

**RESOURCES
for HOUSING CHOICES
AND LIVING ARRANGEMENTS**

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Pre-Retirement Planning Series
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INTRODUCTION

Welcome! You have come with questions or concerns about your own current living arrangements, those of your future, or the present or future living arrangements of someone you love.

We hope this information will be really helpful in providing background for decisions you make now and in the years to come.

As change is a natural part of life and certainly of the last decades of our lives, you will likely be making a series of decisions, each based on your assessment of needs at that time. We hope you will return again and again, to use the information most helpful at that time.

Here's one DECISION-MAKING MODEL:

1. Identify the problem
2. Gather information
3. Generate options
4. Evaluate options
5. Create a plan
6. Act
7. Reassess

Repeat the process to better address the current problem or as new problems arise.

HOUSING OPTIONS AND LIVING ARRANGEMENTS In Considering “To Stay or Not to Stay”

OPTIONS IN STAYING AT HOME

One’s current house, condo, townhouse, manufactured home, or accessory unit one **owns**

- Living alone
- Living with spouse or partner
- Living with other relatives, ex. adult children, grandchildren, siblings
- Living with friends
- Living with renters not known initially

One’s current house, apartment, condo, townhouse, manufactured home, or accessory unit one **rents**

- Living alone
- Living with spouse or partner
- Living with other relatives, ex. adult children, grandchildren, siblings
- Living with friends
- Living with renters not known initially

One’s current environment, owned or rented, with or without housing companion(s), **affiliated with a Village**

- Membership-driven, grass-roots organization that, through both volunteers and paid staff,
- Coordinates access to affordable services including transportation, health and wellness programs, home repairs, social and educational activities, and other day-to-day needs

OPTIONS WHEN RELOCATING AND LEAVING CURRENT ENVIRONMENT

“Nomadic living”

- Recreational vehicle and RV communities
- Moving in with different family or friends throughout the year

Moving into home owned or rented by another

- Living with other relatives, ex. adult children, grandchildren, siblings
- Living with friends
- Living in home as renter with initially unknown person(s)

Co-Housing

- Communities are intentional, collaborative neighborhoods
- Designed to promote a close knit sense of community and neighborliness
- Increased level of contact
- Own or rent private space (ex. bedroom, bath, living area, snack center)
- Share public spaces (ex. living and recreational areas, kitchen, dining room)
- Services may or not be shared, provided and/or available for purchase
- Often intergenerational

Accessory Dwelling (“In Law”) Unit/ ADU

- Self-contained, smaller living unit on the lot of a single-family home
- Attached to the primary house, such as an above-the-garage unit or a basement unit
- In Berkeley, more typically an independent cottage or carriage-house

Multigenerational Family Compound

- May be created within single house
- Created from house with smaller accessory units on the same lot
- Created from several houses on same lot or cul-de-sac

Naturally Occurring Retirement Community (NORC)

- Neighborhoods, apartment or condo complexes
- Have large proportion of residents who are older adults (60+) but residences were not originally designed as senior housing
- Evolve naturally, as adult residents age in place
- Residents often develop caring and even caregiving relationships

Pocket Neighborhood

- A grouping of fully-equipped residences, often around a courtyard or common garden
- Communities are intentional and collaborative
- Designed to promote a close knit sense of community and neighborliness

Active Senior Adult Community

- Residents must be 55 or have one member of the couple aged 55
- Purchase or rent co-operative units, condos, duplexes, four-plexes, free-standing houses, and/or congregative living
- Focus is active aging, with activities and amenities such as golf courses
- Monthly home owners’ association fee covers property maintenance, operation of community facilities, and some recreation and community services
- May also include one time “membership transfer fee”

“Independent” Living

- Social environment without most home responsibilities
- Few or minimal services, ex. one daily meal
- Residents arrange own care and service, as necessary ex. housekeeping and functional care
- Senior or Mature Adult Housing –market rate private pay
- Affordable Housing sponsored by non-profit, if financially eligible
- Subsidized housing under government sponsorship, if financially eligible

Residential Care Facilities for the Elderly

- RCFE is California Community Care Licensing term
- Not for profit or for profit
- 24/7 staff support. Staff may or not be licensed.
- Assisted Living communities custom built as RCFE, larger, more residents
- Residential Care Homes (“Board and Care homes) are converted from residential property, smaller, home environment with fewer residents
- Processing and/or community fees, basic monthly fees
- Most communities also charge fees based on assessment of person’s needed care and services. Fees are quantified by points, levels or tiers, or ala carte. For fair comparisons of providers, research sum of all fees
- Currently in California paid privately, with long term care insurance, or Veterans Aid and Attendance
- As care is non-medical, not qualified for health insurance coverage

Memory Care

- Most California Memory Care is licensed with RCFE Dementia Waiver, in attached level of multilevel community or as stand-alone community
- Designed for persons diagnosed with conditions causing symptoms of dementia, having problems with at least two activities of daily living (ADLs)
- Designed for persons with a level of impairment making it unsafe for him or her to continue to stay at home, but who do not require a skilled nursing facility.
- Allows person to maintain a level of independence while relying on the safety and security of a 24/7 residential facility with professional staff
- Home-like settings are familiar and reassuring, with common spaces for socialization, meals and activities.
- Scheduled activities and programs designed to enhance memory, supervised by trained staff members
- Secured areas preventing wandering, but residents can enjoy indoor walking paths or outdoor paths or gardens
- Cognitively impaired residents require frequent individualized one to one response, a specially designed environment, and staff who are trained and sensitive to their special needs, so care is more expensive than in function-focused RCFE
- Processing and/or community fees, basic monthly fees
- Most communities also charge fees based on assessment of person’s needed care and services. Fees are quantified by points, levels or tiers, or ala carte. For fair comparisons of providers, research sum of all fees
- Paid privately, with long term care insurance, and less frequently, with Veterans Aid and Assistance

Multilevel Retirement Communities, Not for Profit and For Profit

- Levels may include Independent /Residential Living, Assisted Living, Skilled Nursing, Rehabilitation and/or Memory Care
- Fees for basic monthly services, processing and community
- Most have fees in Assisted Living and Memory Care for assessed level of needed care and services
- No entrance fee, no Contract to commit to care for life
- Paid privately or in levels with functional care, also with long term care insurance, Veterans Aid and Attendance

Continuing Care Retirement Communities, Not for profit or For Profit

- Must be independent in function at admission
- Independent/ Residential Living, Assisted Living, Skilled Nursing levels
- May also include Rehabilitation and/or Memory Care
- Entrance fee and monthly service fee, adjusted to entrance fee
- May have additional fees in Assisted Living and Memory Care for assessed level of needed care and services
- Paid privately and with long term care insurance, if functional care
- CCRC contract commits to care for life

Skilled Nursing Facilities (“Health Centers” or “Rehabilitation Centers”)

- For profit or not for profit
- 24/7 staff support, medically licensed staff required
- Free standing or combined with another level of care in multilevel community
- More stringent and comprehensive legislation and consumer advocacy provide oversight to avoid past “nursing home “abuse and neglect scandals
- Inspiring movements such as the Pioneer Network, Culture Change and Eden Alternative promote more person-centered care with individual choice in less medical environments
- Time limited, “medically necessary” Skilled Nursing and Rehabilitation care, usually post qualified hospital stay, covered by health insurance
- Ongoing “Custodial care” paid privately, with long term care insurance, Veterans Aid and Attendance or MediCal / Medicaid subsidy when resources are legally depleted

Age in Place or Retirement Housing: To Stay or Not to Stay?

Directions: Indicate your current monthly expenses and expenses you anticipate 5 years from now. What does this information suggest about whether you can afford to stay where you are?

