

Veterans transportation options

VETLiftVT is a one-click, one-call, state-supported resource that helps veterans find ways to get them where they need to go – doctor's appointments, the grocery store, work, or on personal errands. Transportation options include veteran-specific and public options in each city or town.

Trains

Amtrak

1-800-872-7245, amtrak.com

Amtrak provides commuter travel within Vermont and long-distance leisure travel to New York and beyond with a nationwide rail system. Skip the traffic, sit back and enjoy the scenery. Some trains offer special services including bike carry-on, wifi, a cafe car, pet travel, and more.

Note: Due to decreased ridership during the pandemic, Amtrak has temporarily suspended its Vermont routes. Check with Amtrak before you plan to travel by train.

Choose your route

Amtrak operates two rail lines out of Vermont: the Vermonter and the Ethan Allen Express. Visit the Amtrak website to see all stops on each route and the most up-to-date schedules, and to purchase tickets.

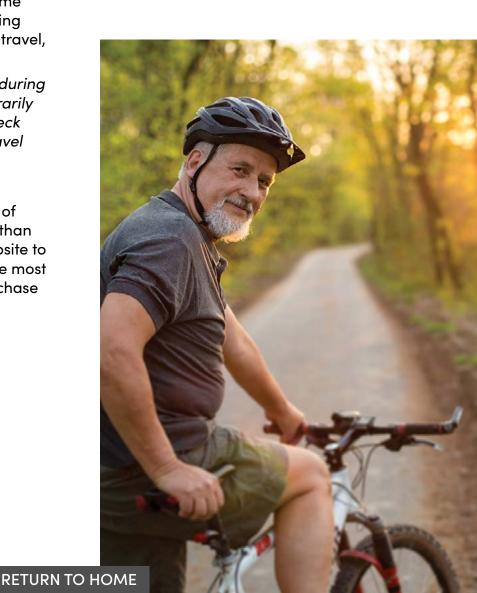
Bike safely on the road

Learn to ride safely in traffic – follow the same rules as you do in a vehicle:

- Ride in the same direction as traffic.
- Maintain visibility with lights and signals.
- Use the full lane when appropriate.
- Follow all applicable bicycle laws.

Be predictable – signal your turns, ride in a straight line, and stop at all stop signs and lights. For safety, riding with a helmet is recommended.

Local Motion has bike maps and route options in Vermont. Call 802–861–2700 or visit localmotion.org/maps_routes.



Elders and Persons with Disabilities (E&D) Transportation Program

Vermont's Elders and Persons with Disabilities (E&D) Transportation Program fills gaps in existing transportation services for adults 60 and older and individuals with disabilities, as defined by the Americans with Disabilities Act (ADA). Vermont's public transit providers serve as regional brokers, working with human service agency partners to coordinate E&D trips, together with:

- Non-Emergency Medical Transportation (NEMT), provided through Medicaid
- Contracted service with community organizations and institutions
- Transportation for the general public

The E&D Program allows older adults and people with disabilities to travel from home from home to:

- Medical appointments
- Adult day facilities
- Senior meal sites
- Essential shopping

This door-to-door service supplements regular transit service in the area. Drivers can be paid or volunteer and, depending on the rider's needs, use vehicles ranging from a transit bus with wheelchair access to a standard car. This coordinated approach extends the impact of E&D funding – regional brokers have multiple funding sources and fill capacity on vehicles to the maximum extent.

To find a ride:

1-800-685-RIDE (1-800-685-7433)

Driving assessments

As we age, subtle changes can affect our ability to drive. Changes in height, reaction times, and confidence can increase the challenges of driving safely, particularly in heavy traffic, low light, or at confusing intersections.

Driver assessment and/or rehabilitation evaluates a person's ability to drive safely and designs appropriate treatment for people with conditions, diseases, and disabilities that have affected their driving skills.

Vermont has a handful of these programs, mostly at the state's larger medical centers, which have occupational therapy clinics. A referral from a primary care provider is generally required, so the first step for drivers is to have a conversation with their doctor.

Assessment by an occupational therapist involves clinical evaluation of vision, thinking skills, and physical abilities. Further testing or treatment may be needed.

When clinicians decide it is safe to proceed, an on-road evaluation assesses a driver's ability to handle a vehicle in different traffic situations. This evaluation determines whether adaptive equipment or additional training is needed and may be conducted by certified driving instructors.

Therapists can develop a personalized program for older drivers who need additional training to help them reach their driving goals. Before an appointment, therapy staff can help drivers determine if the program is covered by insurance and identify payment sources.

These hospitals specifically list driving assessments/rehab on their websites, but other occupational therapy clinics may offer it as well.

UVM Medical Center

Colchester and South Burlington 802-847-3140

<u>uvmhealth.org/medcenter/Pages/</u>
<u>Departments-and-Programs/Driver-Rehabilitation.aspx</u>

Central Vermont Medical Center

Berlin (on-road assessments held at UVM Medical Center in Colchester) 802-372-4242

cvmc.org/departments-programs/ rehabilitation-therapy/occupationaltherapy/clinical-driver-assessments

Northwestern Medical Center

St. Albans 802-524-1064

northwesternmedicalcenter.org/ services/rehabilitation-services/ occupational-therapy

Rutland Regional Medical Center

Rutland

802-775-7111

rrmc.org/services/rehabilitation/ occupational-therapy



AARP driver safety course

The AARP Smart DriverTM course, offered by AARP Driver Safety, is the nation's largest refresher course designed specifically for drivers age 50 and older. For more than 35 years, the course has taught over 16 million drivers proven safety strategies so they can continue driving safely for as long as possible. Courses are offered in both English and Spanish in either a traditional classroom setting or through an interactive online course that may be taken from your home computer at your own pace.

Over nine in ten course participants report changing at least one key driving behavior for the better as a result of what they learned in the course and over eight in ten participants felt that information they learned in the course has prevented them from being in a crash. Plus, you may be eligible to receive an insurance discount upon completing the course, so consult your insurance agent for details.

AARP membership is not required to take the course. After completing the course, you'll receive a certificate of completion that can be presented to your insurance agent for a possible reduction in your auto insurance premiums.

To locate a classroom course, visit <u>aarp.</u> <u>org/findacourse</u>. Course times, dates, and locations will be listed along with a phone number to call to register. Or call toll-free, 1-877-846-3299. To register for the online course, visit <u>aarpdriversafety.</u> <u>org.</u> You can also connect with your local senior center, as many centers host the driver safety courses.

Information adapted from AARP (<u>aarp.org/auto/driver-safety/info-2010/why-take-a-driver-safety-course.html</u>)

Driving cessation

The hardest conversation to have with an aging loved one may be about when they should stop driving. Here are 10 tips to guide you.

