

## SeniorHomes.com Blog

Thanks for visiting our blog. Here we will share news and information about our website as well as senior housing information in general.

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### A Look Inside Dementia Care Facilities, by a Family Caregiver

Wednesday, October 10th, 2012 by Natalie Vache

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*This is a guest post submitted by Martha Stettinius, author of the new book "Inside the Dementia Epidemic: A Daughter's Memoir."*

At age 80, my mother is living with advanced dementia (vascular dementia and probable Alzheimer's disease), and I've served as her primary caregiver for 7 years. She's lived in my home with my husband and two young children, then in assisted living, a rehab center, a "memory care" facility, and now the dementia ward of a nursing home.

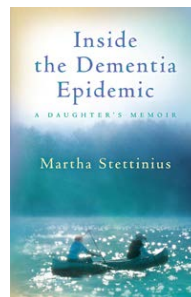
In the spring of 2005, my mother lived with us briefly, but she was unhappy and needed more independence, so we convinced her to move to a nearby assisted living facility. With mild cognitive impairment, she seemed afraid to go to activities, which were held in large groups that included the higher-functioning residents of the adjacent "independent living" facility. Many of the assisted living residents had some degree of dementia, but activities and care seemed tailored to the more independent residents. Staff did not receive extensive dementia training, and interactions were minimal. To my dismay, Mom spent most of her days watching TV.

Late in 2007, after falling and fracturing her pelvis, my mother suddenly became incontinent. The fall may have accompanied a small stroke. After Mom spent some time in a rehab center, the assisted living facility staff were not allowed (by their contract, and by our state's regulations) to physically help my mother change her adult diapers. I had to hire private aides to come in for several hours a day. The facility's case manager told me that my mother's needs had fallen into a "gray area." Shortly after that, when one of the private aides found Mom in bed one morning soaking wet and uncovered, her adult diaper ripped off, I knew it was time to move her. But where?

Mom would live in this memory care facility for nearly 3 years—years that seemed her happiest in a long time. Mom rewarded the staff's affection with lots of smiles and laughter. Firmly in the middle stages of dementia, she joined the activities, sparked a romance with one of the men, and generally enjoyed living in the moment, no longer tortured by awareness of her disease. Although she had her moments of agitation, the staff all received special training in dementia care, and they knew how to keep her calm and feeling safe. I toured a local "memory care" cottage, most impressed not with the plush, home-like environment—the light-filled windows, the green plants, the white, long-haired cat lounging on the hearth—or the seeming contentedness of the residents who listened to oldies on a CD—but the forthrightness of the administrator who gave me the tour. When I asked her, "At what point, exactly, would my mother have to move out?" she told me, "Residents must be able to feed themselves, and be able to walk for at least a few steps, for example from the bed to a wheelchair." That's the kind of answer I'm looking for, I thought. No "gray areas."

By May of 2010, however, she seemed to have forgotten how to feed herself, and was losing weight. (She was also running out of savings, and the private memory care facility could not accept Medicaid.) I looked for a nursing home in the area that was on The Eden Alternative registry—a nursing home that follows the philosophy of person-centered care championed by Dr. Bill Thomas and his wife, Jude—or a nursing home that was part of the new Green House Project (also a Bill Thomas Initiative), but the closest were 3 hours away. Mom moved into a local nursing home, where for the past 2 years she has received excellent physical care, if not the emotional sustenance and vibrancy one might find in an Eden Alternative nursing home or a smaller, more intimate home such as a Green House. She lives on the dementia floor, where staff members receive some specialized training, but residents in the final stage of dementia rarely enjoy individual attention or appropriate stimulation. Though she can no longer speak, and is immobile in a wheelchair, Mom still enjoys people and shares her brilliant smile. She is still "here," and deserves to have a life that includes more than being spoon-fed her pureed meals, and napping through group activities.

I'm hopeful that our new National Plan to Address Alzheimer's Disease will increase public understanding of Alzheimer's and the need for specialized care, and that funding and answers will surface as more and more Americans fall prey to dementia. However, we need to press the Department of Health and Human Services to recommend a minimum number of hours of dementia training for health care providers and facility staff. According to the National Council of Certified Dementia Practitioners, individual states may or may not require dementia education, and their regulations vary by industry (home care, adult day care, assisted living, nursing homes, hospitals, and hospice). Some states, for example, require absolutely no dementia education for staff in the dementia units of assisted living. This must change.