1. Can I afford to stay where I am after I retire?

| Monthly Expenses | Current Expenses | Expenses in 5 years |
|---|-------------------------|----------------------------|
| Rent or mortgage | | |
| Renter/homeowner insurance | | |
| Property taxes | | |
| Property maintenance | | |
| Utilities: <ul style="list-style-type: none"> • PG&E • Water • Garbage • Cable • Telephone | | |
| Car: <ul style="list-style-type: none"> • Gas • Insurance • Registration • Maintenance | | |
| Health Care: <ul style="list-style-type: none"> • Healthcare premiums • Dental • Vision • Other out of pocket | | |
| State income taxes | | |
| Food | | |
| Other | | |
| Other | | |
| Other | | |
| TOTAL | | |

2. How might my current housing facilitate or hinder my retirement plans?

Directions: For each factor listed below, write down your thoughts and/or feelings about how it might affect your retirement plans. Then place an X beside the three factors that are most important to you.

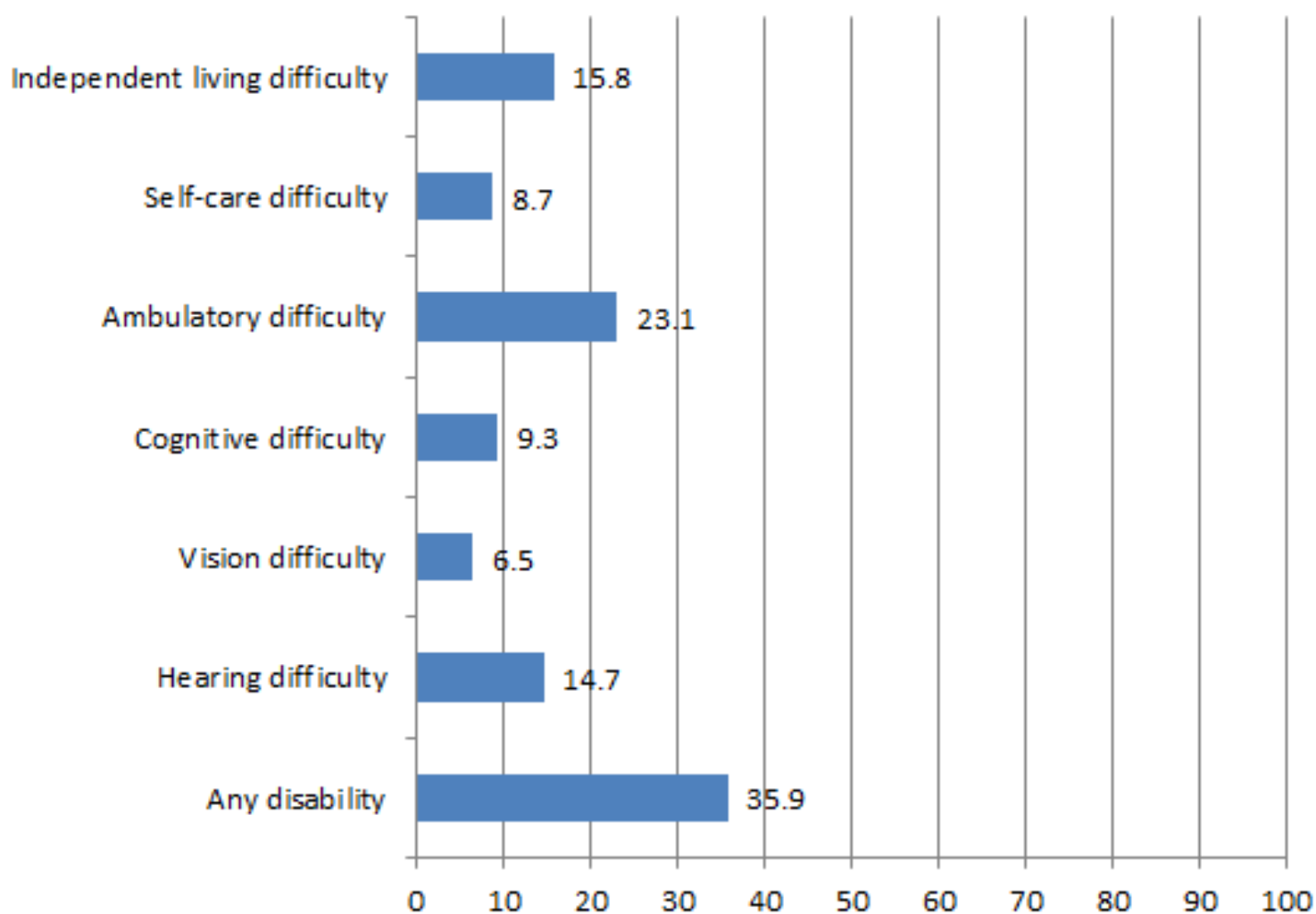
| CURRENT HOUSING FACTORS | How might your current housing facilitate or hinder your ability to achieve your retirement plans? Be specific! | How can you modify this factor to achieve your retirement plans? What would this require? Is it feasible? |
|---|--|--|
| SAFETY (of your neighborhood and/or the surrounding area) | | |
| CONVENIENCE (access to airports, public transportation, churches, shopping, etc.) | | |
| PROXIMITY TO FAMILY AND FRIENDS | | |
| SOCIAL FACTORS (availability of clubs and organizations of interest to you) | | |
| HEALTH CARE (availability of healthcare facilities, physicians, health clubs, etc.) | | |
| HOBBIES (space for pursuing hobbies at home, availability of resources, etc.) | | |

| CURRENT HOUSING FACTORS | How might your current housing facilitate or hinder your ability to achieve your retirement plans? Be specific! | How can you modify this factor to achieve your retirement plans? What would this require? Is it feasible? |
|---|--|--|
| HOUSE MAINTENANCE (time/money/effort required) | | |
| RECREATION (availability of parks and recreational areas, etc.) | | |
| ENVIRONMENT (climate, environmental hazards, air quality, etc.) | | |
| AGING FRIENDLY HOUSE (accessible features for disabilities) | | |
| OTHER | | |

Data to Consider in Your Decision-Making For Current and Future Living Arrangements

- A man reaching age 65 today can expect to live to age 84.3, on average
- A woman turning age 65 today can expect to live to age 86.6, on average
- About one out of every four 65-year-olds today will live past age 90, and one out of 10 will live past age 95
- Life span is increasing. One study of life span between 1987 and 2007 determined men were living 6.1% longer and women, 4.2%
- In 2010-2012, 42% of non-institutionalized people age 65 and over assessed their health as excellent or very good (compared to 55% for persons aged 45-64 years)
- Most older persons have at least one chronic condition and many have multiple conditions. In 2010-2012, the most frequently occurring conditions among older persons were: diagnosed arthritis (50%), all types of heart disease (30%), any cancer (24%), diagnosed diabetes (20% in 2007-2010), and hypertension (high blood pressure or taking antihypertensive medication) (72 percent in 2007-2010)
- In 2012 36% of people age 65 and over reported some type of disability (i.e., difficulty in hearing, vision, cognition, ambulation, self-care, or independent living) (Figure 9)
- The percentages for individual disabilities ranged from almost one quarter (23 percent) having an ambulatory disability to 7 percent having a vision difficulty
- Some of these disabilities may be relatively minor but others cause people to require assistance to meet important personal needs
- There is a strong relationship between disability status and reported health status
- Presence of a severe disability is also associated with lower income levels and educational attainment
- High blood pressure, diabetes and high cholesterol are known to increase the risk of cardiovascular disease, as well as the risk of developing Alzheimer's.
- And there's HOPE. Healthy lifestyle choices lower risk of these diseases and improve your health
- Physical activity recommendations include moderate intensity physical activity such as walking for prevention of chronic conditions such as obesity and cardiovascular disease.
- Regular physical exercise may also lower the risk of Alzheimer's and vascular dementia and directly benefit brain cells by increasing blood and oxygen flow in the brain

Figure 9: Percentage of Persons Age 65+ with a Disability, 2012



Source: Administration on Aging (AoA)

Evaluation Tool* for Function in Daily Living Activities

Accurate assessment of function is a critical issue as you evaluate needs, desires, resources, and safe and appropriate care and living arrangement options for yourself or your loved one.

The following surveys can help you determine the housing or personal care that's best for you or your loved one. In each category, select the one or more choices that best describe the situation of the person in need of housing or care. It is helpful to add specific notes in the margins to explain your answers or add relevant information. It is also helpful to review these ideas quarterly and when status has changed, to better assure a person's needs continue to be appropriately met.