Discuss this early and regularly. "How would I best approach you, if I see that you are less safe on the road?"

Ride along. Keep notes. Can they follow all road rules without prompting, handle turning, change lanes, maintain safe speed, and be alert for oncoming traffic?

Find resources. An objective third party can help assess the situation—medical providers (primary care, eye doctor), a police officer, or geriatric care manager are good options. You can suggest a driving evaluation.

Acknowledge that this is difficult and be respectful. "I know this will be hard, but we need to talk about your driving." Use your notes and known incidents. Accidents, vision problems, dementia, small strokes, etc. are all good reasons to stop driving.

Assess needs and find alternatives.

Matching transportation needs with alternatives (a hired driver, community options, or family members) will help you ease fears and override objections.

Meet one-on-one. Family meetings can feel like "ganging up." Select one family member who can best present concerns.

Don't confront. Focus on functional capacity, and stay calm. Don't accuse. Stick to the topic and to facts. Maybe say, "I don't want to see you get hurt or hurt anyone else." Stick to terms like "safe driving," "driving retirement," or "driving cessation" – not "giving up the keys."

Listen and acknowledge feelings.

Allow your parent to express anger and thoughts. Empathize and support: "We'll find a solution together," or "I'd probably be upset, too." Then gently return to your points. Mirror a negative response: "Let me make sure I understand – you are saying..."

Be patient and know when to stop. If you're getting nowhere, try again another day after everyone has had time to cool down and think.

Work together. Admit that there are no easy solutions. Pledge to help maintain their independence. Be ready to answer "How will I get there?" concerns.

You need to initiate this discussion – your parent may need a prompt from you to limit or stop driving. Your help can keep your parent and others safer.

roadsafeseniors.org/blog



Winter road safety

Winter road conditions can be hazardous in Vermont. Make sure your vehicle is ready for winter (nhtsa.gov) by having snow tires and carrying an ice scraper and an emergency kit. Pay attention to news and weather reports before heading out, and check road conditions at 511vt.com. When you have to be on the road during wintry weather, please slow down and give other vehicles plenty of space.



"Caregiver" is not a one-size-fitsall term. No matter the setting or circumstance, caregiving can be both immensely stressful and rewarding. Addressing caregiver needs can reduce burnout; learning about their loved ones' needs can help caregivers push through.



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Tips for caregivers

Taking care of yourself

Family members who are actively caring for an older adult often don't think of themselves as "caregivers" — anyone who provides help to another person in need. Those who don't provide care directly, who have a loved one in a residential care facility or living far away, can have even more trouble with this. Recognizing this role can help caregivers seek and get the support they need.

Caregiving can be both rewarding and stressful. It's natural to feel angry, frustrated, exhausted, alone, sad, or to have trouble keeping track of information. Stress can make caregivers vulnerable to and unaware of changes in their own health. Yet if they don't take care of themselves, they won't be able to care for someone else.

Respite care

Most communities have programs that will care for your loved one when you need a break. The person you're caring for also gets a break with these programs:

- In-home. Home-health aides will provide companionship, nursing services, or both in your home. You can find aides through home-health agencies or independently.
- Adult care centers and programs.
 Some centers provide care for both older adults and young children, and the two groups may spend time together.
- Short-term nursing homes.
 Some assisted living, memory care, and nursing facilities accept people needing care for short stays while caregivers are away or need an overnight break.

When caregivers work outside the home

If you begin to feel overwhelmed and can afford it, think about taking a leave from your job. Employees covered under the federal Family and Medical Leave Act may be able to take up to 12 weeks of unpaid leave a year to care for relatives. Ask your human resources office about your company's options.

Adapted from: mayoclinic.org/healthy-lifestyle/stress-management/in-depth/caregiver-stress/art-20044784

Stressors and strategies in caregiving

Common caregiver stressors

- Exhaustion
- Feeling like you have to do it all
- Lack of help and respite
- Family conflict over caregiving
- Trying to push your life or that of the care receiver back to "normal"
- Lack of confidence, knowledge, or resources to provide the care you wish to give
- Balancing the care receiver's choices with your desire to ensure their safety
- Making difficult decisions
- Your self gets subsumed by your role as caregiver
- Financial stress
- Difficult emotions such as anger, guilt, and depression
- Untended grief

Information provided by Barb Asen, Director of Family Caregiver Support at Central Vermont Council on Aging

Helpful strategies

- Accept that you can't do everything; be kind to yourself – appreciate that you are doing the best you can.
- Let go of what's beyond your control or what you can't get to.
- Seek help; understand and ask for what you need.
- Access community supports and resources.
- Recognize that family members have different temperaments, strengths, limitations, and ways to give.
- Work on your own communication skills.
- Learn more about the condition; understand the diagnosis and likely progression.
- Focus on the goals and desires of the care receiver, even if they differ from what you would wish for them or yourself.
- Be guided by advance care planning, done with the care receiver when possible.
- Recognize that circumstances can change and try not to promise absolutes (I will never... I will always...).
- Pay attention to your all-around wellbeing; access care and counseling when needed.



Basic needs of the care receiver

To help guide your caregiving, consider some basic needs of your care receiver. Be open to change and practical about what fits the situation.

- Being listened to without argument
- Having regular, suitable companionship
- Having quality medical care they are comfortable with
- Feeling safe in environments and relationships
- Being regarded as a whole person, not a condition
- Having choices and making decisions about their lives
- Feeling valued and having opportunities to contribute
- Having appropriate privacy
- Continuing to do things they love to do
- Being accepted for who they are
- Being physically comfortable and not in pain
- Feeling happy and sharing good feelings
- Having changing thoughts and emotions respected
- Having wishes honored
- Being treated with dignity
- Having things to look forward to
- Knowing they are loved

Information provided by Barb Asen, Director of Family Caregiver Support at Central Vermont Council on Aging

Kinship care

"Kinship care" is the permanent or temporary care of a child by an adult with significant ties to the child and/or the family. Kinship care arrangements, which come about when the parent is unable or unwilling to provide care, can be legal or informal. Kinship caregivers are often older adults, such as grandparents. State and federal programs can help with income, food, health care, home energy, telephone, and other needs. Benefits can be for a family, or for individual children or older adults. Children may be eligible for public benefits even if caregivers do not have guardianship or legal custody. Relative caregivers may become eligible for benefits programs when their household size increases.

There are six types of kinship arrangements in Vermont. Eligibility will depend on the situation.