**About Martha Stettinius, the author:**

Martha Stettinius is the author of the new book "Inside the Dementia Epidemic: A Daughter's Memoir," available at major online book retailers. She serves as a volunteer representative for New York State for the National Family Caregivers Association. For more information about the book, please visit [www.insidedementia.com](http://www.insidedementia.com).

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**SeniorHomes.com Rocked the Walk to End Alzheimer's**

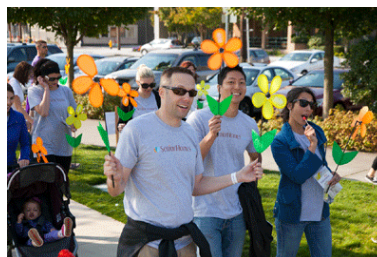
Thursday, September 27th, 2012 by Angela Stringfellow

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On Sunday, September 2, 2012, the SeniorHomes.com team had the opportunity to take part in an amazing event: The Walk to End Alzheimer's. We work with families each and every day who are facing the challenges of having a loved one suffering from this devastating illness. We were thrilled to be able to participate in raising awareness for such a worthy cause.



This year's event was held at Southlake Union Park for the first time: last year's event was held at Seattle Center. It was a great venue and a beautiful day to walk around the lake in one of the most innovative neighborhoods in Seattle. Southlake Union Park has become a hotbed for for companies, with Amazon.com moving nearly all of its operations there recently and tons of investment opportunities for startups and other innovative corporations.



Participants were given one of four flower pinwheels:

- ▶ Orange shows support for the cause.
- ▶ Yellow symbolizes currently caring for or supporting someone with Alzheimer's disease.
- ▶ Purple for those who have lost someone to Alzheimer's disease.
- ▶ Blue for those who have Alzheimer's disease.



During a ceremony, participants were asked to raise their pinwheels, color by color. When those brave participants with blue flowers raised theirs, the crowd fell silent and tears started flowing. This was one of the most poignant moments of the day, helping participants to realize the tremendous impact this disease has on our society. This

moment alone made the entire effort worth it, for us and certainly for the dedicated team that worked so hard to coordinate this incredible event.



It was inspiring to see the number of businesses and organizations involved, taking time out of their Sunday morning to show their support and contribute to raising funds to support research and education in hopes that one day, we'll find a cure for this life-altering condition. Also incredible was the number of seniors who turned out for the event and the number of assisted living and senior living facilities who brought residents. Families came out in droves, wearing matching t-shirts to support their loved ones currently suffering from Alzheimer's.



"Music was playing at the event home base right on lake union. It was a great feeling of solidarity amongst everyone there. Many kids and dogs as well lent to the atmosphere of family and support," describes Jaime Cantara, care advisor for SeniorHomes.com. "We felt like a big family. We had two little ones with us, Stuart's little daughter and Penny's niece. Both super adorable. Also two doggies walking with us: The beloved Sam, our care advisor mascot, and Lily, our account executive Penny's little lady."



Did you participate in this year's Walk to End Alzheimer's in Seattle or elsewhere in the U.S.? We'd love to see some photos from your event! Share them with us on our Facebook wall.

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Tags: 2012 Walk to End Alzheimer's  
Posted in active aging, Aging, Memory Care, Senior Living News, SeniorHomes News | 1 Comment »

### It's Alzheimer's Action Day, and SeniorHomes.com Will Be Walking This Sunday in Seattle!

Friday, September 21st, 2012 by Angela Stringfellow

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Today is Alzheimer's Action Day, a day of awareness in honor of the 35 million people Worldwide who are affected by dementia. Millions of Americans will be proudly sporting purple today to help raise awareness and reduce the stigma associated with this disease. This year, people affected by Alzheimer's disease and other types of dementia are encouraged to share their stories with the World in hopes of enhancing understanding of the difficult fight families and loved ones face when affected.