Inability to complete these tasks alone or adequately with an adaptive device indicates the need for dependable assistance by another person. What assistance is needed? How often? Can the assistance, such as standby bathing support, be scheduled and is the person otherwise safe alone? Does someone dependable need to be available 24/7 to provide a need that might occur at any time, such as help toileting or safely moving from place to place? Can the individual in need dependably receive this 24/7 support from a person or persons where they now live or do arrangements need to be made to provide this support in the home or relocate to a setting where such staff and services are provided?

Planning ahead allows you time to share what you have learned in these surveys with your medical provider to assure health and functions are being optimized. Changes in status and decline in function frequently qualify an individual for Medicare-covered rehabilitation services to improve function and help prevent problems such as loss of muscle mass or balance which can lead to life-changing and even fatal falls.

In addition to evaluation by a physician to determine the reasons for functional challenges, you may request a referral for rehabilitation not only for physical therapy but also occupational therapy, which helps approve functioning in day to day life skills.

Evaluation for (name)_____ on (date)_____

Bathing

- Can bath without any assistance
- Requires some assistance with or occasional reminders about bathing
- Unable to bath or remember to bath without assistance

Dressing

- Can dress independently with clothing appropriate to climate, etc.
- Requires assistance or reminders with shoelaces, zippers, garments, hooks, etc.
- Dependent on others for dressing

Toileting

- Completely continent and independent in personal hygiene care
- Has incontinence, a colostomy, or catheter, but can take care of themselves
- Occasional problems with incontinence or requires assistance in personal hygiene
- Uncontrollable incontinence and/or inability to communicate needs about continency
- Requires full assistance in toileting and personal hygiene

Grooming

- Can perform all personal grooming activities without assistance.
- Requires assistance or reminders with daily grooming
- Most or all personal grooming require assistance.

Mobility

- Can move independently. Can inquire about directions and follow them. In case of an emergency, can handle the proper evacuation procedures.
- Relies on cane, walker, or wheel chair, but needs help in case of emergency.
- Mobile, but may require assistance due to physical problems or confusion.
- Needs occasional assistance to move about, but can usually get around independently.
- Requires assistance transferring from chair, toilet, or bed.
- Requires full transfer and transport assistance, including turning in bed and wheelchair.

Nutrition

- Able to prepare and eat meals without assistance.
- Can perform some meal preparation, but main meal must be prepared by others.
- All meals need to be prepared and served by others.
- Requires assistance when eating (i.e. pouring, cutting, opening packages).
- Totally dependent on others for nourishment, including reminders and assistance.

Housekeeping

- Can perform housekeeping functions (i.e. bedmaking, vacuuming, cleaning and laundry).
- Needs assistance with housekeeping.
- Laundry and housekeeping services must be provided by others.

Medications

- Can handle the self-administration of medications and medical regimes.
- Can handle self-administration, but needs reminders or monitoring.
- A medication administration system has been arranged with reminders and monitoring.
- Licensed personnel must administer and oversee medications and medical regimes.

Mental Awareness

- Memory, reasoning, judgment, and other cognitive abilities are intact
- Able to reason. Memory is alright, but has occasional bouts of forgetfulness.
- Requires guidance to get around. Has occasional bouts of confusion and disorientation.
- Requires orientation assistance and reminders due to poor judgment skills.
- Unable to follow directions. Orientation, memory, and judgment skills are severely impaired.

Behavior

- Performs well in a social setting. Emotions are under control.
- Requires periodic assistance with coping with stress or other emotional issues.
- Requires regular assistance with coping with stress or other emotional issues.
- Poses potential for physical injury to self or others. Requires monitoring at all times.

*The above functional survey was adapted from that offered online at www.AlternativesforSeniors.com. Completion of this survey online guides their recommendations of services and housing options they represent. Appropriate and satisfactory support in these areas is often critical to independence, safety, and quality of life

Below is a survey of other day to day functional needs that are important to assess. If the individual is unable to complete these or the above tasks alone or adequately with an adaptive device and needs the assistance of another person, it is important to make plans for that reliable assistance, as well. Appropriate and satisfactory support in these areas positively affects independence, safety, and quality of life.

Money Management

- Able to manage money and check book without assistance
- Requires occasional assistance with money management and check book
- Dependent on another to manage money and check book

Use of Telephone

- Able to make and receive telephone calls independently and effectively
- Able to make and receive telephone calls, but may need occasional assistance
- Dependent on another to make and/or receive telephone calls

Shopping

- Able to shop without any assistance
- Requires occasional assistance to shop
- Unable to shop without assistance of other

Dependent on another to do shopping

Laundry

Able to do own laundry without any assistance

Requires occasional assistance to do laundry

Dependent on another to do laundry

Yard Work

Environment does not require yard work

Able to do own yard work without any assistance

Requires occasional assistance to do yard work

Dependent on another to do yard work

Home Repair

Environment does not require home repair

Able to do own home repair without any assistance

Requires occasional assistance to do home repair

Dependent on another to do home repair

Pet Care

Does not have a pet

Able to provide care for pet without assistance

Requires occasional assistance with pet care

Dependent on another to manage pet care

Other Needs to Consider for Living Option Planning:

Home Assessment Checklist

It is important to do a thorough assessment of the home to assure that it can properly enable functioning rather than hinder it. The following table provides a summary of items to consider.

| Difficulty | Possible Remedy |
|--|---|
| Balance and Coordination | Bath seat in the tub or shower |
| | Bath tub with transfer bench |
| | Rounded counter edges |
| | Grab bars near the bath and toilet |
| | Handrails extend beyond the top and bottom of the stairs |
| | No stairs to bedroom or bathroom |
| | Phone in the bathroom |
| | Stairway handrails on both sides |
| | Walk-in shower with pull-down seat |
| | Hearing Impairment |
| Increased volume on phones | |
| Smoke detectors with strobe lights | |
| Strobe light or vibrator assisted doorbell | |
| Limited Reach | Cabinet shelves no more than 10 inches deep |
| | Closet organizer to reach belongings |
| | Closet rods pull down to a comfortable level |
| | Front loading clothes washer and dryer |
| | Cook top has easy-to-reach controls at the front |
| | Electrical outlets 27 inches above the floor |
| | Hand-held shower in bathroom |
| | Kitchen and closets with pull-down shelving |
| | Lazy Susan to reach things stored on deep shelves |
| | Microwave oven located no higher than 48 inches above the floor |
| | Oven doors swing to the side |
| | Pull-out shelves in the kitchen |
| | Side-by-side refrigerator |
| | Controls on the side of sink |

| | |
|---------------------------------|---|
| Vision Changes | Edge of counters a different color than the top |
| | Edge of each step a color that stands out |
| | Increased wattage of light bulbs |
| | Lights in all closets |
| | Well lit outside walkways and entrances |
| | Well lit stairs |
| | Steps a different color than the surrounding area |
| | Stove controls clearly marked and easy to see |
| | Stove has big numbers that can be seen from across the room |
| | Stove uses different colors to tell which parts are hot |
| | Under-the-cabinet lights over kitchen counters |
| | Non-glare matte paint finishes, flooring and countertops |
| Hand and Arm Strength | Automatic garage door opener |
| | Cabinets and drawers have D-shape handles |
| | Countertops smooth so heavy pans can slide across them |
| | Doors have lever handles |
| | Garbage disposal to reduce trash |
| | Heat-resistant counter near microwave oven |
| | Push-button controls on appliances |
| | Rocker light switches |
| | Sinks with lever faucet handles |
| | Special hardware to make drawers slide easily |
| | Spray hose to fill pots on the stove |
| | Trash compactor to minimize trash bags |
| | Dishwasher eight inches from the floor |
| | Easy to open sliding doors and windows |
| Bending over, getting up | Elevated toilet or toilet seat |
| | Lower kitchen cabinets six inches above the floor |
| | Sink no more than six inches deep |
| | Chairs with sturdy arms |
| | Firm seat cushions at least 18" off floor |
| | Countertop that can be used while sitting |
| | Appliances have controls at the front |
| | Electrical outlets at minimum of 18" instead of 12" |

