

FREDA'S STORY

LIVING ALONE AND FINDING HELP
ON THE DEMENTIA JOURNEY



Building better communities, one grant at a time.

Alzheimer Society
BRITISH COLUMBIA

INTRODUCTION

More seniors in British Columbia live alone than ever before. Many have family members who will help them if they experience health problems or need care. Others have developed a “chosen family” of close and trusted friends. Some live alone in the community without support from anyone.

As we age, our risk of developing a form of dementia increases. Receiving a diagnosis of dementia is life-changing. Living alone adds unique challenges. The resources available for people with dementia are too often based on an assumption that there is a care-partner able and willing to provide help. The Alzheimer Society of B.C., with help from the Notary Foundation of B.C., developed this booklet to help fill the gap. It is about seniors with dementia who live independently without a close support network.

“Freda’s Story” focuses on legal, financial and personal planning and is intended to help:

- People with dementia living alone without support.
- People living alone with some support.
- Long-distance caregivers.
- Community members who work with people who have dementia and live alone.

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ABOUT FREDA

AN INDEPENDENT WOMAN

Freda emigrated from Germany as a single woman in the 1950s. She worked in a large department store in Vancouver until her retirement at age 65. Today she is 75 years old. Her income is made up of a small pension from the store and her Canada Pension Plan. Freda owns no property and has no savings except for a cushion of \$2,000 which she tries to keep in her chequing account. She lives alone in a co-op apartment in downtown Vancouver.

Freda has always been a very independent person. Although she has some acquaintances, she has no one in her life that she would call a close friend and does

not attend any social, community or faith groups. The one exception is her monthly German Friendship Club meeting at the local community centre. At the Club, fellow German-Canadians and other people interested in German language and culture meet for lunch, listen to guest speakers and watch German films.



FREDA NOTICES CHANGES IN HER MEMORY

One day at the community centre, Freda attends a health fair and sees a poster for a Personal Planning Workshop presented by the Alzheimer Society of B.C. The display also includes a brochure called “10 Warning Signs,” which discusses some early signs of dementia.



Reading the brochure, Freda is startled. She has been having some memory trouble in the last few months and many of the warning signs seem familiar to her, yet she thinks, “I can’t have dementia, I am still so independent!” Freda decides to attend the personal planning session out of curiosity. After all, she has always been interested in the workings of the law and the workshop falls right after her monthly German Friendship Club meeting.

EXPLORING PERSONAL PLANNING

At the workshop, Sarah from the Alzheimer Society of B.C. explains that all of us should have plans in place for the future. This allows someone we trust to make financial and health-care decisions for us when we are no longer able to do so.

“Many people like to speak to a lawyer or notary to create a representation agreement and an enduring power of attorney, or to make sure existing documents are correct and up to date,” says Sarah. “It is important to choose a friend or family member who can be trusted, who knows the wishes of the person with dementia and can carry them out,” Sarah adds.

Sarah’s words make an impression, as Freda does not have anyone in her life she trusts to make big decisions on her behalf. Freda approaches Sarah at the end of the presentation to ask how someone without a live-in care-partner might go about planning if they were diagnosed with dementia. Sarah responds with a couple of questions to learn more about Freda.

“Is there anyone who is close to you, even if they happen to live far away? Or, are there people who are not emotionally close to you but who may be able to help with small things if you needed help?” Sarah also asks, “Is there even someone who you don’t see often but trust to make decisions on your behalf?”

Freda considers each question carefully and answers, "No." She is largely alone and has chosen to live that way. Sarah, noticing some indications of memory loss, says "I see that you have some questions. Do you have a diagnosis of dementia?" When Freda replies that she doesn't, Sarah encourages her to consider building a personal support network. Sarah explains that asking for help can be challenging for some people. Determining who may be in your support network can be a good place to start.

