

Orlando

August || September || 2009

# WE CARE

TM

Caring for others, ourselves and the environment



**The New Age of  
Medical Equipment** p. 13

**Medicare Myths** p. 23

## Accessible Homes *for* ALL AGES

**How the Caregiver and  
Building Industries will Unite**

**In an emergency,  
Information saves lives.**

A **911 PREP Kit**™ is an information kit designed for medical emergencies, to make sure all medical professionals have the information they need to give you the best care possible.

**BE PREPARED FOR A 911 MEDICAL EMERGENCY PREP KIT**

A **911 PREP Kit**™ ...  
 ..could save the life of you or a loved one.  
 ..saves critical time in an emergency.  
 ..helps to avoid medical error.  
 ..speaks for you when you cannot.

3 copies of your medical history, on-hand for EMS, Emergency Room and Admit Nurse.



4 kits to choose from. See them all online at [www.911prepkit.com](http://www.911prepkit.com). or call 407-951-7665.

# Easy Accessible Living is for Everyone



Health Care Providers  
 Caregivers  
 Seniors  
 Veterans  
 Personnel Injury Attorneys  
 Accident Victims

## Accessibility is more than a wheelchair ramp

Traditional home builders have never really considered the needs of those who have limited physical capabilities. These limited capabilities can make daily activities really difficult. We understand these difficulties and provide "Accessibility" solutions to make a safer and more comfortable home for everyone to enjoy.

### Exteriors

- Home Additions
- Wheelchair Ramps
- Curb & Entry Ramps
- Walkways
- Step Free Entry

- Entrance Doors
- Windows
- Door Re-sizing
- Security Lighting
- Alarms

### Interiors

- Room Expansion
- Accessible Kitchens
- Reposition Electrical
- Retrofit Plumbing
- Elevators/Stair Lifts

- Transportation Systems
- Pedestal Sinks
- Handrails & Grab Bars
- Roll-in Shower Rooms
- Tub & Shower Seats

*The Southeast's Premier Construction Consultant for Additions & Accessible Home Renovations*



**Bill Lynch**  
 General Contractor  
 FL License RG# 0000325

Statewide Service in Florida  
 Call for Courtesy Consultation  
 407-830-4902

CAPS-Contractor.com  
 Certified Aging-in-Place Specialist

BY BRIAN PINSKER

Whether you are entrusted with the care of a loved one, looking for the latest information on health and fitness or want to lessen your carbon footprint, *We Care Magazine* has something for you.

*In this inaugural issue*, we have focused mainly on giving caregivers information on the latest goods and services available to the physically challenged, the latest treatments for the emotionally challenged, and information for the caregiver to make his or her chore easier.

*In subsequent issues*, if your interest is health and fitness you will also find tips on healthy eating and exercise — information that will help you feel your best. We will also explore ways you can lessen your carbon footprint with information on energy efficiency, and ways to make your home environmentally friendly.

*As a former caregiver*, I believe caring for others, for ourselves, and for the environment are seamlessly intertwined and demonstrate our commitment to one another and to the land God gave us.

BRIAN PINSKER  
Publisher  
*We Care Magazine*

## CONTENTS

Cover photo by Cat Taylor,  
Cathe Taylor Photography.

Aug | Sept 2009  
VOL. 1 NO. 1

WE CARE

## FEATURES

### 15 A New Home, A New Beginning

Step into a prototype accessible way of living that will change the way homes are built in the near future.

By Kevin Fritz

### 21 Stressed? Let Journaling Help

If care giving is stressing you out, write all about it. It will do you wonders.

By B. Lynn Goodwin

### 23 Medicare Myths: Learning the Rules Before the Time Comes

Don't wait until the last minute to know what role Medicare will play for you or your loved ones.

By Kevin Fritz



## DEPARTMENTS

### 7 Special Needs

Learn how people with Down syndrome are living much more productive lives these days, and the myriad of services available to them.

### 9 Adult Health Care

A new procedure could say goodbye to your back pain – for good.

### 11 Innovations

These are not your grandfather's hearing aids. New innovations help eliminate the social disconnect faced by those with hearing loss.

### 12 In the Community

The Jewish Pavilion can help make life easier for both caregivers and those requiring care.

### 13 Equipment

Orlando DME experts aim to change the face of medical equipment – from scary to decorative.



## NEWS

### 25

We Care Lake County raises \$10,000 at first-ever golf tournament.

## RESOURCES

### 27

*We Care Magazine* has compiled a list of resources that can help you get involved, get answers, and get smarter.

MANAGING EDITOR KEVIN FRITZ  
EDITORIAL ASSISTANT LISA MCDUFFIE  
PUBLISHER BRIAN PINSKER  
ADVERTISING SALES TEAM RICH O'BRIAN  
JANELLE HIGOY  
HEATHER MARTYNSKI  
RYAN SHEPHARD  
DESIGNER NATHAN MORGAN

CONTRIBUTING WRITERS  
AMY VAN BERGEN  
STEPHEN R. GOLL  
B. LYNN GOODWIN  
MELISSA S. RIESS  
LINDA SCHIFFER

CONTRIBUTING PHOTOGRAPHER  
CAT TAYLOR

**Advertising Policy:** Advertising in *We Care Magazine* - Orlando does not imply editorial endorsement.

©Copyright 2009 Go Media Group. All copyright privileges are reserved by the publisher.

GO  
mediagroup

1360 Chessington Circle  
Heathrow, FL 32746

phone: 407-444-9974  
email: gomedialp@gmail.com

## In-Home Accessibility Challenges

Rapidly changing demographics over the next 15 years will bring dramatic changes and increasing numbers of aging and accessibly challenged persons into the general population

with in-home accessibility needs. Population studies predict the non-senior ratio to drop from today's 8:1 to 5:1 by 2025. This change will be accompanied by a dramatic increase in the need for educated and qualified health care providers to work in conjunction with talented and experienced CAPS (Certified Aging-In-Place Specialist) contractors. These contractors can significantly serve the needs of accessibility challenged individuals, so they can choose to remain in their homes, safely.

With the health care setting moving from the clinical setting to the home, accessibly challenged individuals need to be able to rely on contractors who are qualified to make the interior and exterior changes that may be required to their existing properties. It makes sense to have a contractor certification process allowing for proper aging-in-place improvements to be implemented. CAPS contractors can provide home renovations that allow accessible living to take place in the home using equipment and construction technologies so the client can have a better and enhanced accessible life style.

The CAPS designation program teaches the technical,

business management, and customer service skills essential to accommodate one of the fastest growing segments in our population. In collaboration with the AARP, National Association of Home Builders (NAHB) Research Center, and NAHB Seniors Housing Council, the NAHB Remodelers™ developed this program to provide comprehensive knowledge to solve the remodeling needs of the aging-in-place population.