| | |
|-----------------------------|---|
| Walking and Climbing Stairs | Smooth, but not slippery, driveway |
| | Smooth and slip-resistant floors |
| | Stairs have slip-resistant surface with marked edges |
| | No area rugs |
| | Ramp to front door with handrails on both sides |
| | Handrails |
| | The threshold on door are no higher than 1/4 inch |
| Uses a Wheelchair | Smooth floors; carpet with low pile and a firm pad |
| | Doors and hallways wide enough for a wheelchair (36" with off-set hinges) |
| | Can wheel to bedroom, bathroom, and kitchen |
| | Can wheel from car to the front door and then inside |
| | Enough floor space near doors to move wheelchair |
| | Ramp to front door with landings at bottom and top |
| | Ramp with an edging/railing |
| | Smooth, but not slippery, walkway and driveway |
| | Clutter and electric cords out of pathways |
| | Closet rods pull down to a comfortable level |
| | "Walk-in" closet wide enough for wheelchair |
| | Pull-out cabinet shelves no more than 10 inches deep |
| | Lazy Susan to reach things stored on deep shelves |
| | Can use counter while sitting in a wheelchair |
| | Heat-resistant counter near microwave oven |
| | Knee space under all sinks |
| | Knee space under the stove, can sit while cooking |
| | Side-by-side refrigerator |
| | Appliances have controls at the front |
| | Microwave oven no higher than 48 inches above the floor |
| | Oven doors swing to the side |
| | Roll-in shower with seat and/or way to transfer to tub |
| | Hand-held shower |
| | Space to transfer from wheelchair to toilet |
| | Threshold on door is 1/4 inch or less |

Falls Prevention Checklist

| Area | Observation | Remedy |
|------------------|---|---|
| Floors | When you walk through a room, do you have to walk around furniture? | When you walk through a room, do you have to walk around furniture? |
| Floors | Throw rugs on the floor? | Remove the rugs or use double-sided tape or a non-slip backing so the rugs won't slip |
| Floors | Are papers, magazines, books, shoes, boxes, blankets, towels, or other objects on the floor? | Always keep objects off the floor. |
| Floors | Do you have to walk over or around cords or wires (like cords from lamps, extension cords, or telephone cords)? | Coil or tape cords and wires next to the wall so you can't trip over them. Have an electrician put in another outlet. |
| Stairs and Steps | Are papers, shoes, books, or other objects on the stairs? | Keep objects off the stairs. |
| Stairs and Steps | Are some steps broken or uneven? | Fix loose or uneven steps. |
| Stairs and Steps | Are you missing a light over the stairway? | Have an electrician put in an overhead light at the top and bottom of the stairs. |
| Stairs and Steps | Do you have only one light switch for your stairs? | Have an electrician put in a light switch at the top and bottom of the stairs. |
| Stairs and Steps | Is there a sturdy handrail on only one side of the stairs? | Make sure handrails are on both sides of the stairs and are as long as the stairs. |
| Stairs and Steps | Is the carpet on the steps loose or torn? | Make sure the carpet is firmly attached to every step or remove the carpet and attach non-slip rubber treads to the stairs. |
| Kitchens | Are the things you use often on high shelves? | Keep things you use often on the lower shelves (about waist high). |
| Kitchens | Is your step stool unsteady? | Use a steady step stool with a bar to hold on to. |
| Bedrooms | Is the light near the bed hard to reach? | Place a lamp close to the bed Use a night-light. |
| Bathrooms | Is the tub or shower floor slippery? | Put a non-slip rubber mat or self-stick strips on the floor of the tub or shower. |
| Bathrooms | Do you have some support when you get in and out of the tub or up from the toilet? | Install grab bar inside the tub and next to the toilet. |

Other Things You Can Do To Prevent Falls

1. Exercise regularly. Exercise makes you stronger and improves your balance and coordination.
2. Have your doctor or pharmacist look at all the medicines you take, even over-the-counter medicines. Some medicines can make you sleepy or dizzy.
3. Have your vision checked at least once a year by an eye doctor. Poor vision can increase your risk of falling.
4. Get up slowly after you sit or lie down.
5. Wear sturdy shoes with thin, non-slip soles. Avoid slippers and running shoes with thick soles.
6. Improve the lighting in your home. Use brighter light bulbs (at least 60 watts). Use lamp shades or frosted bulbs to reduce glare.
7. Use reflecting tape at the top and bottom of the stairs so you can see them better.
8. Paint doorsills a different color to prevent tripping.

Home and Community –Based Services Often Needed to Support Aging in Place in One’s Home

According to a much cited AARP poll, nearly 90% of Americans over 65 want to stay in their own homes as they age. However, at some point they are likely to need help and support to stay there. Home and community-based service providers can offer everything from help with the chores to health care services, for a fee. Also, if you are taking care of a family member or friend, these services can give you needed relief and support. Sources for information about your local services include this reader, family and friends, medical/ tax/ legal/ religious and spiritual professionals, your Area Agency on Aging, Eldercare Locator, geriatric care managers, and resource directories such as those compiled by local congress people.

Home and community-based services (HCBS) include:

- **Adult Day Care:** Provides a variety of health, social and related support services in a safe setting during the day. Some day care programs are designed especially for people with Alzheimer's disease.
- **Care Managers:** Helps people figure out what services are needed and what services. Together, managers and their clients come up with a care plan that best fits an individual's lifestyle and arranges the services.
- **Congregate Meal Programs:** Offer free or low-cost meals in group settings (often in a senior center or senior housing).
- **Financial Counseling Programs:** Help an individual balance a checkbook, file taxes and pay bills. They also help with Medicaid, Medicare or other insurance forms.
- **Friendly Visiting:** Provides volunteers who will come to visit and talk in a person's home.

Home Delivered Meals: Provides balanced meal for persons unable to prepare a meals themselves or who have no one available to prepare a meal

- **Home Health Care Services:** Include part-time nursing services, personal care, medical supplies or equipment and different kinds of therapies (physical, occupational, and speech) to help a person recover from an illness or surgery. With doctor’s referral because of a person’s change in medical or functional status, medical insurance may cover.
- **Homemaker or Chore Services:** Helps with different chores around the house, such as cleaning, preparing meals or doing laundry. They also help with harder tasks such as washing floors, windows and walls and shoveling snow.

- **Hospice Care:** Provides comfort, nursing care and other services, such as grief counseling, to people who are dying (and their families). Hospice care is provided in your home, in a nursing facility or in a free-standing hospice.
- **Home-Delivered Meals:** Bring meals in to individuals if they cannot prepare them on their own.
- **Information and Assistance Services:** Offer information about services and resources in the area.

In Home Care Services: Includes services not covered by medical insurance, such as companionship care, personal care (bathing, dressing, grooming, toileting, incontinence care), meal preparation, housekeeping, transportation, respite care, hospice support, 24 hour and live -in

- **Personal Care Services:** Provide help with things like bathing and dressing.
- **Respite Care:** Gives families a break from caring for older people who are unable to care for themselves. Respite care can take place in the older person's or caregiver's home.
- **Rehabilitation Services:** Offer different kinds of therapies (physical, occupational, and speech) to help a person recover from an illness or surgery.
- **Senior Centers:** Provide a place where people can come together for social and recreational activities.
- **Telephone Reassurance:** Provides a daily call and check on someone on a regular basis.
- **Transportation Services:** Helps people get to and from shopping centers, doctor's appointments, senior centers and other places.

Age in Place or Retirement Housing: Should I Relocate?

Make a list of all the reasons you think you should relocate:

| What will you miss? | What will you gain? |
|---------------------|---------------------|
| | |

Identifying a Relocation Destination

There are many excellent sources of information about possible retirement destinations. It is strongly recommended that you identify your specific requirements before you consult these sources, as this will make your process much easier. Here are some factors to consider:

| Considerations | What are you looking for related to this item? Be specific! | How important is this factor to you? Rank it. |
|--|--|--|
| Housing costs | | |
| Other costs: <ul style="list-style-type: none"> • Property taxes • Income tax • Car insurance • Food • Moving costs | | |
| Climate | | |
| Safety | | |
| Recreational facilities | | |
| Health care facilities | | |
| Public transportation | | |
| Community life | | |
| Environmental hazards | | |
| Other | | |
| Other | | |
| Other | | |

Note: Many of these ideas for residents moving to Baywood Court Retirement Community in Castro Valley, CA are also very relevant for anyone considering moving to a new housing setting with other people.