### Facts and figures about

## Alzheimer's disease



Image via the Alzheimer's Association

In 2012, the costs of caring for those affected by Alzheimer's disease will reach a staggering \$200 billion: \$140 billion in Medicare and Medicaid costs. Alzheimer's disease is the sixth leading cause of death in the United States and the only cause in the top 10 for which there is no cure, no method of preventing or even slowing the disease. More than 15 million Americans provide unpaid care to a loved one with Alzheimer's disease, totaling the equivalent of \$210 billion in care.

There is no cure for Alzheimer's disease. Current treatment options have the ability to temporarily slow the progression of the disease, and research continues to push towards finding a cure. It's not known what causes Alzheimer's disease, although some risk factors have been identified. In effort to coordinate research and education efforts, the U.S. Government has unveiled a **National Plan to Address Alzheimer's Disease** with the goal of preventing and effectively treating the disease by the year 2025. Researchers are already identifying new ways to detect Alzheimer's disease and promising new treatments, but the road ahead is still a long one.

### Diagnostic advances aim for early detection

Because current treatments are able to slow the progression of the disease, but only when it's detected in its early stages, on key focus of research has been developing diagnostic tests and criteria to help physicians determine the presence of Alzheimer's disease even before an individual is showing any signs or symptoms. The **diagnostic guidelines** have been revised to allow for earlier and more accurate detection. Some strides have been made in identifying gene mutations and other biomarkers associated with the disease, but to date, there is no 100 percent accurate diagnostic test for Alzheimer's disease.

### SeniorHomes.com walks the Walk to End Alzheimer's

At SeniorHomes.com, we like to do our part and get involved in events that raise awareness about issues surrounding our nation's growing elderly population. Our team will be participating in the Pacific Northwest Walk to End Alzheimer's this Sunday, September 23rd in Seattle. Join us to help support a worthy cause, raise awareness and reduce stigma surrounding this devastating disease. We hope to see you there. And don't forget to wear purple to proudly display your support!

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Tags: Alzheimer's Action Day, events, Walk to End Alzheimer's  
Posted in Aging, Memory Care, Senior Living News, SeniorHomes News | No Comments »

### The Alzheimer's Gene: Do You Want to Know?

Thursday, August 16th, 2012 by Angela Stringfellow

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If there was a way to know if you were predisposed to developing Alzheimer's disease, would you want to know? As tests to evaluate an individual's risk of developing Alzheimer's disease advance, this is a question plaguing the minds of more and more Americans, especially those who have parents or other relatives with the disease.

According to the **Washington Post**, two-thirds of U.S. respondents in a survey last year conducted by the Harvard School of Public Health said they'd want to know if they were likely to develop Alzheimer's disease.

#### Ways to detect Alzheimer's disease

Currently, there are no definitive tests that are 100% accurate in detecting a person's predisposition to developing Alzheimer's, but scientists have identified a gene mutation occurring on one of three chromosomes that has been linked to the development of early-onset Alzheimer's disease. Only about 5 percent of Alzheimer's patients have inherited this form of the disease, however.

In some cases, evidence of Alzheimer's disease can be detected in the brain decades before the person ever shows signs or symptoms. This can be done using scans, which can show beta-amyloid, a protein often present in the brains of individuals with the disease. There are also blood tests that can detect changes in proteins in the blood or Cerebrospinal fluid, also associated with Alzheimer's disease.

#### No insurance coverage for diagnostic testing

Most insurance carriers won't cover scans or blood work to determine the likelihood of developing Alzheimer's disease, however. Insurance companies don't feel that these diagnostic tests are necessary for patients who are showing symptoms



Image via With Good Reason Radio

and even for those who are not yet exhibiting any signs of the disease. That's because these tests aren't yet clinically proven, and there's no real guarantee of accuracy even if these tests should show a predisposition. An individual could have a buildup of beta-amyloid in the brain and yet never develop Alzheimer's disease.

There's also the risk that individuals found to be predisposed to developing Alzheimer's disease may have a harder time obtaining insurance coverage. Health insurance providers aren't legally allowed to discriminate based on pre-existing conditions, but life insurance providers and long-term care insurance carriers aren't subject to the same restrictions. Long-term care insurers, in particular, may hesitate to ensure someone with the likelihood of developing the disease, because long-term care costs can be significant for Alzheimer's patients.