Where to Get Help with Personal Planning

Contact the Alzheimer Society of B.C. for more information about dementia as well as legal, personal and financial planning. You can also request a copy of "Cam and Sally's Story" or "Getting Your Affairs in Order" or find them online at www.alzheimerbc.org

Dementia Helpline

Monday to Friday, 9 a.m. to 4 p.m.
1-800-936-6033 or 604-681-8651
supportline@alzheimerbc.org
www.alzheimerbc.org

BC Notaries

Phone: 1-800-663-0343 or 604-681-4516
www.notaries.bc.ca

Lawyer Referral Service

Phone: 1-800-663-1919 or 604-687-3221
www.cba.org/bc

Nidus – a not-for-profit group.

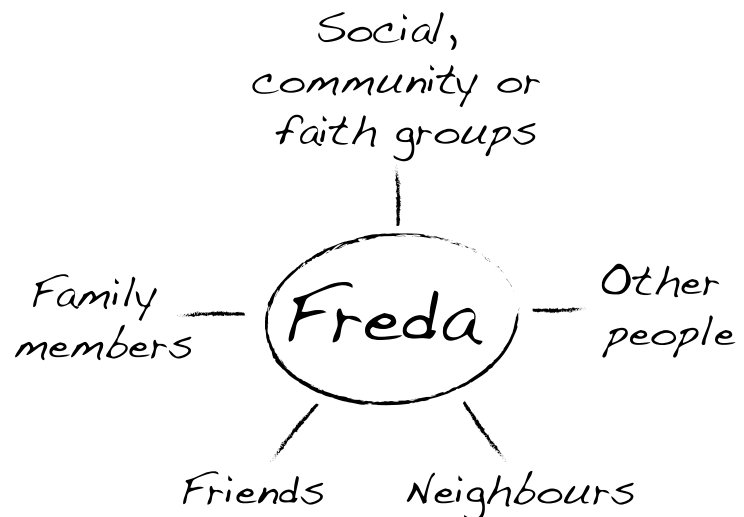
Phone: 1-877-267-5552 or 604-408-7414
www.nidus.ca

My Voice – a personal planning tool, available in English, Punjabi or Simplified Chinese. Find it online at www.health.gov.bc.ca/library/publications/year/2013/MyVoice-AdvanceCarePlanningGuide.pdf or through your health care professional.

It's Your Choice – a publication which helps people understand planning options, when you might use them and things to think about before you make them.

Phone: 604-660-4444
www.trustee.bc.ca

Sarah sketches a diagram to help Freda think about the people who may be in her personal support network already. "You can list all of the trusted people in your life who you see or talk to on a regular basis. Some of them would be acquaintances who could help you with grocery shopping and light housekeeping. Other, closer friends and relatives might be people you could rely on for help with emotional support and personal, health care and financial decision-making."



Sarah gives Freda copies of "Cam and Sally's Story" and "Getting Your Affairs in Order." These booklets give detailed guidance on personal planning. Sarah also gives Freda an Alzheimer Society of B.C. checklist called "Ready, Set, Plan." "Everyone should plan, even if they don't have a diagnosis of dementia," says Sarah.

A CHAT ABOUT MEMORY LOSS

Freda is about to leave but at the last moment she confides to Sarah that she has been having concerns about her memory. Sarah explains that some memory changes can be a normal part of aging but that she should see a doctor to explore her concerns and rule out other causes of memory loss.



"A memory problem can be caused by another underlying and treatable condition, such as a vitamin deficiency or depression," Sarah says. "But if you are showing signs of Alzheimer's disease or another dementia, your doctor can help you and make sure you get the support and treatment you need."

Sarah reminds Freda that a diagnosis does not mean a person's life is over and that many people continue to live well and happily for quite some time after a diagnosis. Sarah mentions that if Freda were to be diagnosed there would be services

available to her such as Early Stage Support Groups, the Shaping the Journey® education series, the Minds in Motion® program and one-to-one support at a Resource Centre. "You don't need to go on this journey alone," she says. "The Alzheimer Society of B.C. is here to help."

Freda takes some materials about memory loss but doesn't make an appointment to see a doctor.