MAKING THIS MOVE ALL YOU HOPE IT WILL BE Advice from Residents Who Have Moved Before You

The key to successful adaptation is a realistic expectation of your new life, surroundings and fellow Residents. Since you're probably like most people who move to a retirement community, you may have some challenges, such as the following:

- ❖ There is never room for all the things you love and want around you. You must dispose of possessions of value and memories, and you'll mourn these losses.
- ❖ You'll still find trouble storing everything you do bring with you. You may feel crowded, so try to choose your very favorite items.
- ❖ People who don't know Baywood Court may try to dissuade you from moving to an "old folk's home." Little do they know just how active residents are here and how much goes on. When you invite them to visit you after your move, they can see for themselves.
- ❖ You may not be used to living under the same roof with people you aren't related to, who haven't become friends yet.
- ❖ There will be some rules and guidelines in your daily life, such as when you eat and how loudly you play your stereo. You will need to sign out when you leave overnight and signal you're alive and well each morning. But once you are in a routine, these things will be a normal part of your day and understandable for safety and community cooperation.
- ❖ You may feel like you're a new kid in school - concerned about whether others like and accept you. You may be afraid of looking or acting out of place or making mistakes. However, the good news is, everyone has been in the same boat, so we all understand.
- ❖ Baywood food will differ from that you cooked in your own kitchen or had cooked for you at home. You may find yourself eating more and needing to watch your weight, with more varied and special occasion meals and frequent refreshments. Our many exercise classes and easy-to-walk neighborhood will help you keep fit.
- ❖ You may miss old friends and neighbors, and especially your home. Adjusting to this new life chapter may take time, but eventually it will feel like home.

There are also MANY advantages to living in a community, and you will hopefully conclude that your choice was right due to the many pluses, such as:

- ❖ There are many opportunities for making new friends, with a number of people who you will find congenial. You may find, as some do, that you have more friends than you've had for years.
- ❖ You'll enjoy the ease of sociability. You can walk down the hall and be greeted and easily get together with friends without having to worry about transportation between your homes. You can socialize and be involved, but also enjoy solitude. There are spaces to be with people or alone.
- ❖ Even if you're not particularly outgoing, you'll have more opportunity to be with people and can socialize with less effort.
- ❖ You'll expand your horizons, living with people from a variety of backgrounds and experiences. Because you've chosen the same retirement community, however, you are more likely to share values and interests.
- ❖ You'll have classes and activities to enjoy under the same roof, and opportunities to develop new interests.
- ❖ You'll have new opportunities for involvement and leadership. You'll find a number of ways to make a meaningful contribution to your community.
- ❖ You have the comfort and reassurance of living in community, with staff on duty 24/7 who will call for emergency assistance if you are in need. We can also call your family to make them aware of what has happened and where you are. We work together as a team with you and your family to make sure you have the appropriate care and assistance you may need at any time.
- ❖ You'll still be under the same roof as friends and activities you've enjoyed, should your health change and you need daily help from care staff.
- ❖ You'll be free as never before, with staff to take care of the yard, the gardens, the shopping, cooking and cleanup. You can choose how to spend your time with fewer "have-tos".
- ❖ By making a move to community like Baywood Court, you're indicating you like to be in charge of your life and plan ahead. You want to save family and friends' responsibility and worry later.

You might be interested in comparing yourself with the personality traits and strengths of people who make the adjustment most easily and successfully:

- ❖ You took primary responsibility for this move and exploring the idea of retirement community living.
- ❖ You have a history of successful moves and transitions already, and see this as just another kind of adjustment you'll be able to make successfully.
- ❖ You are tolerant of people with different backgrounds, experiences, and values, of people who may dress and behave differently than you. You're able to find something to like about someone different than you and in each person you meet.
- ❖ You're flexible. If the furniture you bought to better fit your apartment's scale doesn't arrive when it was supposed to, you adapt – with humor-- and get creative until it does.
- ❖ You're able to be socially assertive. You're able to say the first hello, and ask to join a group of strangers. You offer your company, rather than waiting hesitantly to be asked.
- ❖ You have confidence in your likeability, and are not easily hurt. If someone doesn't say hello, you assume they didn't hear you, rather that they didn't like you. You can understand when a threesome might be waiting for their usual fourth at dinner when you ask if you can join them.
- ❖ You're accepting of your own aging process and confident of your ability to handle any changes. Even if you should suffer illness and disability, you would be able to "make a bouquet of those flowers within reach."
- ❖ You are comfortable around those who may be disabled or having trouble with their memory. You are able to see their strengths and ways they are likeable, realizing that one day it may be you in the same boat. You treat others how you would like to be treated.
- ❖ You are emotionally stable. You can understand feelings of sadness and loss as normal, because your move has caused losses of home, possessions, memories, friends, associations, activities, and familiar helping people. You are confident that you will get through these feelings and make a new satisfying, happy life for yourself.
- ❖ You are patient with yourself. You are ready to give yourself the time you need to make adjustments, even if it is a year or more. You don't expect things to be perfect and you don't blame yourself for conditions you can't improve.
- ❖ This decision to make a new life at Baywood Court feels right, and you have confidence that you will make new friends, find new interests, and enjoy meaningful ways of spending your time. You see this new stage as another beginning, not an ending. You are generally able to look back at your life and feel pleased with your relationships and accomplishment. You expect to find meaning and satisfaction in the rest of your years, as well.
- ❖ **MOVING IS AN EXCITING, FRUSTRATING, TIRING, EXPENSIVE, ANXIOUS, AND HOPEFUL EXPERIENCE.** If you feel overwhelmed or a bit concerned about your own capacities for the most successful adjustment, please reach out and ask for help - from family, friends, professionals, and the staff at Baywood Court.
- ❖ **WE'RE CONFIDENT YOU'RE GOING TO HELP MAKE BAYWOOD COURT A GREAT COMMUNITY!**

MAKING YOUR NEXT MOVE, YOUR BEST MOVE

Written by Greg Gunderson, Gentle Transitions

"I've been living in my home for 43 years. I've accumulated and collected things all my life. Now I'm contemplating a move to a smaller place. Can I even do this? Where do I begin? Where do I start?" This is the sentiment of many seniors when contemplating a move.

No matter the age, moving is difficult. Most dread the process and are pleased to have simply survived the procedure. It ranks as one of life's most difficult events along with loss of a spouse, divorce, and job change.

Moving is Particularly Challenging for Seniors

For seniors, moving is dramatically more challenging. There are four identifiable impediments to the moving process. Those impediments are:

- 1 – leaving a home after many years
- 2 – moving to a smaller place
- 3 – diminished health
- 4 – lack of available assistance from family members.

Almost always when seniors move they are leaving a home after 20, 30, 40 years and much more. Moving is more than just a physical change of place, it's an emotional experience leaving a home where children were raised, holidays took place and more.

During the early parts of our lives, most are moving to larger places, but during the latter part of our lives, we are almost always moving to smaller places. This brings about the most difficult aspect for seniors when making a move...making decisions about every personal possession in a home from garden tools in the garage to china in the dining room and family photos in the den. This aspect alone is enough for many seniors to put off making a move even when they want to move for other reasons.

Most seniors face some kind of health issues. Even seemingly minor things like a back not working well or decreased stamina can become major hurdles to making a successful move.

Finally, in today's world families are spread out across states and across the country or are busy with dual careers and the pace of life as we know today. This makes assistance from family members less likely and presents yet another challenge for a senior when contemplating a move.

Taking into account the challenges, it may seem that making a move for a senior is impossible. While it's not easy, it is doable. Many seniors move each year and many

find they are much better off for making that move. This article will attempt to share some of the keys to making a successful and workable move.