When there's no state child abuse or neglect case:

- Informal arrangement
- Minor guardianship (Probate Court)

When the state has filed a juvenile petition in Family Court:

- Conditional custody (Family Court)
- Foster care (Family Court)
- Permanent guardianship (Family Court)
- Adoption (Family Court and Probate Court)

How providing kinship care might affect you legally:

- Learning your rights as a caregiver
- Accessing records and acting on behalf of a child
- Changing your estate plan, Advance Directive, and other end-of-life plans

Financially:

- Supporting a child while on a fixed income
- Cost of daycare, summer camp, and other expenses
- Difficulty finding and qualifying for housing and subsidies

Emotionally:

- Reestablishing your relationship to all involved parties
- Grieving loss of lifestyle
- Facing retirement and aging while caring for child with separate needs

Socially:

- Lack of peers who can relate and share the experience
- Inability to engage socially due to caregiving needs
- Being judged
- Disagreements within and among involved families

Physically:

 Raising children is physically demanding and can be more difficult if dealing with other physical challenges of aging (arthritis, diabetes, limited mobility, etc.).

Supports & services

Reach Up Child Only Grants

Available for all children living outside their parents' home and not receiving SSI, or in foster care, these include eligibility for free and reduced-price school lunches. Economic Services, Department for Children and Families, 1–800–479–6151, dcf.vermont.gov/benefits/reachup; apply online at dcf.vermont.gov/mybenefits/apply.

Medicaid

Kinship children in Vermont are eligible for Medicaid unless they are on their parents' insurance.

Childcare Financial Assistance Program

Kinship children are eligible for subsidized child-care grants.

Vermont Kin as Parents

VKAP, a resource for kinship families, has a 24/7 phone line: 802–871–5104. Staff can help families navigate available supports and systems. Vermontkinasparents.org; facebook.com/VTKinAsParents

Vermont Kinship Caregivers Guide dcf.vermont.gov/sites/dcf/files/ Adoption/Kinship-Guide.pdf

Generations United Grand Resources

Access support through Temporary Assistance for Needy Families (TANF) gu.org/resources.

Grandfacts State Fact Sheets grandfamilies.org

AARP Foundation aarp.org/quicklink

Determine if relatives and/or children qualify for programs that pay for food, increase income, and cover home and health care costs.

Guardian Information Booklet vermontjudiciary.org/probate/minorquardianships







Vermont Kin As Parents



VKAP provides support and information to Vermonters who are raising the children of relatives or friends. We can help with Medicaid, education, and financial and legal information for kinship families. We also offer a statewide virtual support group for kinship caregivers.

Call **VKAP** for more information: **(802) 871-5104**



At some point, everyone who cares for a senior is called upon to be an advocate, whether in a private setting or in the public arena. Understanding older Vermonters' rights can help caregivers and seniors advocate more effectively in any situation.



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Legislative advocacy

How do I know what bills are being considered?

- Legislative committee agendas are posted online during the session (legislature.vermont.gov/committee/list/2020). Click on a committee, then on the week's schedule. Most schedules are posted on Mondays but change a lot, so check often. Anyone can listen to testimony, and you may visit a committee room at any time.
- House and Senate sessions are livestreamed at <u>vpr.org</u> – click on "Listen Live" at the top of the page, then select the chamber you want. Links are also at the bottom of the legislative website home page.
- Statewide media regularly run legislative reports. Vermont PBS's "Vermont This Week" has a heavy focus on the Legislature when it's in session.
- Join an advocacy group to receive updates on issues of interest to you.

How can I get a bill introduced to address an issue?

Only legislators can introduce bills, but ideas often come from constituents. Ask your legislator if a bill would be a good way to address your issue. If so, ask if they would introduce the bill for you. If you don't agree on the issue, ask for a referral to another legislator who shares your view.

- If your issue involves a problem with a state agency, your legislator might help you work out a solution with the agency.
- If the issue is around regulation and not law, the Legislative Committee on Administrative Rules can review it.

Sometimes just introducing a bill will lead to a resolution, and the bill won't need to be acted on.

You can follow the progress of your bill as described above. Your legislator may be willing to keep you informed.

How can I testify on a bill?

In person: Get on the committee's schedule by calling the sergeant-at-arms (1-800-322-5616 or 802-828-2228) and ask to be connected with the staff assistant for the committee to which you wish to testify. You will likely reach voicemail, so state your phone number and email address slowly and clearly.

By phone: You may ask to testify by phone, following the steps above. The committee will schedule you for an approximate time; it is helpful if you have a wide window, to account for other testimony. The committee will call you on speaker phone.

Send a letter or an email: Contact the committee chair and ask to have written testimony distributed to committee members.

At a public hearing: These are usually held at the State House, but some may be held in other parts of the state. You may only get 1–2 minutes to speak if many people wish to testify. People are usually called to testify in the order in which they sign up.

What do I say? Tell your story briefly and simply. Personal stories are very important, and facts are helpful. If you write your testimony but don't finish reading it, you can submit it as written testimony. Committees post testimony on the legislative website, and typically ask for it ahead of time.

Advocating for change

When advocating for systems change, narrow your focus. Here are some tips:

Identify the issue

Focus on one or related issues. Defining an attainable solution points decision–makers to a specific problem. Timing is important. For example, a costly solution will be a tough sell during an economic downturn. Envision solutions, but be open to other options.

Research

You need a basic understanding of the system you want to change. Identify the government body where the change needs to occur. Is this a law that needs to be changed or an agency policy?

Collaborate

Advocacy can be more effective when working with others who have a similar interest, bringing new energy, connections, and talent. Understand core members' strengths, and encourage them to go beyond their comfort zone. The group's skill sets will help determine strategy. Respect the views of others who may be affected by a change. Forums, surveys, and in-person meetings forge connection and help share concerns.

Develop a strategy

Who should meet with stakeholder groups and decision-makers? Should you go to the public or work directly with decision-makers? All members should carry the same core message and commit to thoroughly understanding the issues. In a coalition, give members opportunities to have equal input.

Communication

Keep others interested in the proposal informed and engaged to create excitement. An email distribution list can simplify information sharing and calls to action. For legislative advocacy, consider keeping a list of senators and representatives.

Stakeholders and decision-makers

Identify stakeholders and their stance on the issue. If their support is not obvious, they may be working behind the scenes. Some participants may not agree with proposed changes because they misunderstand the goal or think the change will negatively affect them. Be proactive. Identify decision–makers and work with your core members to decide how best to approach them.

In-person meetings

Face-to-face meetings with other advocates, stakeholders, or decision-makers are critically important. Try to attend related committee meetings and consider having at least one of the core group at each. For State House advocacy, a regular presence at committee meetings can spark spontaneous meetings with legislators, reinforce the bill's importance, and provide decision-makers with access to quick answers. An educated legislator makes a better advocate.

Prepare to negotiate

You may not achieve everything you want, but any change is a foundation for more change. Before agreeing to any decision, be sure to seek consensus within your core group.