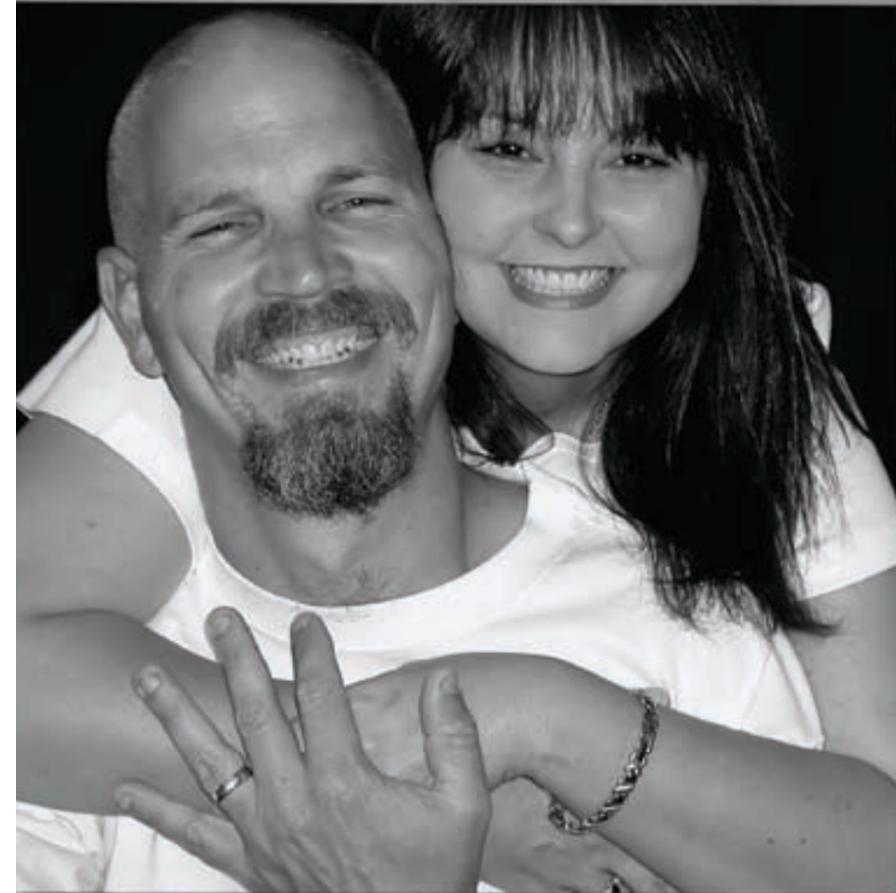
An additional benefit that arose from this certification is that the skills acquired can also be used to provide an assessment and subsequent renovations to accommodate the specific needs of those other than the elderly and physically challenged such as accident victims or injured veterans.

Bill Lynch, located in Winter Park, Fla., holds the CAPS designation, and is a state of Florida licensed general contractor who in his 47-year professional career, has built all manner of residential and commercial buildings. According to Bill, his CAPS certifications have given him a magnified insight into the world of inaccessibility so he can carefully analyze each case on an individual basis and offer interior and exterior

modifications and renovations that specifically address the person's accessibility needs. He says many people do not realize one size does not fit all when renovating for a disability. His extensive background and certifications allows him to assess exactly what needs to be done in order to make the home suitable for long-term quality living.

He also emphasizes that one must exercise great caution before having any type of remodeling or construction work done. He's been around long enough to know. He began his career in 1961 and subsequently acquired one of the earliest licenses ever issued, RG#0000325. Over the years he's found that far too often, unlicensed "handymen" have done work that has not adhered to quality building standards. Therefore, he strongly suggests that prior to hiring anyone, you first verify he or she has a bona fide and current registered or certified contractor's license. In Florida, you can call the Department of Professional Regulation to check any professional's license status. Additionally, for any accessible living projects in your future, hire only licensed contractors who have the CAPS designation. ■

**Next month** Bill Lynch will address the pitfalls of hiring an unlicensed person to do your construction projects and the potential legal liabilities and fines that fall upon the homeowner who does so. *This is a paid advertorial by Bill Lynch, a Florida licensed contractor located in Winter Park, Florida.*



*Cathie Taylor*  
PHOTOGRAPHY

**LIFESTYLE PORTRAITURE**

**NATURE PHOTOGRAPHY**

**MATERNITY**

**WEDDINGS**

*photo journalistic style*

**DOCUMENTARY**

*births, funerals, stages of life  
and memorable events*

WHERE PHOTOGRAPHY BECOMES ART

To schedule your unique session, please visit

[www.cathetaylor.com](http://www.cathetaylor.com)



BY AMY VAN BERGEN

## SPECIAL NEEDS

# Reach Out to a Community of Support

HERE'S THE GOOD NEWS about Down syndrome: People with Down syndrome are leading longer and healthier lives than anyone ever thought possible. In fact, in 1980 average life

expectancy was only 25 years, and today it is 57 and rising.

Parents, who were thought to outlive their children with Down syndrome, no longer are in that position. So it is common at our local support organization, the Down Syndrome Association of Central Florida (DSACF), to receive phone calls from adult siblings that go something like this:

"Hi, my elderly mother just passed away, [or is in the hospital] and I now have my 33-year-old brother Juan living with me and my wife. But we have two young kids. Is there a program he can attend or some kind of care giving or respite services?"

In addition to changing the entire family dynamics, these new caregivers and family members need immediate help and information. And again, that's where an organization like the DSACF comes in.

Orlando resident Michael Helms knows all about it. When he was only 27 years old, his then 22-year-old brother, Daniel Sahm, who has Down syndrome, came to visit for his birthday. Michael quickly realized that Daniel was not being adequately cared for by their mentally ill mother and made the decision to keep his brother with him.

"I really relied on the resources of DSACF in the early days, connecting with other families in similar positions, and getting Daniel involved in the Teen Talk program and the Buddy Walk. In fact, Daniel still has the photo of him leading the Buddy Walk and is really proud of that," Michael says.

Michael quickly went from being a free-and-easy bachelor, living on Ramen noodles and traveling with friends whenever he wanted, to

Michael quickly went from being a free-and-easy bachelor, living on Ramen noodles and traveling with friends to a full-time caregiver.

a full-time caregiver. He adds: "I thought since we had grown up together, it would be slam-dunk easy, but even though Daniel was 22, I was dealing with a mentality of about 15-to 16-years-old, and I

had to remind him to take a shower and take his medicine. I had to start cooking nutritious meals and make sure there was food in the cupboard."

In addition to making significant lifestyle changes, including moving into a larger apartment, Michael had to figure out which state agencies offered services for people with developmental disabilities.

The DSACF helps people like Michael

Helms and his brother Daniel navigate the systems and connects them with a whole community of support.

In addition to serving as a resource and referral entity for hundreds of families facing issues, the DSACF's mission is to serve as the leading voice for individuals

with Down syndrome and to offer hope, encouragement and acceptance through advocacy, education and awareness.

Some of the ways the DSACF fulfills this mission are:

1. Distributing new-parent information packets to hospitals and physicians.
2. Offering parent-to-parent mentors.
3. Hosting an annual free medical clinic, "Special Clinic for Special People," co-sponsored by the Howard Phillips Center for Children & Families, an affiliate of Arnold Palmer Hospital. More than 1,000 children and adults have received free screening services from specialists in the past 15 years.
4. Providing local experts at monthly support meetings.
5. Sponsoring a statewide conference for families, individuals with Down syndrome, and the professionals who serve them.
6. Honoring local individuals and businesses that go above and beyond supporting people with developmental disabilities.
7. Supporting and advocating with and for families in school meetings.