Moving Tips and Techniques

Of the many challenges when moving, downsizing is clearly the most difficult. Many have accumulated items of every shape and size from photo albums in the den to collectables in the curio cabinet and papers in the office. Decisions need to be made about every personal possession in a home. Here are some tips on how to approach the decision making process, how to select furniture for the new place, and general tips on the overall moving process.

Downsizing Tips

+ Sort through easy and obvious areas first! Don't start with the taxes and paperwork. If you do, it will take you two hours to go through two inches of paperwork and you'll feel like you could never do the entire house. Rather, start with areas that are easy and obvious. It might be things that obviously move (like from your bedroom) or items that obviously don't move (from a room that is not used). You will see success with easier areas and that will give you much needed practice for later when you tackle the more challenging areas in the home.

+ Be happy to sort for a few hours at a time. Even younger people find that a few hours of decision making can be taxing. Start with small goals, "Today, I'm going to sort through the linen closet" or "This week I'm going to sort through the kid's bedroom." Like with any large project, set yourself up for small successes.

+ Use colored stickers/labels/post-it notes to identify the disposition of items. Small colored stickers easily identify items yet are unobtrusive enough to still show a house for realtors. Stickers take a lot less time than making an exhausting list in a legal pad. The stickers are helpful to others as well. Family members can see the decisions that have been made. Movers can also follow the stickers when they arrive to know what items move and what do not. For cabinets, shelves, and drawers, one can rearrange items based on whether they are moving or not. For instance, "the top shelf moves and the bottom shelf does not."

+ Assess practicality and sentimentality. Consider the practicality and sentimentality of an item. Items that are both practical and sentimental should move. Items that are neither should be left for family, sale, or charity. The challenge will lie in items that are one and not the other. Remember that it is the sentimental items that make our home special and that bringing those items is just as important as the shoes we wear or the plates we use.

+ Always consider available space at the new place. If you have a full kitchen now and you are moving to a place with a kitchenette you will obviously need to downsize quite

a bit. On the other hand, if your new place has a good-sized kitchen, you won't have to work so hard to pair-down. This is applicable to toiletries in the bathroom, books in the den, and any other storage areas in the house. If you have a lot of available space in the new place, don't spend a lot of time downsizing when it's not needed. Remember that built-in furniture will not be making the move with you and that you will need a place to put those items in the new place.

+ Eliminate items that are duplicates or are the wrong size. Whether its clothes, towels, or cookware, it will be a benefit to eliminate duplicates of the same kind of item. You probably will only need two or three sets of towels rather than six. Bring two umbrellas rather than five. When it comes to clothing, keep in mind that many of us change sizes over time (some bigger, some smaller), so eliminate clothes that don't fit anymore. Party size kitchenware likewise can be left behind.

Furniture Planning

+ Since most will be moving to a smaller new home that will impact the amount of furniture they bring too. The good news is that most will make good use of the furniture they have in their new place.

+ Be open to use furniture in different ways. Many are so used to how a piece is used, they can't think about it in a different way. A good example is a desk. Many have a big desk from the office to do paperwork and things, but obviously don't have room at the new place. But they do have a secretary desk in a den that has only been used as a showpiece. In this case, the secretary desk might be converted into a working desk, take up less space, and be more attractive looking.

+ Combine furniture from different rooms. For most who have been in a home for many years, they will have a living room and a den/family room. The den/family room is used daily and the living room rarely. In a smaller place, these two rooms are usually combined. Consider combining some of the furniture pieces that you enjoy every day (the favorite TV or reading chair) with a piece or two from the living room to give that a room a more "dressed up" feeling for times when friends and family visit. Living room items like a curio cabinet, nice chair, or end tables can "dress up" family room furniture. It's also ok to break up sets. Think of yourself first. If you like your bedroom set, but need a smaller bed, then get a smaller bed and keep the rest of the set. Many are too concerned about breaking up a set when the difference in resale value is actually quite small.

+ Avoid furniture shopping. Many think that they need to buy new furniture to fit their smaller place. Some may want to buy new furniture to go along with a "fresh start." On the other hand, many would be surprised that they actually have furniture pieces in the house that might fit the need. For instance, bring the love seat from the den rather than the large sofa from the living room. Also, furniture shopping is not easy. It's

often difficult to find the right style, right color, and right size furniture piece at a time when your To Do List is already too big.

Other Important Moving Tips

+ Understand that wanting more time is not always best. Many think they need more and more time to make the move happen...to allow time to go through everything in the house. On the other hand, allowing more time to do all that, also stretches out the anxiety about the pending move and there is a point of diminishing returns. Select a time frame that pushes yourself a little bit yet doesn't stretch out the process that it becomes a drag on you.

+ Call charities well in advance and have a back-up plan. One might think that a charity is so happy to have your donated items that they will be right over to pick them up. Such is not the case. Plan at least a week or more in advance to schedule a pick-up. Charities understandably have become more "picky" about what they will pick-up and what they won't. In most cases, the charity truck driver can decide what he takes and what he doesn't. For this reason, it's good to have a back up plan and not wait until the very last minute for the charity to arrive.

+ Consider engaging an estate sale group to sell remaining items. Arrange for an estate sale group to conduct a sale after you have moved. This way there is no confusion about what you are keeping and what is for the sale. Better yet, the estate sale group will sell everything from canned food to the washer and dryer without you lifting a finger. Check with a local realtor, church, local newspaper, or internet to find an estate sale group in your area. Estate sales groups usually keep about a third of the proceeds from the sale leaving you two-thirds of the proceeds...a bargain if you consider the amount of work involved.

+ Self Storage. Storage locations are readily available and can be rented in almost any size you need. However, use storage as an absolute "last resort." If you have a special family item that a niece will want when she graduates college, ok. Otherwise, most people find that it costs a lot to get things into storage, storage is expensive, and once the stuff is there, it's even more difficult to sort through.

+ Moving Day. Even before the day starts, most are drained emotionally and physically from the "build-up" to the move so help from others can be a real plus. Recruit as much as help as possible on moving day from friends and family. Leave others "in charge" for at least part of the day and allow yourself time away from the move itself. At the new place, know that the sooner you can be unpacked and settled, the more you will feel "at home" in your new environment. Family and friends can help with this process and senior move managers can be invaluable to the entire process (see below).

Professional Relocation Assistance Now Available

While many seniors and family members are aware of retirement communities, realtors, and moving trucks, very few are aware that there is now a new industry designed specifically to assist seniors with moving.

This industry is known as senior move management and is designed to help with all aspects of moving for seniors. Senior move managers develop floor plans, sort through belongings, coordinate with family members, make utility changes, conduct packing, arrange for movers, and completely unpack and resettle the new place on moving day.

Imagine moving day at the new place, with furniture in place, boxes unpacked, pictures hung, TVs and phones connected, and the bed made. This is possible with a senior move manager and can make a dramatic difference in the moving experience.

This new industry as formed an association known as The National Association of Senior Move Managers (NASMM, www.nasmm.com). Locally in the Bay Area is one of the founding members of that association, the company is known as Gentle Transitions (www.gentletransitions.com). The company has been serving California seniors for nearly 20 years and has provided services at more than 400 retirement communities.

There is Light at the End of the Tunnel

While moving is not easy, it is entirely 100% doable. Many want to make a move for a number of very good reasons, but wind up delaying a move because they are intimidated and overwhelmed with the moving process. Following these tips here along with the proper planning and/or engaging a senior move manager can make the process quite workable.

Many comment after a move that they only wish they had moved earlier. Further and to their surprise, many feel “liberated” by not having the “weight” of all their things and find themselves quite pleased with their new environment. Many find themselves invigorated by their new home and look and act younger than ever before.

Prepared by: Greg Gunderson
Gentle
Transitions
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www.gentletransitions.com
greg@gentletransitions.com

Moving Tips for Older Adults



Planning, Planning, Planning

- Make "to do" lists and a moving calendar
- Select a moving date
- Make arrangements with family, new community, realtors, movers, etc.