Be persistent

It may take months or years for the change you seek to happen – if it happens at all. Don't give up: change takes persistence. Involving others is key to moving forward. Maintain focus and don't lose patience with others.

How to contact your legislators

To find out who your legislators are and to access their contact information, go to legislature.vermont.gov/people and search by town. You can also search a specific legislator to find out more about them.



2020 legislative priorities -Community of Vermont Elders (COVE)

COVE, an advocacy and education organization that works to ensure the dignity, security, and well-being of aging Vermonters, has a long history of engaging on diverse and challenging issues as they arise in the State House. This is a summary of their 2020 legislative priorities.



Housing:

 Advocate for a state housing study to evaluate the needs and projections for age-specific housing in Vermont, with recommendations for an agespecific housing plan and/or policies containing measurable objectives focused on older Vermonters, especially those who are very low-income, caregivers, or living with disabilities.



Healthcare:

- Continue to monitor the evolution of the All-Payer Model and accountable care organizations (ACOs) to ensure that older adults continue to receive needed long-term-care services and that appropriate investments are made in community support systems.
- Promote health care price transparency and consumer rights.



Protection of vulnerable adults:

 Modernize the Adult Protective Services statute to strengthen laws and provisions.



Good nutrition:

 Support funding for nutrition programs that help older Vermonters maintain healthy diets, including Home Delivered Meals and Congregate Meal Sites.



Transportation:

- Expand transportation services, including public transportation, especially for older Vermonters or people with disabilities.
- Advocate for increased funding for transportation services for elders and disabled people.



Long-term services and supports:

- Support universal access to long-term supports and services (LTSS).
- Expand and support LTSS Medicaid rate increases.
- Monitor impact of consolidating long-term care into ACO.



Fuel assistance:

 Protect Low-Income Home Energy Assistance Programs (LIHEAP) at the same level of total benefits (purchasing power).

Volunteer with grow bOLD

grow bOLD is a grassroots corps of volunteers who spend one half day, every week of the legislative session, at the Vermont State House. They receive training in policy observation, monitoring, and advocacy. Volunteers commit to at least two weeks out of the session.

Each week, volunteers choose where they would like to spend time, with support of COVE advocacy staff, to know what is current and might be of interest. COVE staff support volunteers who would like to testify and provide input.

When a person is represented in a room, the way officials talk about them changes. The more times those officials subconsciously change how they speak about a demographic, the more likely they are to internalize that mode of speaking and thinking. The grow bOLD corps uses this truth to change the language and conversations happening on their behalf. Changing language leads to changing policies, then to changing services, and, finally changing society. By forcing this shift, grow bOLD volunteers use passive listening (and sometimes active advocacy) to change the culture of Vermont.

To join the grow bOLD corps, contact marichel@vermontelders.org or rubyb@vermontelders.org.

Long-Term Care Ombudsman

vtlegalaid.org or 1-800-889-2047; Legal Help Tool

The Long-Term Care Ombudsman Project (VOP) provides free help for Vermonters receiving long-term care in nursing homes, residential care homes, assisted living residences, adult family care homes, and in the community through Choices for Care. A project of Vermont Legal Aid, VOP staff works to protect the health, welfare, and rights of people who live in long-term-care facilities.

Complaint investigation

VOP staff and volunteers identify, investigate, and help resolve complaints made by, or for, individuals receiving long-term-care services.

Self-advocacy

VOP helps individuals speak in their own voices about their care.

Community-based care and services

VOP helps people on Choices for Care receive long-term-care services in the community.

Program activities

VOP staff visit long-term-care facilities to talk with residents and monitor conditions; educate providers about residents' rights; and provide information to the public about long-term-care services and options.

Systems advocacy

VOP helps identify problem areas in the long-term-care system and advocates for improvements.

Policy advocacy

VOP advocates for laws and policies to improve the care and quality of life of Vermonters receiving long-term care in facility settings and in the community through Choices for Care.

Vermont Legal Aid is a statewide, nonprofit law firm that provides free legal services to Vermonters facing civil legal problems that threaten their rights and well-being.

How a bill becomes a law

Bill introduction/First reading: Any legislator can sponsor a bill to amend Vermont law. The bill is assigned a number and introduced on the floor of the sponsor's chamber. All votes in this process, except veto overrides, are majority votes.

Bill referral: Upon first reading, the bill is referred to a standing committee of the chamber based on its subject matter, which may also lead it to be referred to other committees.

Committee consideration: If the committee pursues the bill, it may take testimony on it and recommend amendments.

Second reading: If voted out of committee, the bill goes to the chamber floor. A member of the considering committee reports its recommendations; legislators may propose further amendments and debate the bill and any amendments. The chamber votes on amendments and a third reading.

Third reading: A third reading, on the legislative day after the second reading, allows for further amendments and debate. The chamber then votes on the bill's passage.

Other chamber consideration:

A passed bill remains in that chamber for one legislative day and then repeats the process in the other chamber. If new amendments are proposed, the bill and amendments go back for consideration by the first chamber, which may agree or propose additional amendments.

Committee of conference: If the chambers cannot agree on the bill or amendments, a committee of three members of each chamber may be

appointed to try to agree on a final version, which is submitted to both chambers for approval. They cannot amend it, voting only to adopt or reject it.

Governor's consideration: If both chambers pass the bill, it is sent to the governor, who will sign it into law, allow it to become law without his or her signature, or veto it. The House and Senate may override a veto by a twothirds vote in each chamber.

Bill enactment: Once the governor signs the bill, allows it to become law without a signature, or the chambers override a veto, the bill becomes law and is assigned an act number.

The Vermont State House

Sergeant-at-Arms Office 115 State Street Montpelier, VT 05633-5501

Phone: 802-828-2228

Email: sqtatarms@leg.state.vt.us

Vermont State Curator's Office

2 Governor Aiken Avenue Montpelier, VT 05633-5501

Phone: 802-828-0749

Email: jack.zeilenga@vermont.gov Website: curator.vermont.gov

Visitors are welcome:

Monday - Friday: 8 AM - 4 PM (throughout the year) Saturday: 11 AM - 3 PM (July 1 - October 30 only) Closed on Sundays and state holidays

The State House is closed to the public during the ongoing COVID-19 event. Please direct questions to the Office of the Sergeant at Arms via email satatarms@ leg.state.vt.us. In case of emergency call Capitol Police at 802-828-2273; let it ring until you receive an answer.

Vermont voting FAQs

How can I register to vote?