Where to Get Help When You Notice Memory Loss

See your doctor. An early diagnosis can give you the time you need to plan for the future.

Contact an Alzheimer Resource Centre in your area, where you can:

- Attend a Shaping the Journey® series, an education program for people with early stage dementia.
- Sign up for the Minds in Motion® fitness and social program for people experiencing early stage memory loss due to Alzheimer's disease or another dementia.
- Join an Early Stage Support Group for people with dementia.

FREDA'S DEMENTIA PROGRESSES

Freda continues to be very independent but is beginning to find it harder to cope. She struggles to do her daily shopping. When she pays for groceries, it is now difficult to count the right amount of cash. The cashiers who know Freda have noticed a change and take extra time to help her.

People at the German Friendship Club have noted that Freda is less animated and often seems to have difficulty following and participating in conversations. They assume that Freda must have other people in her life who will notice and do something.

AT THE BANK

For the last 25 years, Freda has used the bank machine at her local branch to withdraw cash every Monday. She withdraws a regular amount that covers her expenses for the week. The tellers at the bank recognize Freda, so they notice when she is at the machine for longer than usual and growing upset.

Consider Automatic Bill Payments

Ask the bank to set up automatic monthly payments for your regular bills, such as rent, utility or insurance. It is easy, typically free, and reduces the risk of missing a payment.

Security and Privacy at the Bank

At this stage, there is nothing to suggest that Freda is being exploited by another person. She is able to speak with the bank staff and despite her memory problems, does not meet the criteria to be considered mentally incapable.

In order to protect Freda's safety and financial security, the bank supervisor could contact the Public Guardian and Trustee to request an investigation into Freda's circumstances if there were indications that:

- Freda is not mentally capable of managing her financial affairs.
- There is an urgent or immediate need.
- No suitable family member or friend has the legal authority or is willing and able to act on her behalf.

How a Financial Planner Can Help

If you have the resources to do so, consider speaking to a financial or wealth management company to prepare for your financial future.

In Metro Vancouver, the Bloom Group (formerly St. James) offers financial management assistance to individuals who are on pension income such as Old Age Security and Canada Pension Plan.

Unable to complete her transaction, Freda walks over to a teller who asks, "How may I help?"

"I can't seem to remember how that machine works," Freda says. "Has it changed? I don't use a computer!" she cries out, embarrassed and a bit frantic.

"Here, why don't we process your transaction at the counter?" suggests the teller. Freda hands her bank card to the teller who swipes it to look at Freda's account information. "What would you like to do today?"

"Well, I'd like to take out some money, of course."

"How much?" asks the teller.

"Can you see how much I usually take out?" Freda asks. The teller finds Freda's usual amount, confirms with Freda that it is correct and withdraws the money for her. "Anything else today?"

"No, that's fine," Freda replies. The teller reminds Freda that she is welcome to come in and do any of her transactions in person at the desk and can ask for help at any time.

After Freda leaves, the teller puts a discreet message on the account. It notes Freda's usual transaction and that she tends to come in on Mondays. It also advises that if the amount or frequency of withdrawal changes, staff should be on alert. Finally, the teller comments that Freda may have memory problems and could need assistance in the future. The teller advises her manager, who replies that if other changes are noticed the bank should review the situation and decide whether a referral should be made to the appropriate agency.

RECEIVING A DIAGNOSIS

One day, Freda visits the department store where she worked before retiring. Getting to familiar places like the department store is harder than it once was. Freda arrives safely but feels exhausted from the extra effort the trip has taken and has difficulty finding the women's section. When she gets there she is overwhelmed by the number of choices and cannot understand the price tags. She begins to look for an exit and becomes panicked. Her chest tightens and she finds it challenging to breathe. Freda thinks she is having a heart attack. A passerby notices her distress and calls 9-1-1.