8. Advocating for laws that promote the inclusion, acceptance and empowerment of individuals with Down syndrome and other disabilities.

9. Offering programs targeted to specific age groups: teen/adult social skills classes, toilet training workshops for parents of young children, educational rights seminars for parents and professionals, etc.

There are many aspects to being the caregiver for a loved one with Down syndrome. And whether that journey begins with a diagnosis during pregnancy or decades later as siblings and others step up to the caregiver plate, the DSACF is there to help. Daniel's brother Michael says: "There has never been any turning back, and I wouldn't change it for the world...but it was definitely an eye-opening experience, and it was amazing that I was able to tap into the resources of the DSACF right away."

For more information about the DSACF or its programs and services, please visit [www.dsacf.org](http://www.dsacf.org) or call 407-478-5621. WC

AMY VAN BERGEN is executive director of the Down Syndrome Association of Central Florida.

Discover the Difference.

G. Grady McBride, M.D.  
 Jeffrey P. Rosen, M.D.  
 Craig P. Jones, M.D.  
 Lawrence S. Halperin, M.D.  
 Stephen R. Goll, M.D.  
 Samuel S. Blick, M.D.  
 Alan W. Christensen, M.D.  
 Joseph D. Funk, D.P.M.  
 Tamara A. Topoleski, M.D.  
 Daniel L. Wiernik, D.P.M.  
 Steven E. Weber, D.O.  
 Randy S. Schwartzberg, M.D.  
 Bryan L. Reuss, M.D.  
 Michael D. McCleary, M.D.  
 Eric G. Bonenberger, M.D.  
 Daniel M. Frohwein, M.D.

5 locations throughout Central Florida:  
 •Downtown Orlando  
 •Winter Park  
 •Sand Lake  
 •Longwood  
 •Oviedo

407-254-2500 [www.orlandoortho.com](http://www.orlandoortho.com)

Orlando Orthopaedic Center



BY STEPHEN R. GOLL, M.D.

## || ADULT HEALTH CARE

### Got Back Pain? Here's Some Relief

IF YOU HAVE LOWER BACK PAIN, you are not alone. Every year, 40 to 60 percent of American adults suffer from chronic back pain. Nearly everyone at some point has back pain that

interferes with work, routine daily activities, or recreation. Americans spend at least \$50 billion each year on lower back pain, the most common cause of job-related disability and a leading contributor to missed work, and back pain is the second most common orthopedic ailment in the United States. While most occurrences of lower back pain go away within a few days, others take much longer to resolve and can lead to more serious conditions, possibly requiring surgery.

More than one million spine surgery procedures are performed annually in the United States. There are many surgical techniques available to treat spinal conditions such as degenerative disc disease, scoliosis, spondylolisthesis, or spinal fracture. One of the more common surgical treatments offered to patients is lumbar spinal fusion. A new minimally invasive approach to spinal fusion called AxiaLIF enables surgeons to perform lumbar fusion surgery without the major dissections of the surrounding spinal soft tissue. In a short period of time, AxiaLIF has demonstrated a change in the way spinal fusion surgeries are performed while revolutionizing patient care by dramatically reducing recovery time.

AxiaLIF is short for Axial Lumbar Interbody Fusion. "Axial" means that the procedure is performed along an axis perpendicular to the disc through which a lumbar interbody spinal fusion is performed (causing two vertebral bodies to grow together) from an anterior approach. The AxiaLIF system employs a novel approach to accessing the lowest level of the lumbar spine through a percutaneous opening via the sacral bone. The technique is performed through a two centimeter skin incision, through which specially designed instrumentation is inserted to conduct the procedure.

Americans spend at least \$50 billion each year on lower back pain.

Operative time is under an hour, compared to nearly three hours with conventional fusion surgery. Reduced surgical trauma, less blood loss and shorter operative time means

the patient will experience faster recovery. This procedure allows patients to be discharged from the hospital the day after surgery and on average return to work in 15 days. This is a

dramatic reduction in hospital lengths of stay, which can otherwise run three to four nights, followed by a one- to two-month recovery period before returning to work. Occasionally, AxiaLIF can be performed on an out-patient basis.

The AxiaLIF procedure is estimated to be less costly than open surgeries. The main savings are in the dramatic decrease in operating room time, length of stay, less need for post surgical pain medication and more rapid rehabilitation.

DR. STEPHEN R. GOLL, is board certified as a diplomate of the American Board of Orthopaedic Surgery and the American Board of Spinal Surgery. He practices with the Orlando Orthopaedic Center, specializing in Cervical & Lumbar Spine Surgery and Adult Spinal Reconstruction.

THANK YOU for everyone involved making this venture a SUCCESS. We look forward to working with the health care, caregiver and builder communities in the Orlando area as we continue to reach and assist readers and supporters in their daily lives.



ASK US ABOUT WE CARE Los Angeles COMING THIS WINTER!

# Help us grow!

For editorial guidelines, contact Kevin Fritz at (321) 662-8191

For advertising support, contact Brian Pinsker at (407) 444-9974

email: orlando@wecaremagazine.com



BY MELISSA S. RIESS, A.U.D.

|| INNOVATIONS

## Opening up a World of Possibilities

FEELING “UNCONNECTED” WITH FAMILY, friends, colleagues and many essential conveniences of modern life such as cell phones and television is a concern voiced by many people.

Family members see the disconnect and want more than anything to know that their family member is safe and enjoying life to the fullest extent.

The truth is, even a mild hearing loss can make it challenging to distinguish speech and other sounds in the environment. The result is that people with untreated hearing loss often end up feeling flawed and isolated.

All the technology in the world will not replace human relationships or contact, but it can help connect people like never before. Many people who have resisted hearing aids in the past because of outdated stigmas associated with hearing loss can now respond positively to the new devices that are available. Patients are amazed at the good looks and are relieved that it isn't the big beige hearing aid they feared. I advise patients not to think that the newer hearing solution's light, comfortable fit make it a 'lightweight' when it comes to delivering a closer-to-natural listening experience. Many of the new hearing devices actually 'talk' to each other, simulating the way the brain naturally processes sounds coming from different directions.

In today's society, many families are spread across the country, and phone communication can be the only way for loved ones to communicate on a regular basis. What is most amazing is the new hearing solutions allow easy use of both landline and cellular phones — hands free! This makes it possible to have a normal conversation on the phone, which is something that is difficult for people with hearing loss. Users are able to wirelessly connect to landlines and cell phones at the touch of a button. When the phone rings, patients simply press a button to receive the phone call in both ears, which is digitally processed to accommodate the user's individual hearing loss.

Many of the new hearing devices actually 'talk' to each other.