- Online (<u>olvr.vermont.gov</u>)
- Submit a voter registration form to your town or city clerk (<u>sos.vermont.</u> <u>gov/media/nesb43yw/2017-voter-app.</u> <u>pdf</u>). You can also get a form (called the Application for Addition to the Checklist) from your town or city clerk or by calling 1-800-439-VOTE.
- When you register your car, get a driver's license, or renew your registration or license with the Department of Motor Vehicles (DMV). You can also register when you apply for benefits from a designated state government agency.

For more information and to download a voter registration form, visit Vermont's registration page (sos.vermont.gov/elections/voters/registration). Include your Vermont driver's license number or last four digits of your Social Security number. Take the Voter's Oath if you have never voted in Vermont (it can be self-administered). Submit the completed form to your town or city clerk.

Why must I describe the location of my principal residence on the registration form? Isn't my mailing address enough?

The town clerk must determine whether you live where you are registering and, in some communities, what voting district or ward you live in. This requires your full physical address, including your building name and room number if you live in an institutional residence, such as an assisted living facility. Only your mailing address will be disclosed on any public checklist.

How do I verify if I am registered to vote in Vermont? Check your registration status online at mvp.vermont.gov/ or contact your town or city clerk.

What is the registration deadline?

Eligible residents can register to vote up to and including the day of the election:

- At your town/city clerk's office during normal business hours before the election
- At your polling place during voting hours on Election Day
- You do not need to reregister unless you move to a new town

How do I contact my town or city clerk?

Check the Guide to Vermont's
Town Clerks, Treasurers & County
Clerks (sos.vermont.gov/media/
vh1jv3oj/2019townclerkguide.pdf) or
call directory assistance.

Who is eligible to vote in Vermont?

You may register to vote in your town of residence if you are, on Election Day:

- A U.S. citizen
- A resident of Vermont and of the town in which you are registering
- Have taken the Voter's Oath, and
- Are 18 or older

Anyone who meets these requirements and will be 18 on or before the date of a general election may register and vote in the primary election immediately preceding that general election.

Can I register or vote in more than one town? No. When you register in a new town, you must note your prior town of registration.

Do I have to declare a party affiliation when I register? No. There is no party registration in Vermont. You can only vote on one party's ballot in the primary election.



Who is a resident for voting purposes?

Vermont law defines a resident as "a person who is domiciled in the town as evidenced by an intent to maintain a principal dwelling place in the town indefinitely and to return there if temporarily absent, coupled with an act or acts consistent with that intent."

The voter's intent and actions, not how many nights a year the voter sleeps in town, determine residency. A voter who has more than one home must designate their principal town of residence.

Special cases: Vermont law allows a person to remain registered in the last town in which they resided if they are in the military, living overseas, in a nursing home or other health care facility, in a veterans home, attending school, or in a correctional institution.

(legislature.vermont.gov/statutes/ section/17/043/02122)

Early and absentee voting

Vermonters who prefer to vote early or by mail can do so as soon as ballots are available — up to 45 days before the primary or general election and 20 days before a municipal election that uses the Australian (secret) ballot.

Request a ballot online (<u>mvp.</u> <u>vermont.gov</u>), download a copy (<u>sos.</u> <u>vermont.gov/media/3opimqn2/vtabsenteerequestgeneric.pdf</u>), or pick up a ballot at your town clerk's office.

Town clerks can answer any questions by phone or in person about early or absentee voting. If you need more help, email the state Elections Division at sos.elections@vermont.gov, or call 1–800–439–VOTE.

Deadlines

All early voter absentee ballot requests must be submitted by 5 pm – or the close of the town clerk's office – on the day before the election.

To be counted, a ballot must be returned:

- To the town clerk's office before the close of the office on the day before the election (be sure to check your clerk's hours), or
- To the polling place before 7 pm on the day of the election

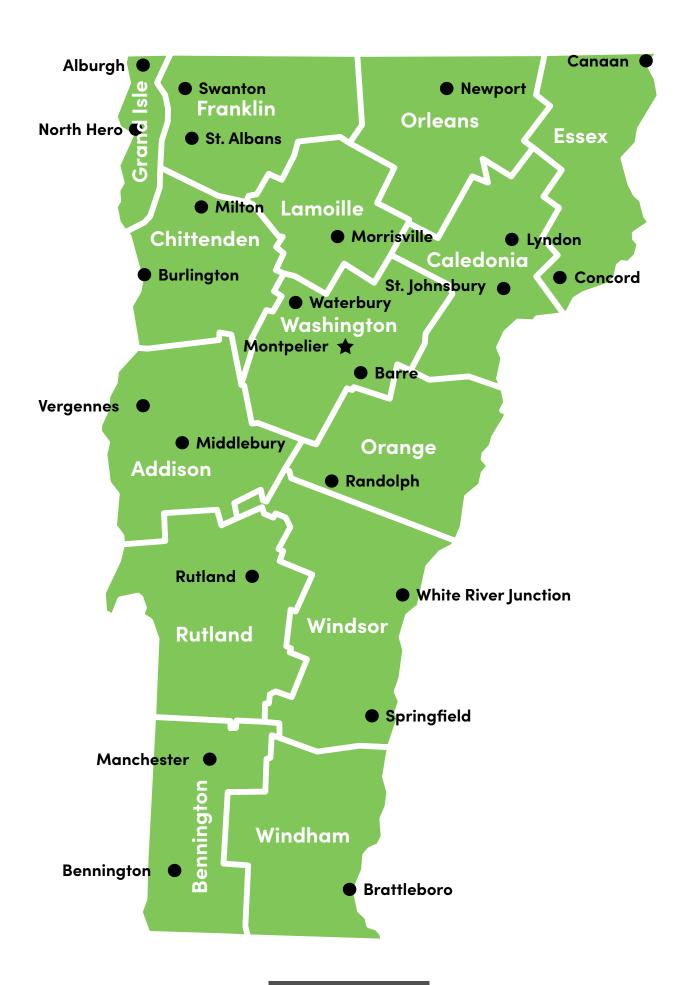
In-home ballot delivery

If you are sick or have a disability, a ballot can be delivered to your home on Election Day. You may request an absentee ballot up until 5 pm on the day before the election. Two justices of the peace will deliver a ballot to you, and will bring it back to the polling place to be counted.

Requests for an early voter absentee ballot can be made at any time until 5 pm – or by the time the town clerk's office closes – on the last day that the clerk has regular hours before the election. The request also can be made when the person registers to vote.

A single request may be made for absentee ballots for town meeting, and primary and general elections, if the "mail to" address is the same for all three elections. A request must be made every election year.

Adapted from Vermont Secretary of State: <u>sos.</u> <u>vermont.gov/elections/voters/early-absentee-voting</u>



directory



financial & legal issues

Legal Services Vermont

service area: Statewide

1-800-889-2047 | legalservicesvt.org referral services that connect caller with a paralegal or lawyer at Legal Services Vermont or Vermont Legal Aid. Services are free.