What's your opinion? Given the limited reliability of diagnostic tests in asymptomatic patients, combined with the risk of insurance coverage issues, would you want to know if given the opportunity to find out?

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Tags: [alzheimer's research](#), [alzheimers disease](#)  
Posted in [Aging](#), [Long Term Care](#), [Memory Care](#), [Senior Living News](#) | [1 Comment](#) »

### Caregivers, Loved Ones Disagree on Dementia Care

Friday, August 3rd, 2012 by Angela Stringfellow

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Caregivers and relatives of loved ones with dementia often disagree about their loved one's treatment plan, according to a report by [DementiaToday.com](#). Penn State and the Benjamin Rose Institute of Aging researchers did a study on these differences of opinion between the caregivers and the relatives. They found that the caregivers often do not understand what is important to the relatives of the loved one with mild to severe dementia.

The research was comprised of 266 pairs of participants. The pairs were composed of someone with mild to moderate dementia and that person's caregiver. The caregiver had to be the primary caregiver and the dementia patient had to still be residing in their own home. The research was based upon five core values including autonomy, burden, control, family, and safety. Steven Zarit, a professor at Penn State University said that "Our results demonstrate that adult children underestimate the importance that their relatives with dementia placed on all five core values". The results of the research will appear in the Gerontologist in the August issue.



Image by svilen001 on Stock.xchng

#### Decision-making abilities in question

The major reason that caregivers have these disagreements is due to the caregiver deeming the patient incapable of making their own decisions even though they are often capable of much more than the caregiver gives them credit for. Some caregivers gave the patient more control over making their own decisions and these caregivers were found to be more in tune with the patient's needs and beliefs.

Once the patient declines and their dementia worsen, family members are left to make the decisions for the dementia patient. This becomes difficult if the family members do not know the wishes of the patient.

#### Improving communication is key

Zarit plans to further his research by coming up with protocols to improve communication between the caregivers and their relatives to ensure decisions made reflect the patient's actual values.

Zarit's study was supported by the Administration on Aging, the Robert Wood Johnson Foundation, the AARP Andrus Foundation, the Retirement Research Foundation, the National Institute of Aging and the National Institute of Mental Health. Allison Reamy and Kyungmin Kim, both graduate students in human development and family studies at Penn State, and Carol Whittlatch of the Benjamin Rose Institute on Aging were also authors on the paper.

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### Strides in Alzheimer's Research Presented at International Conference

Wednesday, July 18th, 2012 by Angela Stringfellow

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The Alzheimer's community has been making headlines this week with progress being made on several fronts. Key findings of various studies were presented at the Alzheimer's Association International Conference: giving hope that years of research is finally paying off.

### Early detection through gait monitoring

According several new studies recently released at the Alzheimer's Association International Conference, researchers are seeing a correlation between gait and cognition.

Frequent falls have long been recognized as an early indicator of Alzheimer's, but new studies found that slower and irregular walking patterns could be an early warning sign of cognitive decline.

The studies show that thinking skills and the ability to walk fluidly appear to decline in parallel fashions. Simply put, the more trouble a person has walking, the more trouble he may be having cognitively as well.

The problem with the study is that not all people with gait disturbances are subject to cognitive decline.

There are many seniors whose bodies fail them long before their minds. But, it's important to remember that early detection is key in the fight against Alzheimer's. Noticing a change in walking patterns may spark the conversation about memory impairment and keep loved ones vigilant to any changes in cognition.

The conclusions drawn from these studies have left researchers wondering if exercise regimens could help delay the onset of Alzheimer's and it seems as though that may be the case.

### Strength training may prevent Alzheimer's

Attendees at the conference also heard from researchers who studied the effects of strength training on elderly subjects. Although study participation was small, the results have the potential to be big.

In one study, 86 women were divided into three different groups: weight lifting, walking or balancing and toning. Twice a week for six months, each group did their respective exercises. At the end of the study, the women performing weight training saw the most improvement in brain function as seen through functional MRIs.