Freda is taken to the emergency room, where it is determined that she had a panic attack and not a heart attack. She receives a sedative and is kept overnight for observation. The next day she is visited by the physician on duty, Dr. Judy O'Donovan. Freda is calm, but shaky. In the opinion of the physician, she appears frail and speaks slowly, appearing to be hunting for her words. "Sorry to be a bother, doctor," Freda says, embarrassed and concerned that the doctor might judge her.

The First Link® Program

Many physicians refer their patients to the Alzheimer Society of B.C. directly through the First Link® program. First Link® is an early intervention service designed to connect individuals and families affected by Alzheimer's disease or another dementia with services and support as soon as possible after diagnosis. Generally a formal referral is made by a person's physician or another health care professional.

If you think First Link® may help you, contact your doctor or the Alzheimer Society of B.C. to find out if the program is available in your area.

Dr. O'Donovan orders blood tests and performs cognitive tests to check for signs of dementia. She confirms that Freda has dementia, likely Alzheimer's disease. Although the doctor is not aware of the First Link® program in her community, she does ask Freda to promise to contact the Alzheimer Society of B.C. for support services and information.

Freda is discharged from the hospital and goes back to her apartment. When she gets home she remembers that something bad has happened to her and that she has been to the hospital, but she does not remember receiving a diagnosis.

STRUGGLES AT HOME

Freda struggles to get by on her own. She can no longer keep track of her bills, including rent. When the bills come through the mail slot Freda puts them aside, then forgets about them. She finds it difficult to sleep at night, so she stays up late, playing the television loudly. Her neighbours are irritated and have called the building manager several times to complain.



One winter evening, Freda's neighbour, Laura, sees her a block away from their apartment building, wandering and wearing just a light t-shirt. Laura approaches Freda, speaking slowly and softly. She asks if she can help Freda get home. Freda is relieved as she had forgotten how. Laura walks Freda to the building and has a word with Steve, the building manager. They agree to watch for further signs of Freda needing help.

Three days later, Steve goes outside and finds Freda crying. When he tries to console her, she is unable to recognize him. He brings Freda inside

for a cup of tea and speaks with her about her work as a young woman at the department store. She is still anxious, but talking about her work seems to calm her.

Freda looks thinner than usual and her appearance is unkempt. Steve recognizes that she may have dementia but does not know how to help. He calls 9-1-1 and Freda is taken to the emergency ward at the hospital.

The Wandering Package and MedicAlert® Safely Home® Program

The Alzheimer Society of B.C.'s Wandering Package offers practical strategies to minimize the risk of wandering and prepare for situations where a person with dementia may become lost. It contains an identification kit, tips for police and other resources. It also includes information about MedicAlert® Safely Home®, a nationwide program designed to help identify the person who is lost and assist in a safe return home.

Contact the Alzheimer Society of B.C. for a Wandering Package or for more information about the MedicAlert® Safely Home® program.

TRANSITIONS

At the hospital, Freda is found to be dehydrated. Apart from that and her advancing dementia, she is fine from a medical perspective.

However, the social worker at the hospital is concerned that Freda is unable to manage health care decisions on her own. The social worker tries to explain to Freda that she is going to look for a friend or family member who may be able to act as a temporary substitute decision maker to help her make health care decisions when she is unable to or needs assistance.

The social worker shares her rationale with the practicum student who is working with her. "When a person doesn't have a representation agreement in place, a temporary substitute decision maker can make health care decisions on that person's behalf. Usually this is a close family member or friend who consults with the person as much as possible," she explains.

MAKING DECISIONS ABOUT FREDA'S CARE AND FINANCES

Despite her best efforts the social worker is unable to find someone who can act for Freda. She contacts the office of the Public Guardian and Trustee of British Columbia. After considerable investigation, the Public Guardian and Trustee confirms that Freda's financial situation requires someone to take responsibility for her financial affairs but that Freda has no family member or friend who can help by doing that.

The Public Guardian and Trustee arranges for the necessary assessments to verify Freda's incapability. It is only after this is done that the Public Guardian and Trustee is able to become committee to Freda's estate. ("Committee" is the legal term for decision maker in British Columbia. For more details see Legal Terms, page 10.)