South Royalton Legal Clinic-Vermont Law School

service area: Statewide

802-831-1500 vermontlaw.edu

helps Vermont residents who can't afford lawyers, covering issues such as children's rights, family law, housing, welfare

Vermont Bar Association-Online Lawyer Referral and/or free legal help

service area: Statewide

1-800-639-7036 vtbar.org/lrs or vtlawhelp.

free legal assistance to low income Vermonters on issues of housing, collections, and child support as well as others; for other clients lawyers may provide initial 30-minute consultation for no more than \$25

Vermont Legal Aid

service area: Statewide

1-800-889-2047 vtlegalaid.org

civil legal assistance: family, health, housing, money/debt, public benefits, seniors, victims of crime, disability, other legal issues

VT Ethics Network

service area: Statewide

802-828-2909 ven@vtethicsnetwork.org

vtethicsnetwork.org

education, information, and support for Vermonters regarding advance care planning, health care decision-making, Advance Directives; advocacy on legislation related to healthcare ethics



Area Agencies on Aging

case management, care transitions, family caregiver support, health insurance assistance, Meals on Wheels

Age Well

service area: Chittenden, Addison, Franklin,

and Grand Isle Counties 802-865-0360 | <u>agewellvt.org</u>

Central Vermont Council on Aging (CVCOA)

service area: Washington, Lamoille, Orange,

and part of Chittenden Counties

802-479-0531 info@cvcoa.org cvcoa.org

Northeast Kingdom Council on Aging

service area: Caledonia, Essex, and Orleans

Counties

1-800-642-5119 | info@nekcouncil.org

nekcouncil.org

Senior Solutions

service area: Windham and

Windsor Counties 802-885-2665

information@seniorsolutionsvt.org

seniorsolutionsvt.org

Southwestern Vermont Council on Aging

service area: Bennington and Rutland

Counties

Crisis: 802-786-5990

infoandassistance@svcoa.net svcoa.org

Adult Day Programs

for older adults with cognitive impairments: health monitoring, assistance with personal care needs, activities, meals, exercise program, referrals/education for caregivers

Care Partners Adult Day Center

service area: St Albans area (Franklin County) 802-527-0548 | info@carepartnersvt.org carepartnersvt.org

Elderly Services Adult Day

service area: Middlebury area (Addison

County)

802-388-3983

Gifford Adult Day

service area: Bethel area (Windsor County)

802-234-2165

Lamoille Day Health Services Adult Day

service area: Morrisville area

(Lamoille County) 802–888–7045 x224

Oxbow Senior Independence Program Adult Day

service area: Newbury area (Orange County)

802-866-5465

Project Independence Adult Day

service area: Bennington area

(Bennington County)

802-442-8136

Riverside Life Enrichment Center Adult Day

service area: Lyndonville area (Caledonia

County)

802-626-3900

Scotland House Adult Day

service area: Quechee area

(Windsor County) 802-280-6080

Springfield Area Adult Day Services

service area: Springfield area (Windsor

County)

802-885-9881

The Gathering Place; Adult Day Center & Home Care

service area: Brattleboro area (Windham

County)

802-254-6559 gatheringplacevt.org

The Meeting Place Adult Day

service area: Newport area

(Orleans County) 802-334-7604

UVMHN Home Health & Hospice Adult Days

service area: Chittenden County

Colchester: 802-860-4458; S. Burlington: 802-

862-6610; Essex: 802-878-7885

Community Hospitals

inpatient and outpatient services, including primary, specialty, and surgical care

Brattleboro Memorial Hospital

service area: southeastern VT including

Windham and Windsor Counties

802-257-0341 bmhvt.org

Central Vermont Medical Center

service area: central VT including Lamoille,

Washington, and Orange Counties

802-371-4100 cvmc.org

Copley Hospital

service area: north central VT including Lamoille, Orleans, and Caledonia Counties

802-888-8888 | copleyvt.org

Gifford Medical Center

service area: south central VT including Washington, Orange, Windsor, and Rutland Counties

802-728-7000 giffordhealthcare.org

Grace Cottage Hospital

service area: southeastern VT including

Windham and Windsor Counties

802-365-7357 info@gracecottage.org

gracecottage.org

Mt. Ascutney Hospital and Health Center

service area: Windsor County

802-674-6711

mtascutneyhospital.org

North Country Hospital

service area: northern VT including Orleans,

Essex, and Franklin Counties

802-334-7331 nchsi.org

Northwestern Medical Center

service area: northwestern VT including

Franklin and Grand Isle Counties

802-524-5911

northwesternmedicalcenter.org

Northeastern VT Regional Hospital

service area: northeastern VT including Caledonia, Essex, and Orleans Counties

802-748-8141 nvrh.org

Porter Medical Center

service area: Addison County 802-388-4701 | portermedical.org

Rutland Regional Medical Center

service area: Rutland County

802-775-7111 rrmc.org

Southwestern VT Medical Center

service area: southern VT including Bennington and Windham Counties 802-442-6361 | syhealthcare.org

Springfield Hospital

service area: Windsor County

802-885-2151 springfieldhospital.org

Other Hospitals

Albany (NY) Medical Center

service area: Statewide 518–262–3125 | <u>amc.edu</u>

Academic medical center (connected to the Albany Medical College) with a Level 1 trauma center. Provides inpatient and outpatient services, including primary, specialty, subspecialty, and surgical care at a tertiary (highly complex) level. Part of Albany Med, which is affiliated with Columbia Memorial Health and Saratoga Hospital.

Dartmouth-Hitchcock Medical Center

service area: Statewide

603-650-5000 | dartmouth-hitchcock.org Academic medical center (connected to Dartmouth's Geisel School of Medicine) with a Level 1 trauma center. Provides inpatient and outpatient services, including primary, specialty, subspecialty, and surgical care at a tertiary (highly complex) level.

University of Vermont Medical Center

service area: western VT including Chittenden, Grand Isle, Franklin, and Addison Counties 802-847-0000 | uvmhealth.org/MedCenter Academic medical center (connected to UVM College of Medicine) with a Level 1 trauma center. Provides inpatient and outpatient services, including primary, specialty, subspecialty, and surgical care at a tertiary (highly complex) level. Part of the UVM Health Network.