In another study, again focusing on women, results surprised researchers with the greatest benefits of strength training being seen in the group with the highest cognitive baseline. In other words, those in early stages of the disease or even pre-diagnosis see the most benefits from the exercises.

This is just yet another reason why early detection is so critical.

### Promising results for new therapy

Preliminary results have been announced that a new drug may halt the progression of Alzheimer's. Although the drug is in early stages of clinical trials, a small study has shown some promising results.

In a follow up study from, Gammagard, a drug already approved to treat some immune disorders, showed that patients receiving the drug at its highest-studied dose fared well over the course of the study.

In fact, the four patients receiving the max dose saw minimal progression of the disease over the course of three years. Although scientists are unsure as to why Gammagard is working against Alzheimer's, there is speculation that antibodies in the drug block beta amyloid, a protein linked to Alzheimer's

Some experts have been leery to celebrate as of yet. Many are skeptical because of the size of the trial which only included 11 individuals. Additionally, some are unsure if the drug itself resulted in the slowing of the disease or if the nature of the individuals' disease was slow to progress.


The drug is currently in Stage 3 trials, with results due out next spring. With cautious optimism, many researchers, doctors and families of loved ones with Alzheimer's are waiting to hear if Gammagard may make a significant difference in the plight against the disease.

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## A Parallel Universe: Alongside Dementia/1

Wednesday, June 13th, 2012 by Elizabeth

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### By Susan Lyons for [The Little Old Lady Stays Put \(or doesn't\) blog](#)

***Dementia**, a terrifying term, is a condition which more and more of us are experiencing first hand as life expectancies increase. Susan Lyons is a longtime journalist whose life has been rocked by this scourge as her much loved husband's developing cognitive decline permanently altered her daily routine, as well as her broader perspective. This column will afford her a venue to share her insights into caring for him — as well as for herself — during this difficult period of their lives.*

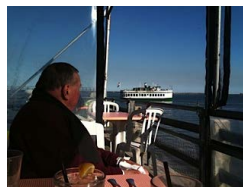
*Susan Lyons's work has appeared in The New York Times and other northeastern newspapers. She was an award-winning senior reporter for The East Hampton (N.Y.) Star for 10 years before she and her husband moved to Charleston, S.C., where she continues to write and edit on a freelance basis as her personal life allows. LOL*

The morning was mild on the Saturday after Thanksgiving and the sunshine beckoned me



Image by bluegum on Stock.xchng

outdoors to refill the little vase on our dining room table where four-day-old blooms had faded. The vase was a gift years ago from a dear friend, and I think of her whenever I use it. It is the perfect size for the delicate purple lantana and periwinkle plumbago that still color my yard this time of year. Having my pick of flowers in late autumn is one of the joys of living in the garden-infatuated city of Charleston, S.C., and part of what inspired me to move here with a new husband after more than 60 years as a northerner.



Richard and I met when he was somewhat farther along life's path than I, but the 15 years between us seemed less important than the commonality we found as journalists eager to explore the world – and conquer the weekend crosswords. We each loved French food, American music, original thought, the stuff of nature and, in time, one another.

Today, the years between us matter more.

Today, Richard won't notice that I have refilled the little vase, even though he will be at the dining room table most of the day reading and rereading a collection of newspapers. He still notices if I don't, though, sensing something missing if flowers are gone from the table, or the mantle. Is that just a man-thing, I wonder, or another sign of the invisible, unpredictable, unwelcome condition that has grabbed hold of his mind, and our lives, for some five years now.

Every day I ask myself 100 questions like that: Is his reaction to this or that a guy-thing, a Richard-personality thing, a "normal" aging thing – or is it the dementia marching on? The answer is pretty clear when packaged cookies turn up in the freezer. It's clear when, in the space of five minutes, he asks three or four times, "Is it cold out today?"

Actual memory loss is only one effect of vascular dementia – medical-speak for the mini-strokes that clog his brain's blood vessels. Undeniably, it is the fog of dementia when, out of the blue, the atmosphere bristles with tension over the smallest decision – when to leave for a movie, which herbs to add to a salad. It is also the culprit that makes the television remote control too complicated, the automated phone message from a doctor's office too confusing, the checkbook impossible to manage, and sometimes, the passage of time unfathomable.