With a TV adaptor, a user can set the volume to their preferred level so TV viewing can once again be enjoyed together as a group activity. Patients can now understand television audio from

anywhere in the room without disturbing others. Indeed, it is widely known that turning up the volume on the television does not always result in better understanding, but streaming television audio through digitally programmed hearing aids can result in better understanding.

Many people initially believe they cannot work with the technology, but the systems are set up and programmed by the audiologist in the office, and the patient is immediately ready to experience the technology, literally with just the push of a button. Families should be sure to find an audiologist who can spend time to learn more about the immediate needs of the patient and then introduce solutions that will reconnect families. [WC](#)

DR. MELISSA RIESS is the founder of Hearing Associates of Central Florida and is a recognized AudNet audiologist in Central Florida. She received her Doctorate Degree in Audiology from the University of Florida and holds a Certification of Clinical Competence from the American Speech Language and Hearing Association.

BY LINDA SCHIFFER

|| IN THE COMMUNITY ||

## Past, Present and Future

IT IS DIFFICULT TO BELIEVE that the person sitting in the chair reading a book is the same person who, but a few short years ago, was still actively shopping, going to movies, and dining out.

I am taken aback each time I walk into my mother's room at the nursing home. The face is the same, older (she is now 88) yet still not wrinkled. The hair is gray and thinner than I remember it. The chemotherapy helped

do that. It was silver and thick before her second bout with cancer. The figure is that of my grandmother, her mother, a matron at 50. When I think back over the years, the most prevalent person in my life is my mother. The image of Pearl Schiffer that keeps coming back is the dynamite powerhouse whose presence demanded attention: a beautiful woman who turned heads when walking down any New York City street; a married woman raising two daughters while working for charities; a woman who could speak to hundreds of other women in a convention room and leave them all breathless. She was a vice president, fund-raiser, educator, spokesperson, and chairperson

The most prevalent person in my life is my mother.

for many organizations throughout her life. She was a whirlwind dynamo who shook hands with many of government's greats and could cook like a professional chef.

Several years ago, after my father passed away, my mother began to show signs of slowing down. Her energy lagged, and she was diagnosed with a heart condition. Moving to Florida to be near family and friends did not help her heart, but the angina took a back seat to a new battle, breast cancer. She fought through that the way she fought through everything else — with humor and dignity. She's been through three bouts with the disease to date.

It became increasingly difficult to take care of her when she suddenly began showing signs of personality swings and extreme forgetfulness. She would not eat and slept continuously. Diagnosed with Alzheimer's, as though the cancer and the heart condition were not enough, she deteriorated quickly. After almost four years of continual downside, it was necessary to seek professional help. My sister and I cried for weeks over the agonizing decision, but it was one that was best for mom.

In Vitas hospice care now, and with the Jewish Pavilion backing them up with visits and time spent just chatting, mom is blessed with a team of compassionate people who are there when my sister and I cannot be. She can discuss her past vividly with the Pavilion's Nancy Ludin and her son, Evan, though she can't recall that she had a brother or who just phoned her. Dolores and Carol of Vitas gab away with her. She still has her sense of humor. The nurses call her Miss Pearl, and it tickles her.

We have no idea how much time is left for my mother, but we know she will leave us smiling and that we did the best we could for her. [WC](#)

LINDA SCHIFFER has written several articles for magazines, trade publications and newspapers and is currently authoring two books. She is the former public relations attache for the Government of India Tourism Office and is currently a marketing and public relations consultant.



BY KEVIN FRITZ

## || EQUIPMENT

# Putting a New Face on Medical Equipment

LINDA ROLF KNOWS that with the aging baby boomer population, the need for medical equipment will grow expeditiously. But as owner of Quest Medical Outfitters, she's

not satisfied with simply the bottom line. She is on a crusade to change the face of DME, otherwise known as durable medical equipment. In fact, she would even change the acronym if given the chance.

"People get uncomfortable when they see it," she says about the walkers and commodes and grab bars that haven't really changed in decades. "It's unappealing and can be frightening."



Her goal is to change that unpleasant and medicinal feel of current DME by pushing for equipment that exudes a more comfortable appearance. She admits it is a challenge, since the industry has been slow to reacting to this vision, but things are happening. She notes that Moen, for example, is already marketing grab bars that can match a home's décor.

For starters, Rolf will showcase her ideas in her own showroom, which is being renovated to house a mock-up bedroom and bathroom so she can display how medical equipment can be integrated into the home without looking clinical.

"Surely we can do better," she believes. "It does not have to look ugly."

These are ideas that come more freely to Rolf since she has immersed herself into the educational aspects of aging-in-place and accessible-for-all homes. She recently received her CAPS (Certified Aging-in-Place Specialist) certification from the National Association of Home Builders. It's a move in the building industry to get the medical and building industries to the table and inspire homes in which people can be mobile and feel more comfortable, whether they are injured or afflicted at a young age, experienced a serious accident in their 40s, or need elderly care.

"We have to have their trust," she says, "and we already know their needs. They want to live in their homes longer."

Her idea is to adapt DME to



better coordinate with the space of the user. She says that may include a nice headboard on a hospital bed or creating lifestyle changes for the patient's room, such as a big face clock or larger playing cards.

"We want to target the caregiver, too," she adds. "Not just the end user."

Rolf, who started Quest Medical Outfitters in 2000 with son, Jason Kenney (both pictured above, left), sells everything from cane tips to custom chairs. Beyond appearance, Kenney notes the equipment is constantly changing with technological innovations that are occurring as people change, medicine advances, and life expectancy increases.

"The more people age, the more you have to adapt," Kenney notes. "Their quality of life has changed, and it's up to us to pick it back up."

Advanced software, for example, is running today's wheelchairs, like the "sip and puff" version used by the late Christopher Reeves. That kind of software

keeps getting "smarter" by learning what to do by the simple actions of the patient.

Kenney says many new wheelchairs are now made of titanium, which are lighter and easier to maneuver. He notes many wheelchair-bound people tend to gain weight, and the lighter chair helps protect against rotator cuff injuries. Some chairs even have sensors in the rims allowing them to propel as far as the patient wishes with one push. WC

KEVIN FRITZ is the editor of *We Care Magazine*.

To find out more information,  
please call Evercare at:  
**1-877-839-7043**  
TTY: 711 for hearing impaired.



[www.EvercareHealthPlans.com](http://www.EvercareHealthPlans.com)

You must have Medicare Parts A and B, and must reside in the service area of the plan. Evercare® Medicare Advantage plans are special needs plans available to all people meeting certain eligibility requirements, such as having both Medical Assistance from the state and Medicare, living in a contracted nursing home, or having a qualifying chronic care condition.

Evercare® Medicare Advantage Plans are offered by United Healthcare Insurance Company and its affiliated companies, Medicare Advantage organizations with a Medicare contract. Limitations, co-payments and coinsurance will apply.

©2009 United HealthCare Services, Inc.

M0011\_080923\_175001 10/08



*A new*  
**Home,**  
*A new*  
**BEGINNING**



*By Kevin Fritz*

PHOTOS BY CAT TAYLOR

**I**t's accessible, it's universal, it's aging-in-place all wrapped into one. It's a home that was the end product of Karen Kassik's belief four years ago that the housing market was poised to begin transitioning from what we consider green and sustainable to accessible for all ages.