VA Medical and Regional Office Center

service area: Statewide

White River Junction Hospital: 802–295–9363 or 1–866–687–8387; CRISIS Line: 1–800–273–8255 (press 1); Bennington clinic: 802– 440–3300; Brattleboro clinic: 802–251–2200; Burlington clinic: 802–657–7000; Newport clinic: 802–624–2400; Rutland clinic: 802–772–2300

whiteriver.va.gov

medical center delivering health care services including primary, specialty, psychiatry, and surgical care to eligible veterans in Vermont and New Hampshire

Designated Mental Health Agencies

outpatient mental health, counseling, psychiatry, substance abuse, youth and family services

Counseling Service of Addison County

service area: Addison County

802-388-6751;

Crisis Support: 802-388-7641 csac-vt.org

Health Care and Rehabilitation Services of Southeastern Vermont

service area: Windham and Windsor Counties Crisis: 800–622–4235; Intake: 855–220–9429

hcrs.org

Howard Center

service area: Chittenden County 802–488–6000; Crisis: 802–488–7777

howardcenter.org

Lamoille County Mental Health Services

service area: Lamoille County Crisis: 802–888–5026 (M-F) or

802-888-8888 (nights and weekends)

lamoille.org

Northeast Kingdom Human Services

service area: Caledonia, Essex, and Orleans

Counties

Urgent: 802-334-6744; Derby:

802-334-6744; St. Johsbury: 802-748-3181

nkhs.org

Northwestern Counseling and Support Services

services
service area: Franklin and Grand Isle Counties

802-524-6554; Crisis: 1-800-834-7793

(toll free in VT) ncssinc.org

Rutland Mental Health Services

service area: Rutland County

802-775-2381; Crisis: 802-775-1000

rmhsccn.org

United Counseling Service

service area: Bennington County; Immediate assistance: 802-442-5491

Bennington: 802-442-5491

Northshire: 802-362-3950 ucsvt.org

Upper Valley Services

service area: Orange County

Moretown: 802-496-7830; Bradford: 802-

222-9235; Randolph: 802-728-4476

moretown@uvs-vt.org; bradford@uvs-vt.org;

randolph@uvs-vt.org uvs-vt.org

Washington County Mental Health Services

service area: Washington County 802-229-1399; Crisis: 802-229-0591

wcmhs.org

ALS Association-Northern N. E. Chapter

service area: northern New England,

including VT, NH, and ME

866-257-6663 | webnne.alsa.org

supports people living with ALS and their loved ones through services and education in Vermont, New Hampshire and Maine

Alzheimer's Association-VT Chapter

service area: Statewide

1-800-272-3900 | alz.org/vermont support, education, training and other resources to increase knowledge and to support those facing Alzheimer's disease and other dementias

American Parkinson Disease Association-Vermont Chapter

service area: Statewide

802-847-3366

apdavermont@apdaparkinson.org apdaparkinson.org/community/vermont

coordinates support groups; funds patient aid grants; supports exercise classes; offers a lending library of books and videos

Bayada

service area: southern VT (including

Bennington, Rutland, Windham, and Windsor Counties), Orange County, and Chittenden

County

1-888-833-5706 bayada.com

home health, hospice, rehabilitation, in home care, pediatrics, adult and private nursing, adult Medicare nursing

Brattleboro Retreat

service area: Statewide

802-258-3737 or 1-800-RETREAT

brattlebororetreat.org

specialty hospital offering outpatient and inpatient/residential mental health and addiction treatment services for children, adolescents, and adults

Division for the Blind and Visually Impaired

service area: Statewide

802-289-0334 | dbvi.vermont.gov

designated state unit to provide vocational rehabilitation and independent living services to eligible Vermonters who are blind and visually impaired

National Alliance on Mental Illness

service area: Statewide

1-800-639-6480; Helpline: 1-800-950-NAMI

Crisis text: text "NAMI" to 741741 info@namivt.org | namivt.org

education programs for individuals and families; advocacy on public policy; helpline to provide information and support; public awarness events and activities

National Multiple Sclerosis Society-Greater New England Chapter

service area: Statewide

1-800-344-4867 nationalmssociety.org

Office of Veterans Affairs

service area: Statewide

802-828-3379 veterans.vermont.gov

benefits and services assistance for veterans

in Vermont

Support and Services at Home (SASH)

service area: Statewide

802-863-2224 sash@cathedralsquare.org

sashvt.org

home based service coordination, care coordination, wellness support

Vermont Association of Area Agencies on Aging

service area: Statewide Helpline: 1–800–642–5119

vermont4a.org

association representing area agencies on aging; hosts senior helpline; oversees SHIP program; advocates on behalf of elder issues

Vermont Association for the Blind and Visually Impaired

service area: Statewide

S. Burlington: 1-800-639-5861; Berlin: 802-505-5006, Brattleboro: 802-254-8761;

Rutland; 802-775-6452

general@vabvi.org vabvi.org

assistance for people with visual impairments including orientation; transportation; adaptive equipment training; technology training; peer assisted learning; and vision services

Vermont Department of Health

service area: Statewide

802-863-7200 healthvermont.gov

government department that oversees public

health and prevention

Vermont Foodbank

service area: Statewide

1-800-585-2265 | <u>info@vtfoodbank.org</u>

vtfoodbank.org

distributes CSFP, supports food pantries and meal sites, 3Squares application assistance, food gleaning, volunteer opportunities

VNAs of Vermont

Nonprofit Home Health and Hospice Agencies

service area: Statewide

802-229-0579 info@vnavt.org

vnavt.org

home health, hospice, rehabilitation, in home care, pediatrics, adult and private nursing, adult medicare nursing



AARP-Vermont Chapter

service area: Statewide

1-866-227-7451 states.aarp.org/vermont member organization that provides education about issues related to aging; policy and legislative advocacy on member-defined issues

Associates for Training and Development

service area: Statewide

802-524-3200 info@a4td.org a4td.org for job seekers 55+: work-based job training, career counseling, internship matching, computer and job skills training

PRIDE Center

service area: Statewide

802-860-7812 | info@pridecentervt.org

pridecentervt.org

LGBTQ safespace, transgender supports, community education and advocacy, and network group for LGBTQ+ people who are over 40

Vermont Association of Senior Centers and Meal Providers

service area: Statewide

 $\underline{djones@thompsonseniorcenter.org} \ or \\$

jclar@montpelier-vt.org

facebook.com/vermontseniorcenters

association representing senior centers across the state



safety & protection

Adult Protective Services-Division of Licensing and Protection (DLP)

service area: Statewide DLP: 802-241-0344;

APS Report line: 1-800-564-1612

dlp.vermont.gov/aps

investigates reports of abuse, neglect, or exploitation of a vulnerable adult

Department of Financial Regulation

service area: Statewide

802-828-3301 or 1-833-337-4685 (toll free)

dfr.vermont.gov

protects consumers against unfair and unlawful business practices in the areas of banking, securities (investments), insurance, and captive insurance; responds to reports of fraud or scams in these areas