And it is unremitting. This is a man, who for half a century filed stories on the most complicated political and scientific subjects for international wire services and national newspapers; today he cannot remember who is running for president.

Yet (at this stage of life, isn't there always a "yet?") there is still much to share. Last week we delighted, together, at three terrific movies at a local French film festival. A few evenings later, our public television station aired a Motown Sound look-back, and we rocked, together, in our living room. As he does frequently, Richard recalled an interview he had done as a young reporter for the Memphis (TN) Commercial Appeal with a "genuinely nice young man" named Elvis Presley, and, claiming bragging rights, spoke as though it had happened the day before yesterday.

On Thanksgiving, because it is increasingly difficult for him to manage visitors or socialize in a group, we agreed on a seafood dinner at a cheery local eatery and thoroughly enjoyed a hearty Bouillabaisse, chatting intermittently with the couple at the next table. A stress-free Turkey Day.

Stress. That is what this is often about, big time. Stress, above all except the sadness. For dementia in all its forms, most often as Alzheimer's, carries an acute poignancy for those who care, and caregive, playing out, day after day, as something now known as the long goodbye.

*This is just the first in the series of articles by Susan Lyons for The Little Old Lady Stays Put (or doesn't) blog. You could read the rest and more wonderful posts by visiting Jacqueline Hersh's [The Little Old Lady Stays Put \(or doesn't\) blog](#). Susan can be reached personally at [amagansue@gmail.com](mailto:amagansue@gmail.com)*

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Tags: [Alongside Dementia](#), [Dementia](#), [Susan Lyons](#)  
Posted in [Home Care](#), [Long Term Care](#), [Memory Care](#) | [No Comments](#) »

## U.S. Focuses on Alzheimer's Research

Thursday, February 9th, 2012 by Angela Stringfellow

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The U.S. government is taking serious action against Alzheimer's disease with a special task force and a boost of \$50 million towards Alzheimer's research. In 2013, another \$80 million will be awarded. The initial sum includes \$26 million allocated to caregiver support, public awareness and education and data infrastructure support, DailyRx reports.

It all started with The National Alzheimer's Project Act, signed into law last year, which aims to develop strategies for improving diagnostics, treatment options and social support for those afflicted with the disease, their loved ones and caregivers. The initiative came to fruition in light of the staggering statistics demonstrating that more than 5 million Americans have Alzheimer's disease, which has a significant financial and emotional toll on families affected and contributes an estimated \$180 billion in healthcare costs each year.

### The National Plan to Address Alzheimer's Disease

The Department of Health and Human Services advisory panel rolled out its draft framework of [The National Plan to Address Alzheimer's Disease](#) early in

2012. The plan includes ambitious goals, such as both preventing and treating Alzheimer's disease by the year 2025.

While the plan evoked mixed responses from leading senior living groups, including ALFA, which drafted a response expressing concern that assisted living wasn't considered as part of a plan to manage and care for individuals with the illness. Kaiser Health News asked a number of leading health executives to share their thoughts on the initial plan, including areas it may be falling short.

While most of those interviewed were pleased with the effort to tackle this growing problem, several interviewees pointed out some potential shortcomings. Robert Egge, Vice President of Public Policy for the Alzheimer's Association, says he hopes the first draft will contain specific, measurable and attainable outcomes, noting that "the stakes are high."

Dr. Rachelle S. Doody, the Effie Marie Cain Chair in Alzheimer's disease research at the Baylor College of Medicine, who directs the Alzheimer's Disease and Memory Disorders Center, also weighed in with her reactions. Doody tells Kaiser Health News that the overall objective to prevent and effectively treat the disease by 2025 is promising and illustrates the government's dedication to advancing research, but the draft framework fails to identify how new research will be translated to practice, nor target date for doing so.

**One thing is clear: No time for delays**

Experts and commentators consistently agree on one point: There's no time to hesitate implementing a plan of action to address this disease. As the population continues to age, the number of people with Alzheimer's disease could double by the year 2050. The devastating emotional and financial impacts on both family members and the healthcare system as a whole mean that doubling the current impact could be the country's tipping point. But will it be enough, and will the plan work? Many are anxiously awaiting the first draft of the National Plan with hope that it outlines a solid and attainable strategic course of action.