And since that epiphany, Kassik, pictured on pages 15-16 in her home with her mother, Kitty, has carefully watched the evolution of such homes, now coined "aging-in-place," which feature components such as wider doorways, non-existent step-ups, roll-in showers, grab bars, and personal lighting and cabinet heights. But what she is still trying to advocate is that these new types of homes are not only better for the elderly needing care, but for anyone raising a family.

"We should not be just focusing on full-blown wheelchair accessible housing, but on making homes more flexible for more age groups," says Kassik, an award-winning designer in Winter Park, Fla., who, after 22 years, is transitioning away from Lucia, Kassik & Monday to put her energy into a new business named Home Accessibilities, a specialty design firm for remodeling projects and new homes.

"These homes are for the elderly, for expectant moms and are safer for children," she explains. "It's for someone in the family who has back surgery or knee surgery. It's good for everyone."



#### Cause and Effect

Sometimes believing in a cause can give rise to paradoxical behavior. People may write a check or make known their beliefs at the water cooler, but becoming directly involved is what usually separates the leaders from the followers.

It's a little different with care giving. How you may feel about personally caring for a family member or friend is irrelevant the day it falls in your lap. Whether it's a parent who needs you to be the parent or a child with Down syndrome, your choice is made for you: You are now a caregiver. Without paying dues or filling out an application, you instantly join one of more than 44.4 million caregivers in the United States, according to AARP. Locally, there are close to 33,000 adults receiving care at home in Orange County, Fla., alone. It's a section of the social stratum that usually lives quietly amongst itself in another world all its own, and one the rest of the population seldom realizes exists.

Seven years ago Karen was thrust into her new role as a caregiver when it became evident her mom could no longer care for herself. Instead of letting the life-changing event get the best of her, Karen took charge.

**LEFT:** The exterior of Karen Kassik's house paints the big picture just as well as the interior: Accessible housing can be beautiful, not medicinal.

**MIDDLE:** A wide open kitchen allows unhindered access for walkers or wheelchairs. **RIGHT:** Dish drawers are a key element to an accessible kitchen.

Since that day when her mother came home from an extended stay at a rehab facility following foot surgery and the role reversal took hold, Karen has helped create the local chapter of the National Aging in Place Council, launched the Home Accessibilities company, and built a new, patient-accessible, aging-in-place home.

Her accessible home, finished in 2005, was really built out of necessity as she realized after six months of caring for Kitty, "this was going to be a permanent situation," and that the two of them living in a 1,300 square-foot, two-bedroom, two-bath home was just not going to cut it. She had given the master suite to her mom, of course, and moved into a 10 x 11 room. As fate would have it, though, she had already bought a lot for investment purposes and had been studying this up-and-coming aging-in-place phenomenon.

"She wasn't chronic enough to be in a nursing home," Karen says, "and assisted living was not an option." She adds that her mom living on her own was also not feasible and neither was maintaining two households. Besides, Karen knew an accessible home would allow her mother to get around unimpeded with her walker, and it would be less worry while she was at work or out running errands. "There is also plenty of room for home

**"In the next five years, production builders will have similar accessible models that people will treasure."**



**ABOVE LEFT:** Kitty Kassik's suite, complete with private porch, allows her to enjoy some independence. **ABOVE RIGHT:** Kitty's bathroom, beautifully appointed yet with accessible-housing features blended into the décor, such as grab bars and a roll-in shower. **RIGHT:** Lever handles make for easy-opening doors.



health care to come in when that time arrives," she notes.

The four-bedroom, three-bath home in Casselberry, Fla., features flush thresholds, wide halls, tile floors, and no carpet or stairs to hinder mobility.

"They asked me before I came home about stairs and getting around," says Kitty. Indeed, case workers now work closely with designers such as Karen to assure the person going home is entering a safe and comfortable environment.

And this home fits that bill. All doors are 36 inches wide with lever hardware for easy access. Kitty has her own suite with a porch for quiet time, and the adjoining

bathroom is enhanced with a roll-in shower, adjustable height shower head, and grab bars, and can accommodate a track system in the future if need be. The large, open-space kitchen has a side-by-side refrigerator, a stove with front knobs, a reachable microwave, and dish drawers that make access to plates simple and easy.

"I have a problem with my back," says Kitty, "so it hurts to reach up."

"It makes sense to have these features in the home," adds Karen, believing that in the next five years, production builders will have similar accessible models that people will treasure. "These homes can be beautiful, not clinical."

#### **Giving Back and Growing**

Karen Kassik is on a crusade to see accessible homes get into the mainstream of the building industry. She works closely with Carolyn Sithong, an occupational therapist and owner of the Orlando-based Home for Life Consulting and Design to help spread the word. Sithong is trained specifically in the area of home modifications and like Kassik is nationally certified as an Aging-in-Place Specialist (CAPS) by the National Association of Homebuilders. She collaborates with architects and designers who assist in the home renovation or adaptation process.

Sithong says the Kassik home is a prototype of

universal design, noting that supplemental features can be added depending on the patient. For example, if the person has had a stroke and has trouble feeling the difference between hot and cold, an anti-scalding device can be installed in the shower.

"I started my business after working in the health care industry and seeing all of these people who want to go home and not to a facility," Sithong says. "It had to take the right kind of person to collaborate with the health care industry."

Together, Sithong and Kassik are now working with the Home Builders Association of Metro Orlando to help put on an aging-in-place educational and promotional event this October (see shaded box below) and to gain acceptance of accessible homes in the Parade of Homes. They are also seeking to form a partnership between the health care industry and the construction industry, which Kassik describes as the

missing link. "Their (health care industry) patients will need a place to live in the future," she says. "We can accommodate that rush; the government can't serve all of these people."

In the end, the choice is up to the caregiver how to cope. There are dozens of support groups, associations and organizations designed around specific and/or general care giving circumstances. There are some caregivers who go into hiding, whether it's from some sort of shame, being too proud or too humble, or retreating into a surrender mode, waking up each day and going through the routines necessary for the comfort of the child, parent or spouse who needs the care.

Then again, there are those who take the circumstances and grow from it, discovering hidden compassion and sometimes even niches for themselves. **WC**

KEVIN FRITZ is the editor of *We Care Magazine*.



Mark your calendar for **Thursday October 15, 2009**, for a special event sponsored by the **Central Florida Aging in Place Council** at the *Home Builders Association of Metro Orlando, 544 Mayo Ave., in Maitland*. "A Step Ahead: Central Florida's Vision for Aging-in-Place" will bring together experts in planning, development and health care to address the newest challenges and successes in creating accessible housing for all. The event starts with breakfast and networking from 8:00-9:00 a.m., and concludes after lunch. The cost is \$10. For more information, contact **Carolyn Sithong** at 407-247-7190 or email [csithong@homeforlifedesign.com](mailto:csithong@homeforlifedesign.com).