Freda speaks with her doctor and social worker and decides that it may be best if she moves somewhere she can get the support she needs. The social worker suggests that moving to a long-term care facility is best. Freda agrees, reluctantly. Freda's care will be paid for through a combination of her own finances and government funding. How much Freda will pay is determined by her overall income. As a general rule, eighty per cent of a person's income is applied to the cost of long-term care. This co-payment ranges from a minimum of \$970.50 to a maximum of \$3,092.60 per month.

It takes Freda a while to adjust to the care facility but once she does, she settles in quite nicely. She continues to prefer to be on her own most of the time but makes one close friend, George. They enjoy chatting and watching television together.



Freda's future health, legal and financial decisions will continue to be made by the Public Guardian and Trustee. The Public Guardian and Trustee will involve Freda in all decisions as much as possible.

In many cases, Freda will be able to make minor health-care and personal decisions on her own behalf. However, if Freda cannot or if she needs assistance, a temporary substitute decision maker will be chosen for the specific health care decision that is required.

AN ALTERNATE ROUTE

WHAT IF FREDA HAD FOLLOWED SARAH'S ADVICE?

Freda did not follow Sarah's suggestion to put personal, health-care and legal plans in place. Freda told Sarah that there was no one in her life available to play this kind of role and that she did not feel comfortable building a personal support network. However, let us imagine that Freda has a nephew, Geoff.

Geoff lives in Burnaby, B.C. with his wife, Jill, and their two children. Over the years, Geoff and his family have made an effort to be involved in Freda's life – for example, they encouraged her to stay with them after she had a small surgery, invite her for Christmas and send flowers on her birthday. Freda would not report their relationship as being close (likely due to her strong, independent nature) but she does feel that they are trusted people in her life who would be there for her if she needed them. What might she do to start putting plans in place?

LEGAL TERMS

Freda should familiarize herself with some legal terms and the different arrangements she could make. Her options are also outlined on the chart on page 11.

Advance directives are legal documents in which a person sets out his or her wishes about the kind of medical treatment he or she wants and does not want in the future. Those wishes are instructions that must be followed by health-care providers. An advance directive works by allowing you to consent today (when you are still mentally capable) to medical treatment that will be provided in the future (when you are not capable of consenting). An advance directive may be useful for people without a friend or family member they feel comfortable appointing as a representative to make decisions on their behalf.

Committee is the legal term for guardian in British Columbia; the incapable person is called the "patient." If a person loses his or her ability to make decisions without having a power of attorney and/or a representation agreement in place, then a committee will need to be appointed as a substitute decision-maker.

It is also possible that someone might feel more comfortable with a greater level of oversight. They may prefer to have a committee appointed by the Court rather than appoint an attorney or a representative. Committees are required to keep detailed records and, unlike attorneys or representatives, they are also required to provide regular reports to the Public Guardian and Trustee about their dealings with the person's money and property. In some cases they may also be required to provide a report to the Court.

Enduring power of attorney is a legal document that allows one person (called the "donor") to appoint another person (called the "attorney") to make financial decisions on his or her behalf after the donor becomes mentally incapable. It is called "enduring" because it will continue to be in effect when the donor is no longer mentally capable.

Representation agreements are legal documents in which one person (the “donor”) appoints another person (the “representative”) to make health-care, personal, and (in the case of a section 7 representation agreement) routine financial decisions on his or her behalf. There are two different kinds: standard and non-standard. The type that is best for you depends on your needs, whether any other kind of decision-maker has been appointed and your own mental ability to make a representation agreement.

- **Non-standard (section 9) representation agreements** offer more flexibility for tailoring the terms to individual needs. However, a section 9 representation agreement is limited to personal and health care decisions and requires that the person be mentally capable at the time of signing.
- **Standard (section 7) representation agreements** can be made by a person who is less mentally capable. They may be especially useful for the person whose dementia has progressed beyond the early stages and who has lost the ability to manage financial affairs or to make an enduring power of attorney. This document covers health care, personal and routine financial management.