Draw a Floorplan

- Measure the new place and current furniture
- Assess the practicality of your furniture
- Discuss sentimentality of furniture pieces selected
- Be open to using furniture in different ways than what is done currently

Conduct Sorting/Downsizing Process

- Do easy and obvious areas first
- Sort for only a few hours at a time
- Use colored stickers and labels to identify what items go where
- Decide first what you want and/or need
- Decide later what to do with the things you don't want

Disposing of Unwanted Items

- Call charities well in advance to arrange for pick-ups
- Have a back-up plan if the charity does not take certain items
- Check local papers, realtors, or churches for people who conduct sales

Utility Changes

- A checkbook is a good place to begin a list of address changes
- Complete address change for post office 10 days before the move
- Make sure you have phone service in both places on moving day

Packing

- Separate packing from decision making
- Pack items you need least, first

Hiring a Mover

- Smaller, local moving companies are usually best for local moves
- Request the mover visit your home and provide you with an estimate
- Discuss insurance with your mover prior to moving day

Moving Day

- Recruit lots of family help
- Consider leaving family in charge and taking a rest during the day
- Keep important medications (even unexpected ones) with you
- Plan on unpacking as much as possible to feel and be "settled in"
- Arrange for someone to help in the days following the move



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www.gentletransitions.com | (800) 619-3049



HOUSING AND LIVING ARRANGEMENTS RESOURCES

At UC

The UC Berkeley Retirement Center

101 University Hall

Berkeley, CA 94720-1550

phone: (510) 642-5461 **fax:** (510) 643-1460

walk-in hours: Monday-Friday, 1pm-4pm

email: ucbrc@berkeley.edu

web: <http://retirement.berkeley.edu>

Housing and Dining Services- CalRentals

2610 Channing Way, 2nd Floor

Berkeley, CA 94704

phone: (510) 642-3644

email: homeinfo@berkeley.edu

web: <http://calrentals.housing.berkeley.edu> (listings for community rentals; modest fee)

Organizations

Alameda County Adult and Aging Services

6955 Foothill Boulevard, 3rd Floor, Oakland CA 94605

web: <http://www.acgov.org/adults/adults.htm>

Alameda County Area Agency on Aging

phone: (510) 577-3530

web: alamedasocialservices.org/public/services/elders_and_disabled_adults/area_agency_on_aging.cfm

The AAA provides subcontracted services to persons aged 60 and older through grants from the Federal Administration on Aging, State of California, and the County of Alameda.

Alameda County AAA publishes and provides online comprehensive resource guides on services for older people in North, South, and Central Alameda County and a Housing Guide to Senior Housing at the Independent Living level. By request, Information and Referral staff can also provide resource guides for Retirement Residences and Continuing Care, Geriatric Care Managers and other Private Services, and Placement Agencies.

Alameda County AAA subcontracted services include Adult Day Care, Alzheimer's Services (Day Care and Respite), Case Management (Social Worker), Community Services, Disease Prevention, Elder Abuse Prevention, Family Caregiver Support Program,

Food Services (congregate meals, as well as home delivered), Friendly Visitor/Telephone Reassurance, Health Insurance Counseling and Advocacy Services (HICAP), Health Services, Information & Assistance, Legal Services, Ombudsman Services (for those in long term care facilities), Respite Services (short-term) and Senior Center Services.

Contra Costa Aging and Adult Services Area Agency on Aging

400 Ellinwood Way
Pleasant Hill, CA 94523

phone: (800) 510-2020

web: <http://www.co.contra-costa.ca.us/index.aspx?NID=3440>

The Contra Costa AAA provides subcontracted services to persons aged 60 and older through grants from the Federal Administration on Aging Older Americans' Act and the California Department on Aging. The Contra Costa County Board of Supervisors provides required match funds for specified programs. Subcontracted services include Adult Day Care, Ombudsman Services (for those in long term care facilities), Services for Caregivers, Outreach to Seniors, Congregate and Home Delivered meals, Transportation Assistance, Health Insurance Counseling and Advocacy (HICAP), Legal Services, Community Advocacy, Information and Assistance.

National Association of Area Agencies on Aging

Is the membership association representing America's national network of 618 Area Agencies on Aging (AAAs) and providing a voice in the nation's capital for the 246 Title VI Native American aging programs.

web: www.N4a.org

Eldercare Locator, affiliated with AAAs/ Administration on Aging

phone: (800) 677-1116

web: <http://www.eldercare.gov>

Eldercare Locator is a public service of the U.S. Administration on Aging that connects older adults and their families with a variety of services. The website contains a locator tool that can be searched by location or subject (such as "housing options") and also provides a number of publications relevant to eldercare.

Alzheimer's Association, National Office

225 N. Michigan Ave., Fl. 17, Chicago, IL 60601

phone: 24/7 Helpline: (800) 272-3900

web: www.alz.org

Our vision is a world without Alzheimer's. Formed in 1980, the Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support and research. Alzheimer's Association national site – information on Alzheimer's disease and dementia symptoms, diagnosis, stages, treatment, care and support resources.

Alzheimer's Association, East Bay office

3675 Mt. Diablo Blvd., Suite 250
Lafayette, CA 94549

phone: (925) 284-7942

24 Hour Helpline: (800) 272-3900

email: norcal-info@alz.org

web: www.alz.org/norcal

The Alzheimer's Association advances research to end Alzheimer's and dementia while advancing care for those living with the disease. Information on dementias, Alzheimer's', related caregiver issues and resources.

AARP, formerly the American Association of Retired Persons

601 E Street, NW Washington, DC 20049

phone: (800) 687-2277 (1-888-OUR AARP)

web: <http://www.aarp.org>

AARP is a membership organization leading positive social change and delivering value to people age 50 and over through information, advocacy, and service

Assisted Living Federation of America

1650 King St, Suite 602

Alexandria, VA 22314-2747

phone: (703) 894-1805

fax: (703) 894-1831

email: info@alfa.org

web: <http://www.alfa.org>

California Assisted Living Association, California Affiliate of ALFA

455 Capitol Mall Ste. 222

Sacramento, CA 95814-4439

phone: (916) 448-1900

web: <http://www.caassistedliving.org>

California Advocates for Nursing Home Reform (Also covers RCFEs & Memory Care)

650 Harrison St, 2nd Floor San Francisco, CA 94107

phone: (415) 974-5171

toll-free: (800) 474-1116

web: <http://www.canhr.org/>

Statewide nonprofit advocacy organization dedicated to improving the choices, care and quality of life for California's long-term care consumers. CANHR offers many services through its website, including publications, consumer counseling, nursing home and residential care guides, advocacy and legal support.

California Department of Housing & Community Development

1800 Third Street

Sacramento, CA 95811-6942

phone: (916) 445-4782

web: <http://www.hcd.ca.gov/fa/affrdbble-housng.html> (for a list of low-income rental housing financed by CA DHCD)

Christian Church Homes

303 Hegenberger Road, Suite 201

Oakland, CA 94621-1419

phone: (510) 632-6712

web: <http://www.cchnc.org>

We are the largest nonprofit, low-income senior housing provider in Northern California

Congress of California Seniors

1230 N Street #201

Sacramento, CA 95814

phone: (800) 543-3352

email: info@seniors.org

web: <http://www.seniors.org>

Nonprofit advocacy organization focused on legislative and consumer issues that impact older adults

Housing Assistance Programs in Alameda, Albany, Berkeley, Emeryville, Oakland &

Piedmont. *Source: Alameda County Area Agency on Aging Senior Resource Guide for North County*

Housing Authorities:

| | |
|--|--------------|
| Alameda County – Housing Authority of the County of Alameda..... | 510-538-8876 |
| Alameda City – Housing Authority of the City of Alameda..... | 510-747-4300 |
| Berkeley Housing Authority..... | 510-981-5470 |
| Oakland Housing Authority..... | 510-874-1500 |

Center for Independent Living (disabled housing assistance),

| | |
|---|--------------|
| Oakland..... | 510-763-9999 |
| Berkeley | 510-841-4776 |
| ECHO Housing (home seeking, rental assistance)..... | 510-496-0496 |
| ECHO Housing (reverse mortgage counseling)..... | 510-271-7931 |

Eden Information & Referral (rental housing information and emergency shelter referrals)..... 211

| | |
|--|--------------|
| HERA/Housing and Economic Rights Advocates (mortgage counseling)..... | 510-271-8443 |
| Housing Rights, Inc. (Albany, Berkeley, Emeryville, Piedmont only) | 510-548-8776 |
| NID-Housing Counseling Agency (homeowner/foreclosure counseling)... .. | 510-268-9792 |
| Unity Council—The HomeOwnership Center (first time homebuyer education; foreclosure workshops..... | 510-535-6943 |

U.S Department of Housing and Urban Development

San Francisco Regional Office 600 Harrison St. 3rd Floor

San Francisco, CA 94107-1300

phone: (415) 489-6400

web: <http://www.hud.gov>

Leading Age (formerly AAHSA/ the American Association of Homes and Services for the Aging

2519 Connecticut Avenue, NW Washington, DC 20008-1520

phone: (202) 783-2242

fax: (202) 783-2255

email: info@LeadingAge.org

web: www.leadingage.org/consumers

Leading Age is an association of 6,000 not-for-profit organizations dedicated to making America a better place to grow old. Organizations include community services, senior housing, multilevel communities, Continuing Care Retirement Communities, assisted living, and skilled nursing facilities.