# Stressed? Let JOURNALING Help

By B. Lynn Goodwin

"When are you planning on going to the grocery store?" my mother asked after our Wednesday trip to the hairdresser followed by a late lunch at Emil Villa's. I'd taken her back to her condo, helped her open her mail, and I thought my day with her was over.

"I'll go right now."

"Don't go now. You don't have time." I did though, and we both knew it. I hated being reminded that I had no life.

"When would you like me to go?" I asked with all the patience I could muster. "I don't care. Go tomorrow or the next day, or whenever you want to."

We did this dance every day. She needed help; I needed space. She feared I would abandon her, while I feared that her blood pressure would soar, causing a stroke. I had no idea I was engaged in a psychological battle with a woman who was losing her ability to think logically. It would be four years

before I knew that Alzheimer's was eating her brain and robbing her of logical thought. Looking back, I understand why I was so frustrated. I had no place to turn except my journal. Without it, I might have gone crazy. Instead, I would steal a few minutes and do a data dump, spilling out the specific frustrations of caring for my mother and letting my own life slide away.

Why write about it? Writing gives perspective and restores sanity. Writing is a lifeline as well as a record. Writing saves lives. Do not underestimate its power.

Journaling in a private place allows you to vent, delve into issues, and untangle messes. It lets you analyze or celebrate. It allows you to finish a thought without interruption. Journaling releases mental toxins and deepens awareness. It allows the strong, sane, safe, healthy, hopeful parts of you to emerge.

What do you do if you have nothing to say? Look around the room for an image or a sensory detail—the way the sun makes a path on the carpet, the way steam rises off a cup of coffee, carrying the aroma of morning with it. Listen to the high-pitched whirring of an omnipresent machine, the tick of the kitchen's black-and-white, kitty-cat clock—any image at all.

Include sights, sounds, movements, smells, and the feel of the air. Describing the immediate environment will jump start your writing. Don't worry if what you write is not related to the topic. Topics are only suggestions. Let the writing take you wherever it wants to. Explore fearlessly.

If you're ready to try, but you're not sure how to begin, let me assure you that sentence starts can be a big help. Imagine starting your sentence with the words, "Today I feel..." How would you finish the sentence? Write it down. Write the next sentence. Let one idea lead to another or let your thoughts jump around. Either way you are journaling.

A participant in one of my journaling workshops said, "Writing from the heart seems to be all that's needed," and another added, "I can't tell you how

many things I've sorted out by being able to write them down."

For nearly six years, I scrawled thoughts, impressions, regrets, and desires in my journal. If I had

Everyone can journal, and in her book, *You Want Me to Do What? Journaling for Caregivers*, you'll find encouragement, instructions, and over 200 sentence starts. Try some of these:

- + IF YOU ASK ME...
- + BECAUSE I FOLLOW...
- + WHAT IF...
- + BECAUSE...
- + I WISH YOU KNEW...

known about my mother's Alzheimer's, maybe I could have stopped trying to be the perfect daughter. Maybe I could have loved her for needing me instead of craving her approval. Maybe I could have recognized that I was an adult daughter, doing what needed to be done. Rereading my journals helped me realize all this.

Old journals give new insights. They show progress, reveal unexpected tenderness, and refresh memories. They are a legacy and a treasured part of family history whether you share them or not.

Record both the moments you want to remember and moments you want to let go of. Whether you're writing about a trip to the grocery store, loneliness, or the frustration of helplessness, journaling is an empowering gift to give yourself. 

B. LYNN GOODWIN is a teacher, editor, freelance writer, former caregiver, and the author of *You Want Me To Do What? - Journaling for Caregivers* (Tate Publishing). The book is available at Amazon.com, other online stores, and on [www.writeradvice.com](http://www.writeradvice.com).

# MEDICARE MYTHS: Learning the Rules Before the Time Comes

By Kevin Fritz



Medicare rules and regulations by their very nature can be confusing, and one misstep along the way could rob a recipient of their deserved care or funds.

Janice Williams, partner and vice president of Matrix Home Care, LLC, notes, for example, a patient must be in the hospital for “three midnights,” before Medicare will pay its share after release. She has seen too many cases where children or spouses have decided to take a patient home after a couple of days, only to realize they need a care facility. By then it’s too late — Medicare will not cover the costs of the nursing facility.

Williams says people need to know the score before getting into the care-giving ballgame. “We are dealing with a very frail population,” she notes. “The more their children know, the better off they are.”

For those who do choose to be a caregiver at home, Williams says Medicare only provides for assistance in the home two-to-three days a week, for about one hour per day. She finds many boomers and/or their aging parents are surprised to learn after Medicare kicks in at age 65, it does not really cover custodial care, which, according to the Department of Health and Human Services, includes “activities of daily living such as dressing, bathing, and using the bathroom.”

“Medicare covers a short term of care for six-to-eight weeks,” she explains, noting that is where some of the confusion lies. “This personal care is only provided if there is a skilled component needed by the client.”

Medicare pays for home health care if the patient is homebound, or the patient requires skilled nursing care, physical, occupational, speech, or respiratory therapy. In addition, Medicare will only pay for services by Medicare-certified agencies. However, even services allowed by Medicare via certified agencies are limited.

Williams says that is why private agencies are chosen to provide many home health aide services, such as assistance with bathing, dressing, grooming, eating, going to the bathroom, housekeeping, meal preparation, escorting the patient to the physician, and running errands. These services are paid for by long-term care insurance, and/or privately paid for by the clients or family members.

Outside of the home, she adds many Medicare recipients also don’t realize they are limited to semi-private rooms at skilled nursing facilities. Moreover, Medicare will only pay for up to a 100-day stay in a facility. Children and spouses need to know that just the first 21 days are covered at 100%.

“I think people in their eighties and nineties thought Medicare would pay for more than that,” she adds. “To be in your eighties and confused about health coverage — how unfair is that?”

Williams preaches the big picture, which is to obtain the necessary knowledge on health care that our parents or spouses are entitled to beforehand. “Have a plan,” she stresses. “We plan for kindergarten, we plan for high school, we plan for college, but we don’t plan for our parents getting older.” 

KEVIN FRITZ is the editor of *We Care Magazine*.

## Medicare Changes Worry HOME CARE INDUSTRY

To make up the \$1.2 trillion it will take over ten years to insure and/or provide funds to meet the proposed federal mandate to purchase insurance and extend Medicaid benefits, about half would come from reducing federal health programs expenditures— primarily Medicare — and that has the home health care industry reeling.

Bill Dombi, vice president of law for of the Washington, D.C.-based National Association for Home Care and Hospice (NAHC), says in the government’s quest to provide national health care, it is taking a step back with its cuts and proposals. Overall, there are 18,000 Medicare-certified home health care agencies nationwide, and the Medicare budget is slated to be cut by more than \$300 billion.

“It’s a huge, huge cut,” states Dombi. “There has to be a better way than this. Margins in home health care are only two percent as it is. There will be a ripple down effect and any of those margins will disappear.” The association faces a double-edge sword: Cuts could put members out of business and curtail care to the elderly. Dombi notes there is very little commercial insurance for home care on the market to serve as an alternative.