Stage	Legal Tool	Issue	Comments
Earlier stages of dementia (higher degree of mental capability required)	Non-standard (section 9) representation agreement	Health-related decisions	A legal document that appoints your chosen representative to make decisions for you regarding health and personal care when you are unable to do so. The non-standard representation agreement allows the person more scope to set terms than does the standard (section 7) version.
	COMBINED WITH: Enduring power of attorney	Financial and property decisions	A document that appoints someone you trust to make financial decisions for you when you are unable to do so.
	ALTERNATIVE: Standard (section 7) representation agreement	Personal, health-related AND routine financial decisions	The standard document that appoints your chosen representative to make decisions for you regarding health and personal care plus limited “routine” financial powers when you are unable to do so. The representative’s powers are limited by provincial legislation.
	Advance directive	Personal and health-related decisions	A legal document that records your wishes regarding future personal care and health-care treatments and can be used to inform a representation agreement.
More advanced stages of dementia (lesser degree of mental capability required)	Standard (section 7) representation agreement	Personal, health-related AND routine financial decisions	The standard document that appoints your chosen representative to make decisions for you regarding health and personal care plus limited “routine” financial powers.
Still more advanced stages of dementia (lower/lowest degree of mental capability required)	<i>Health Care (Consent) and Care Facility (Admission) Act</i>	Health-related decisions	Creates a default list of people to serve as temporary substitute decision makers only.
	Appointing a committee (guardian) under the <i>Patients Property Act</i>	Personal, health-related AND financial decisions	A court appoints a guardian (called a “committee”) to make decisions for the incapable person. A committee is usually a family member or trusted friend. The Public Guardian and Trustee may be appointed as a committee of estate when a person designated by a health authority issues a certificate of incapability.

MENTAL CAPABILITY

It is extremely important that Freda understand that a person can only appoint a substitute decision-maker or write an advance directive while he or she still has the mental capability to do so. “Mental capability” (sometimes called “mental capacity”) is a legal term that refers to a person’s mental ability to fully understand. If a person’s dementia has progressed to the point that he or she cannot understand the nature and consequences of an enduring power of attorney, for example, he or she cannot make an enduring power of attorney. For this reason, it is important that Freda put her plans in place as soon as possible.

CHOOSING A TRUSTED PERSON

Choosing someone to appoint as her power of attorney and representative is a very important decision. Freda must choose someone she trusts and who understands and respects her values, beliefs and preferences. Planning can help. Freda and Geoff will have to consider how Freda’s needs, both now and in the future, will be dealt with. Being responsible for another person’s finances under an enduring power of attorney is a serious responsibility. The more detail she can provide to Geoff about her wishes, the easier it will be for him to make the best decisions on her behalf.

FREDA CONSULTS A NOTARY

Freda visits a notary with Geoff. By asking her a series of questions, the notary determines that Freda is mentally capable of creating both an enduring power of



attorney (for financial and property decisions) and a non-standard (section 9) representation agreement (which gives the substitute decision-maker a wider range of powers relating to health and personal care).

Freda chooses to appoint Geoff as her attorney and her representative. Freda can choose anyone she wishes to appoint as a power of attorney or representative – with certain exceptions. A

paid caregiver or employee in a facility where the donor resides and receives personal or health-care services (assisted living facilities and residential care homes, for example) generally cannot be appointed.

RESOURCES

Alzheimer Society of B.C.

The Alzheimer Society of B.C. is dedicated to helping people build the knowledge, skills and confidence to live well with dementia. The Society is available to answer questions and help you find the professional assistance you need.

- Visit our website to find a Resource Centre in your area or information about legal issues and personal planning: www.alzheimerbc.org.
- Call the Dementia Helpline, a province-wide service for people with dementia, their caregivers, family and friends:
Call toll-free: 1-800-936-6033 or 604-681-8651.
- E-mail us at info@alzheimerbc.org.