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Tags: National Alzheimer's Project Act, National Plan to Address Alzheimer's Disease Posted in Memory Care, Senior Health Care Reform, Senior Living News | 2 Comments »



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**Assisted Living Executive Releases Annual List of Largest Senior Living Providers**

Friday, May 27th, 2011 by Angela Stringfellow

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Each year, Assisted Living Executive (a publication from the Assisted Living Federation of America) compiles a list of the largest senior living providers. This year's list, released on May 25, 2011, takes a more comprehensive look by identifying the top for-profit owner-operators based on a combination of assisted living, independent living and memory care, including a breakdown of the top providers by category.

Emeritus Senior Living tops the list for the largest assisted living provider for second year in a row, but also earns the top position overall with a resident capacity of 51,725 residents. Emeritus solidified its position with a \$1.2 billion joint venture earlier this year, partnering with Blackstone Real Estate Advisors and Columbia Pacific Advisors to acquire 144 additional communities from Sunwest Management, a move which bolstered its resident capacity by more than 16,000. The company added 33 additional assisted living communities to its roster in smaller transactions.



Another major player, Sunrise Senior Living, maintains the number two spot in the assisted living category and comes in fourth overall, after some restructuring in 2010. Sunrise downsized some of its assets and sold minority interest in 58 communities to Ventas, Inc., which already owns majority interest in the same properties. Sunrise Senior Living didn't open any new communities in 2010, but boasted a 14% boost in operating income and finished the year with occupancies above 90 percent.

**The top six assisted living providers include:**

1. ► Emeritus Senior Living
2. ► Sunrise Senior Living
3. ► Brookdale Senior Living
4. ► Atria Senior Living
5. ► Five Star Senior Living
6. ► Merrill Gardens

Sunrise Senior Living tops the list among memory care providers, with Emeritus coming in second. Brookdale Senior Living earns the number two position among senior living providers overall, next to Emeritus. For a complete list of the top 80



senior living providers, check out the full article in [Assisted Living Executive](#).

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### Home Care Gets a Boost from Housing Slump

Friday, May 13th, 2011 by [Angela Stringfellow](#)

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Home care providers may be benefiting from the slow economic recovery, according to a May 8, 2011 article in [The Milford Daily News](#). According to the article, more seniors residing in the Milford, MA area have delayed moving to [independent living](#) or [assisted living communities](#), instead opting to wait out the housing slump. With real estate prices down, many seniors would be faced with selling their homes for less value or have difficulty selling at all. Those who are still independent enough to care for themselves are choosing to wait it out, hoping for a housing rebound before they're in a position that they have to move immediately.

Betsy Willard, director of community relations for [Sunrise Senior Living](#) in Milford, tells the Daily News she's noticed a decline in referrals for assisted living, but notes that referrals for their [memory care](#) facility have remained consistent. Willard believes that's because memory impairment often becomes a safety issue, so families are more likely to take action to keep their aging loved ones safe, even if it means financial sacrifice.



Seniors who are able to remain at home often do so with the help of [home care](#) services, which tends to be more flexible. Assisted living is essentially an all-or-nothing choice: you're paying for 24-hour care right off the bat, while home care can range from just a few hours per week to round-the-clock care. For this reason, home care is often viewed as a more affordable option. Likewise, [McKnight's Long Term Care News](#) reported yesterday that Genworth Financial's cost of care survey finds that home care and adult day care costs have remained flat, while the cost of assisted living and skilled nursing facilities has gone up.

Still, consumers should evaluate their options carefully. If a loved one requires care for just a few hours each day, home care or adult day care makes sense. But families reaching a point at which they're continuously adding hours with a [home senior care](#) provider, it might be time to re-evaluate. Home care, at an average cost of \$19 per hour, can easily exceed the costs of assisted living and [nursing home care](#) if you're approaching 10 hours per day or more. If your loved one requires 24-hour care, assisted living is a more cost-effective solution.

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