Office of the Vermont Attorney General

service area: Statewide

802-828-3171 ago.vermont.gov

protects VT citizens; enforces laws of the State of Vermont; defends VT laws, policies, and employees

Survey and Certification-Division of Licensing and Protection (DLP)

service area: Statewide DLP: 802-241-0344

Healthcare Organization Complaint Report Line: 1-888-700-5330 | <u>dlp.vermont.gov</u> licenses and certifies certain health care facilities and providers; investigates reports of inappropriate practices

Vermont 2-1-1

service area: Statewide 2-1-1 vermont211.org

information and referral for supports and services including, but not limited to, homelessness, food access, safety, fuel assistance, benefits, legal services, scam reporting, health care providers

Vermont Network Against Domestic and Sexual Violence

service area: Statewide

802-223-1302 vtnetwork@vtnetwork.org

vtnetwork.org

domestic and sexual violence advocacy

Victims Compensation Program

service area: Statewide

802-241-1250 <u>ccvs.vermont.gov</u>

provides financial assistance to eligible

victims of crime

VT Senior Medicare Patrol

service area: Statewide

802-229-4731 or 1-888-865-2683

vermontelders.org/vt_smp/

supports Medicare beneficiaries to identify and address billing errors and Medicare fraud and abuse



Community Action Organizations

assistance for community members, including emergency food help, fuel and utility assistance, Head Start, housing assistance, income tax assistance, information and referral, and training

BROC-Community Action in Southwestern Vermont

service area: southwestern VT including Rutland and Bennington Counties

Rutland: 802–775–0878 or 1–800–717–2762 Bennington: 802–447–7515 | broc.org

Capstone Community Action

service area: central VT including Lamoille,

Washington, and Orange Counties

Barre: 802-479-1053; Bradford: 802-222-

5419; Morrisville: 802-888-7993;

Randolph: 802-728-9506 capstonevt.org

Champlain Valley Office of Economic Opportunity (CVOEO)

service area: western VT including

Chittenden, Grand Isle, Franklin, and Addison

Counties

Burlington: 802-862-2771; Addison: 802-388-

2285; Chittenden: 802-863-6248; Franklin/Grand Isle: 802-527-7392

cvoeo.org

Northeast Kingdom Community Action (NEKCA)

service area: northeastern VT including Caledonia, Essex, and Orleans Counties Newport: 802–334–7316; Canaan: 802– 266–7134; Island Pond: 802–723–5276; St. Johnsbury: 802–748–6040 | nekcavt.org

Southeastern Vermont Community Action (SEVCA)

service area: southeastern VT including

Windham and Windsor Counties

Westminster: 802-722-4575; Brattleboro: 802-254-2795; Springfield: 802-885-6153; White

River Junction: 802-295-5215

sevca.org

Transit Providers

local and regional bus and transit provider

Addison County Transit

service area: Addison County 802-388-1946 | actr-vt.org

Advance Transit

service area: upper valley (including Orange and Windsor Counties and New Hampshire) 802-295-1824 advancetransit.com

Green Mountain Transit

service area: Franklin, Chittenden, Lamoille,

and Washington Counties

1-866-864-0211 (toll free) | ridegmt.com

Green Moutain Community Network

service area: Bennington County 802-447-0477 | greenmtncn.org

Marble Valley Regional Transit District

service area: Rutland and northern

Bennington Counties

802-773-3244 | thebus.com

Rural Community Transportation

service area: Lamoille, Caledonia, Orleans, Essex, and part of Washington Counties

802-748-8170 | riderct.org

Southeast Vermont Transit-The Current **Division**

service area: southeastern VT including Windham and Windsor Counties 1-888-869-6287 crtransit.org

Southeast Vermont Transit-The Moover **Division**

service area: southeastern VT including Windham and Windsor Counties 802-464-8487 moover.com

Stagecoach Transportation Services

service area: northern Windsor and Orange

Counties

802-728-3773 stagecoach-rides.org

Benefits Service Center-Economic Services Division

service area: Statewide

1-800-479-6151 dcf.vermont.gov/esd state administered benefits to help Vermonters meet basic needs, such as 3SquaresVT (SNAP or food stamps), Essential Person, Fuel

Assistance, Reach Up

Cathedral Square Senior Living

service area: Chittenden County 802-863-3868 | cathedralsquare.org/ property/cathedral-square-senior-living/ independent living, assisted living, memory care, enhanced residential care, low income and voucher eligibility, SASH services

Efficiency Vermont

service area: statewide

1-888-921-5990

info@efficiencyvermont.com efficiencyvermont.com

provides advice, technical services, and fincancial support to improve household efficiencies, including electrical, solar, appliance, water, weatherization, and fuel

HomeShare Vermont

service area: central and northwestern VT (including Chittenden, Grand Isle, Franklin, Addison, Washington, Lamoille, and Orange Counties)

802-863-5625

info@homesharevermont.org homesharevermont.org

facilitates homesharing by screening, matching, interviewing, mediating, and providing ongoing support to both parties; can help find caregiving services as well

Support and Services at Home (SASH)

service area: Statewide

802-863-2224

sashvt.org | sash@cathedralsquare.org

home based service coordination, care

coordination, wellness support

Vermont State Housing Authority

service area: Statewide

802-828-3295 www.vsha.org

affordable and emergency housing assistance; Section 8 vouchers; rental

assistance



family caregivers

Vermont Kin As Parents (VKAP)

service area: Statewide

802-871-5104

secretary@vermontkinasparents.org vermontkinasparents.org

provides support to relatives raising children, including application assistance, service navigation, respite applications, support groups, and more

See also Area Agencies on Aging on page 76

University of Vermont Center on Aging

service area: Statewide

802-656-0292

med.uvm.edu/centeronaging/home

supports geriatric and gerontology education at University of Vermont; facilitates collaboration among investigators conducting aging-related research; engages academic institutions to address policy; coordinates Memory Cafe support groups

Vermont Association of the Deaf

service area: Statewide

802-858-2323

admin@deafvermont.com

<u>deafvermont.com</u>

supports deaf individuals and their families through community outreach, advocacy for equal opportunities, and education

Vermont Center for Crime Victim Services

service area: Statewide

802-241-1250 ccvs.vermont.gov

supports crime victims in Vermont with financial compensation, sexual assault assistance, victim assistance, and restitution



Community of Vermont Elders (COVE)

service area: Statewide

802-229-4731 | cove@vermontelders.org

vermontelders.org

education, advocacy on behalf of older Vermonters; policy advisors on elder issues;

Medicare fraud; victim services

Disability Rights Vermont

service area: Statewide

802-229-1355 info@disabilityrightsvt.org

disabilityrightsvt.org

information, support, and referrals for people with disabilites; Advance Directive assistance; advocacy and legal representation for individuals with a disability

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