BC211

A source to find community, social and government services. Free, confidential, multi-lingual and available 24/7.

www.bc211.ca

Call: 2-1-1

BC Centre for Elder & Advocacy Support

BCCEAS works to prevent elder abuse and to provide assistance and support to older adults that are, or may be, abused and those whose rights have been violated.

www.bcceas.ca

Call toll-free: 1-866-437-1940 or 604-437-1940

- Seniors Abuse & Information Line
Older adults, and those who care about them can call the Seniors Abuse & Information Line (SAIL) to talk to someone about situations where they feel they are being abused or mistreated, or to receive information about elder abuse prevention.
Call toll-free: 1-855-306-1443 or 604-428-3359

BC Notaries

Find a Notary Public office in your community.

www.notaries.bc.ca

Call toll-free: 1-800-663-0343 or 604-681-4516

BC Seniors Health Care Support Line

Information on health services, Medical Services Plan, finances, transportation, housing and other government services.

www.seniorsbc.ca

Call toll-free: 1-877-952-3181

Better Meals Program

Serving Greater Vancouver, Fraser Valley, Greater Victoria, Mid-Vancouver Island and parts of the Okanagan.

www.bettermeals.ca

Call toll-free: 1-888-838-1888 or 604-299-1877

Crisis Centre of BC Seniors' Distress Line

Available 24 hours, and confidential. Crisis intervention and suicide prevention centre.

www.crisiscentre.bc.ca

Call toll-free: 1-800-784-2433 (1-800-suicide) or 604-872-1234

Food Banks BC

www.foodbanksbc.com

Call toll-free: 1-855-498-1798

Health and Seniors Information Line

Provides assistance with cases of elder abuse.

Call toll-free: 1-800-465-4911

HealthLink BC

24-hour health information line, medical advice, assistance with navigating the system, and a translation service in 130 languages.

www.healthlinkbc.ca

Call 8-1-1 or 7-1-1 for deaf and hearing-impaired assistance (TTY)

Lawyer Referral Service

This service enables people to consult with a lawyer for up to 30 minutes for a fee of \$25.

www.cba.org/bc

Call toll-free: 1-800-663-1919 or 604-687-3221

Public Guardian and Trustee of British Columbia

Assistance for adults who need support for financial and personal decision-making.

www.trustee.bc.ca

Call toll-free: 1-800-663-7867, 604-660-4444

(Vancouver area), or 250-387-6121 (Victoria area)

MealCall Program

Check white pages of local telephone directory for Meals-on-Wheels and senior meal programs, or visit: www.mealcall.org

MedicAlert® Safely Home®

A nationwide program designed to help identify the person who is lost and assist in a safe return home. This is a partnership between the Alzheimer Society of Canada and MedicAlert.

www.medicalert.ca/safelyhome

Call toll-free: 1-855-581-3794

Nidus Personal Planning Resource Centre and Registry

Personal planning resources and assistance.

www.nidus.ca

Call toll-free: 1-877-267-5552 or 604-408-7414

The Bloom Group

In the Lower Mainland, the Bloom Group (formerly St. James) offers financial management assistance to individuals who are on pension income, such as Old Age Security and Canada Pension Plan. Individuals may be referred because they have been deemed incapable of managing their finances, financial abuse or exploitation is suspected, or where clients are behind on their rent and bills and are at risk of eviction.

www.thebloomgroup.org/adult-guardianship

Call: 604-606-0350

Tyze

A Tyze personal network is a secure, practical, web-based solution that helps connect people around someone receiving care.

www.tyze.com

Wills Clinic Project

Access Pro Bono, in partnership with the federal Department of Justice and the provincial Ministry of Justice, operates a weekly Will and Representation Agreement preparation clinic at the Vancouver Justice Access Centre for low-income seniors (ages 55+) and people with terminal illnesses.

www.accessprobono.ca/willsclinic

Call: 604-424-9600