“You can’t build a new system of health care by tearing down the current one,” he adds. The association is lobbying for the budget cuts to be reduced and spread out to avoid a crash in the current health care structure.

The Medicare changes, which are poised to kick in this October and include a \$1.05 billion cut in Medicare spending in nursing homes, also has practitioners wondering if patients will get the care they need or be left out in the cold.

In addition, the changes call for Medicare to make one bundled payment to the hospital that cares for the patient, which in return would be responsible for paying the nursing home or home health company for the patient after release.

“The problem we see is that if a patient wants to go to another facility, does that new facility get paid?” asks Janice Williams, partner and vice president of Matrix Home Care, LLC, a home health agency serving 30 counties in Florida. Her referral-based company provides home care after a stay in a hospital or nursing facility.

Williams believes the new Medicare proposals may preclude patients from changing nursing

facilities, including those who may want to move closer to the family. “Travelling will be tough,” she notes. “This one lump sum payment is something that is going to be a big issue.”

In addition, many in the industry are worried about hospitals having the responsibility of paying the nursing facility or home health care agency. Dombi says the post-acute care bundling gives the power of managing post care to hospitals that do not have the expertise of home care agencies.

“They (the hospitals) will become insurance companies and manage care,” he states. “They don’t manage it now. How can they manage it?” On the other hand, he says hospice has a great track record in efficient management, as well as saving money for hospitals by reducing re-hospitalization.

“One dollar spent on home health care saves \$2 for the hospital,” Dombi cites, “and makes for a happier patient.”

He says the NAHC has proposed a community-based organization, such as hospice, to be responsible for arranging the care. The good news for his members is a proposal to make the bundling program a pilot before full implementation. 

## AFTERNOON CONFERENCE TO HELP ADULT CHILDREN

The Jewish Pavilion, an Orlando-based non-profit organization that supports and enhances the lives of seniors in long-term care facilities, is hosting an afternoon conference to help adult children make decisions for their aging parents.

The conference, "Honor Your Father and Mother Without Losing Your Mind," will be held Sunday, Oct. 25, from noon to 4 p.m. at the Jewish Community Center, 851 N. Maitland Ave., in Maitland.

"Too often decisions have to be made in the midst of crisis," says Executive Director Nancy Ludin. "Our goal is to provide caregivers and potential caregivers with information about resources and options and the steps they can take to minimize the stress and anxiety associated with the issues of aging."

Rabbi Richard Address will deliver the keynote speech, "A Practical Approach to Living in the 'Club Sandwich' Generation." Address is the director of the Department of Jewish Family Concerns for the Union of Reform Judaism. He has written and edited several books, including *That You May Live Long: Caring for our Aging Parents*, *Caring for Our-*

*selves*. He currently runs Jewish Sacred Aging, an online forum for baby boomers and their families on how to cope with revolutions in longevity.

"Richard Address is a dynamic speaker and his topic resonates with anyone, regardless of faith, struggling with the demands of a spouse, children and/or parents," says Ludin.



After the keynote speech, participants will attend two breakout sessions chosen from some of the following topics: selecting an assisted living or long-term care facility; the hospice option; Alzheimer's disease; deciphering Medicare/Medicaid; and taking care of the caregiver.

The Jewish Pavilion, located in Altamonte Springs, runs a coordinated network of volunteers to re-establish a connection between the Jewish residents in long-term care facilities and the greater Jewish community. Jewish Pavilion programs include weekly volunteer visits, periodic visits by the community rabbi, Shabbat and holiday services, and social programs.

For more information on the

conference, call 407-678-9363 or e-mail [programs@jewishpavilion.org](mailto:programs@jewishpavilion.org).

## NEW SOLUTION OFFERED AFTER RASH OF SENIOR CITIZEN CAR CRASHES

It's an agonizing decision to take away the car keys and apply the brakes to an elderly loved one's driving, especially in a culture where driving symbolizes freedom. But an increase in the number of car crashes involving senior citizen drivers this summer has the experts at Senior Helpers urging families to watch for signs their elderly loved ones can no longer drive and to hire a caregiver to drive for them.

"You can take away the car keys, disable a car, or have police confiscate a person's driver's license, but that can create hard feelings," says Peter Ross, founder and CEO of Senior Helpers, a provider of in-home care for seniors. "We encourage families to hire a caregiver to drive their loved ones around and help with daily tasks. The caregiver is not only the driver but can be an extra set of eyes and ears at doctors' appointments or grocery shopping. Plus, caregivers are great companions and often turn into good friends so the senior doesn't

feel lonely and can still stay active and social."

The Maryland-based Senior Helpers connects professional caregivers with seniors who wish to live at home as opposed to in a nursing home or assisted living facility.

Consider the problem with the recent wave of car crashes in the past three months involving elderly drivers:

- Danvers, Mass. (June) A 93-year-old man accidentally hit the gas instead of the brake and drove his car into a Wal-Mart, injuring a woman and her one-year-old daughter.
- Winter Park, Fla. (May) A 78-year-old man is accused of leaving the scene after hitting and killing a pedestrian.
- Tierra Santa, Calif. (April) An 86-year-old woman drives through the front glass window of an office and hits a man who later dies.

"Our reflexes naturally slow with age, and it's difficult to measure how slow is too slow when driving," adds Ross. "Some states are considering requiring driving tests for seniors, but driving tests can miss the onset of diseases like Alzheimer's that affect judgment, understanding and memory, which cause many of the accidents. So often the

family has to recognize it's time to stop the senior from driving."

Anne Worster of Denver, Colorado, hired a caregiver to drive her 96-year-old mom to doctors' appointments because it was difficult to leave work. "It was great because the caregiver took notes and called me right after the appointment," says Anna. "I got a full report and it made me feel at ease that I wasn't sending mom in there alone. Plus, it's so nice to trust someone to drive mom so I don't worry about her safety or the safety of anyone else."

"Children must reassure their elderly parents they can still see friends and be involved in activities even if they can't drive," says Ross. "Hiring a caregiver who can be a driver eases some of the conflict in the decision to take away the keys because it preserves the senior's independence and provides a companion at the same time."

## WE CARE CHARITY GOLF RAISES \$10,000

The Lake-Sumter Medical Society (LSMS) raised more than \$10,000 for We Care of Lake County and the LSMS with its first Docs Care charity golf event that was sponsored by K. Hovnanian

Homes and attracted 60 golfers. We Care of Lake County is an organization that provides referrals for specialty care to the more than 30,000 disadvantage residents of



Carol Millwater and Kevin McFall from Lake-Sumter Medical Society/We Care of Lake County

Lake County. While We Care of Lake County provides the referral service, the commitment by local health care providers makes the organization's mission a reality.

"We are thrilled that our first event was a great success, and it couldn't have been possible without all of our very generous sponsors," says Lake-Sumter Medical Society Executive Director Carol Millwater. The Lake-Sumter Medical Society, established in 1978, is a non-profit, professional association of allopathic (M.D.) and osteopathic physicians (D.O.) who are dedicated to the care of their patients and their profession.

## ACCESSIBLE HOUSING

**HBA of Metro Orlando**

544 Mayo Ave.  
Maitland, FL 32751  
407-629-9242  
[www.HBAofMetroOrlando.com](http://www.HBAofMetroOrlando.com)

**Florida Home Builders Association**

201 East Park Ave.  
Tallahassee, FL 32301  
800-261-9447  
[www.FHBA.com](http://www.FHBA.com)

**National Aging in Place Council**

1400 16th St., NW - Suite 420  
Washington, DC 20036  
202-939-1784  
[www.NAIPC.org](http://www.NAIPC.org)

**National Association of Home Builders**

1201 15th St., NW  
Washington, DC 20005  
800-368-5242  
[www.NAHB.org](http://www.NAHB.org)

**National Council of Building Designer Certification**

2962 Saklan Indian Dr.  
Walnut Creek, CA 94595  
888-726-7659  
[www.NCBDC.org](http://www.NCBDC.org)

## SERVICES

**55plus at Orlando Regional Health-care**

3160 Southgate Commerce Blvd,  
Suite 62  
Orlando, FL 32806  
321-843-1208  
[www.orlandohealth.com](http://www.orlandohealth.com)

**American Occupational Therapy Association**

4720 Montgomery Lane  
Bethesda, MD 20824-1220  
301-652-2682  
[www.AOTA.org](http://www.AOTA.org)

**Florida Hospice of the Comforter**

480 W. Central Parkway  
Altamonte Springs, FL 32714  
407-682-0808  
[www.hospiceofthecomforter.org](http://www.hospiceofthecomforter.org)

**Hearing Associates of Central Florida**

1460 Lake Baldwin Lane, Suite A  
Orlando, FL 32814  
407-898-2220  
[OrlandoHears.com](http://OrlandoHears.com)

**Home for Life**

Carolyn Sithong,  
Occupational Therapist  
407-247-7190  
[www.HomeForLifeDesign.com](http://www.HomeForLifeDesign.com)

**Home Instead Senior Care**

1017 South St.  
Orlando, FL 32801  
407-445-8885  
[www.homeinstead.com](http://www.homeinstead.com)

**Orlando Health**

1414 Kuhl Ave.  
Orlando, FL 32806  
321-841-8077  
[orlandohealth.com](http://orlandohealth.com)

**Quest Medical Outfitters**

632 Maguire Blvd.  
Orlando, FL 32803  
407-898-2998  
[questmedicaloutfitters.com](http://questmedicaloutfitters.com)

**Right at Home**

200 Waymont Ct., Suite 126  
Lake Mary, FL 32746-3413  
407-328-8619  
[www.rightathome.net](http://www.rightathome.net)

**Senior Helpers**

8600 LaSalle Rd., Suite 311  
Towson, MD 21286  
800-760-6389  
[www.seniorhelpers.com](http://www.seniorhelpers.com)

**Vitas Innovative Hospice Care**

5151 Adanson St., Suite 200  
Orlando, FL 32804  
407-691-4541  
[www.vitas.com](http://www.vitas.com)

**Visiting Angels**

625 Executive Dr.  
Winter Park, FL 32789  
800-365-4189  
[www.visitingangels.com](http://www.visitingangels.com)

**VNA of Central Florida/  
Community Care for the Elderly**

3113 Lawton Rd.  
Orlando, FL 32803  
407-628-2884  
[www.ccecares.org](http://www.ccecares.org)

## NON-PROFITS

**Alzheimer's Resource Center**

1506 Lake Highland Dr.  
Orlando, FL 32803  
407-843-1910  
[www.alzheimerresourcecenter.org](http://www.alzheimerresourcecenter.org)

**Community Services Network/  
Area Agency on Aging of Central Florida**

988 Woodcock Rd., Suite 200  
Orlando, FL 32803-3715  
407-897-6465  
[www.csnetwork.org](http://www.csnetwork.org)

**Down Syndrome Association of  
Central Florida**

204 N. Wymore Rd.  
Winter Park, FL 32789  
407-540-1121  
[www.dsacf.org](http://www.dsacf.org)

**The Jewish Pavilion of Central  
Florida**

P.O. Box 160056  
Altamonte Springs, FL 32716  
407-678-9363  
[www.jewishpavilion.org](http://www.jewishpavilion.org)

**Meals on Wheels**

7001 Ravenna Ave.  
Orlando, FL 32819-8484  
407-352-2617  
[www.mealcall.org](http://www.mealcall.org)

**Senior Education Foundation**

934 N. Magnolia Ave., Suite 301  
Orlando, FL 32803  
407-696-0442  
[www.senioref.org](http://www.senioref.org)

**Seniors First**

5395 L.B. McLeod Rd.  
Orlando, FL 32811  
407-292-0177  
[www.seniorsfirstinc.org](http://www.seniorsfirstinc.org)

**Senior and Life Solutions**

523 Shane Circle  
Winter Springs, FL 32708  
407-739-8939

**Senior Resource Alliance**

407-514-1800  
[www.sraflorida.org](http://www.sraflorida.org)

**We Care of Lake County**

P.O. Box 1069  
Tavares, FL 32778  
352-742-6595  
[www.lakesumter.org/wecare.asp](http://www.lakesumter.org/wecare.asp)

**Your Guiding  
Beacon for  
Quality  
Services**



Serving Orange,  
Seminole, Osceola  
& Brevard Counties

**Harbour**  
Private Duty Nursing, LLC

[www.harbourprivatedutynursing.com](http://www.harbourprivatedutynursing.com)

**407.895.8188 | Toll Free: 1.877.473.6552**

**Fax: 407.895.9339**  
License No. 299991382



When there is only one way to go, *NM Design* can take your business there.

ADVERTISING - CORPORATE IDENTITY - MARKETING

To find out about starting  
your next design project,  
please contact us at

**407-687-4728**

Designer for *We Care Magazine*

REAL —  
Affordable  
design



[www.nmdesignpro.com](http://www.nmdesignpro.com)

**GO**  
mediagroup

PUBLISHING - DESIGN - JOURNALISM

PHONE 407-444-9974

EMAIL [gomedia.grp@gmail.com](mailto:gomedia.grp@gmail.com)

Publishers of *We Care Magazine*

*Sound Treatment. Sound Care. Sound Difference.*

*Physicians and Nurses  
refer more patients to*  
**DOCTORS OF  
AUDIOLOGY**  
*than any other*  
**Hearing Care Provider  
in America!**

**PLEASE CALL TODAY**  
for the kind of hearing test  
and treatment your medical doctor  
would want you to have!  
**(407) 898-2220**

**VIEW INTERACTIVE VIDEO**  
*on hearing loss and hearing aids at*

**[www.OrlandoHears.com](http://www.OrlandoHears.com)**

**Hearing**  
ASSOCIATES  
OF CENTRAL FLORIDA

Orlando's **AuDNET HEARING CENTER** of Excellence!

**Melissa S. Riess, Au.D.**  
DOCTOR OF AUDIOLOGY

1460 Lake Baldwin Lane  
Orlando, FL 32814