LeadingAge California (formerly CAHSA/ California Association of Homes and Services for the Aging and Aging Services of California)

1315 I Street, Suite 100

Sacramento, CA 95814

phone: (916) 392-5111

email: info@aging.org

web <http://www.aging.org>

Leading Age California is the state affiliate of Leading Age. Founded in 1961, LeadingAge California is the state's leading advocate for quality, not-for-profit senior living and care. The association's advocacy, educational programs and public relations help its members best serve the needs of more than 100,000 of the state's older adults. The Consumers section on their website menu helps define Choices and in Finding a Home, and links consumers with more than 400 nonprofit members who provide senior living and care – including affordable housing, continuing care retirement communities, assisted living, skilled-nursing, and home and community- based care.

National Alliance for Caregiving

4720 Montgomery Lane, Suite 205

Bethesda, MD 20814

phone: (301) 718-8444

fax: (301) 951-9067

email: info@caregiving.org

web: www.caregiving.org

Recognizing that family caregivers provide important societal and financial contributions toward maintaining the well-being of those they care for, the Alliance is dedicated to improving quality of life for families and their care recipients through research, innovation, and advocacy.

National Association of Professional Geriatric Care Managers

3275 West Ina Road, Suite 130

Tucson, Arizona 85741

phone: (520) 881-8008

web: <http://www.caremanager.org/>

A professional Geriatric Care Manager is a health and human services specialist who helps families who are caring for older relatives. The GCM is trained and experienced in fields such as nursing, gerontology, social work, and psychology. The site includes a locator for local GCMs who can assist in assessment, care planning for aging in place at home or transition to community settings, and family planning meetings.

National Association of Senior Move Managers

National Association of Senior Move Managers

PO Box 209, Hinsdale, IL 60522

phone: (877) 606-2766

web: <http://www.nasmm.org>

The NASMM aims to facilitate the physical and emotional aspects of relocation for older adults, to increase industry awareness, to establish a national referral network, to enhance the professional competence of members, and to promote the delivery of our services with compassion and integrity.

National Council on Aging

251 18th Street South, Suite 500

Arlington, VA 22202

phone: (571) 527-3900

web: www.ncoa.org

The National Council on Aging (NCOA) is a respected national leader and trusted partner to help people aged 60+ meet the challenges of aging. Our mission is to improve the lives of millions of older adults, especially those who are struggling. Through innovative community programs and services, online help, and advocacy, NCOA is partnering with nonprofit organizations, government, and business to improve the health and economic security of 10 million older adults by 2020.

Professional Fiduciary Association of California

One Capital Mall Sacramento, California 95814

phone: (866) 886-7322, (916) 669-5330

web: <http://www.pfac-pro.org>

Fiduciaries pay the bills and handle the investments of trusts, decedents' estates, and conservatorships. Their neutral third party status can be especially helpful to families in stress when there is money to be invested and protected. PFAC is an affiliate of the National Guardianship Association. Their site includes a locator service

Satellite Affordable Housing Associates

1521 University Avenue

Berkeley, CA 94703

phone: (510) 647-0700

web: www.saha.org

Provides affordable, service-enriched housing communities that promote healthy and dignified living for people with limited options.

The Transition Network

1732 First Avenue #27158

New York, NY 10128

phone: (347) 735-6035

web: <http://www.thetransitionnetwork.org> (National chapter)

The Transition Network / TTN for women

Local TTN chapter contact: Arlene Reiff

email: awr1@mindspring.com

Local TTN chapter Housing Options Committee:

email: ttn_home@yahoo.com Contact: Mona Kreaden

East Bay TTN chapter also sponsors the Caring Collaborative, East Bay/San Francisco

The Transition Network is an inclusive community of professional women, 50 and forward, whose changing life situations lead them to seek new connections, resources and opportunities. Through small group interactions, programs and workshops, members inspire and support each other to continue a life of learning, engagement and leadership in the world. As a national organization, The Transition Network is a voice for women who continue to change the rules.

Web Sites

AFFORDABLE HOUSING

[Affordable Housing Associates](http://www.ahainc.org): www.ahainc.org

[The Affordable Housing Network](http://www.publichousing.com): www.publichousing.com

[Berkeley Housing Authority](http://www.ci.berkeley.ca.us/BHA/Home/Affordable_Housing.aspx): www.ci.berkeley.ca.us/BHA/Home/Affordable_Housing.aspx

[Christian Church Homes](http://www.cchnc.org): www.cchnc.org

[East Bay Housing Organizations \(non-profit\)](http://www.ebho.org): www.ebho.org

[The City of El Cerrito, California Housing Program](http://www.el-cerrito.org/index.aspx?NID=506):

www.el-cerrito.org/index.aspx?NID=506

Emeryville Affordable Housing Set Aside (AHSA) Ordinance:

www.ci.emeryville.ca.us/271/Affordable-Housing-Set-Aside-Ordinance

The Oakland Housing Authority: www.oakha.net

Richmond Affordable Housing information: www.ci.richmond.ca.us/index.aspx?NID=213

Satellite Affordable Housing Associates: www.sahahomes.org/

Benefits Check Up

web: www.benefitscheckup.org

Online program of the National Council on Aging to help find benefit programs that can help you pay for medications, health care, food, utilities and more

COMMUNITY LIVING ALTERNATIVES

Accessory/ "In Law" Dwelling Units (ADUs)

web: www.accessorydwellings.org
www.eldercottages.com

Co-Housing

web: <http://www.cohousing.org> National co-housing information
<http://www.cohousingco.com> Bay area co-housing information

Naturally Occurring Retirement Communities (NORCs)

web: www.norcs.org

Pocket Neighborhoods

web: www.pocket-neighborhoods.net

Villages

The Village to Village Network national organization: www.vtvnetwork.org

Ashby Village: www.ashbyvillage.org Berkeley, Oakland, Albany, El Cerrito, Emeryville

North Oakland Village: www.northoaklandvillage.org

CONSUMER INFORMATION and GUIDES

Alternatives for Seniors: www.AlternativesforSeniors.com

A Place for Mom: www.aplaceformom.com

Local Area Agencies on Aging

California Advocates for Nursing Home Reform: www.canhr.org

Eldercare Locator: www.eldercarelocator.gov

Reputable Elder Placement Specialists

Geriatric Care Managers: www.caremanager.org

Leading Age-California: www.aging.org/consumers

Leading Age – National: www.leadingage.org/consumers

National Alliance for Caregiving: www.caregiving.org

New Lifestyles: www.NewLifeStyles.com

Ombudsman Program, State of California: <http://www.aging.ca.gov/Programs/LTCOP/>

Ombudsman Program, Alameda County: (510) 577-1900

https://alamedasocialservices.org/public/services/elders_and_disabled_adults/ombudsman.cfm

Ombudsman Program, Contra Costa County: (925) 229-8434

<http://www.co.contra-costa.ca.us/915/Long-Term-Care-Ombudsman>

Senior Seasons: <http://www.seniorseasons.com/index.php>

EDUCATION (ex. wellness, aging, adult children, caregiving, dementia, conversations)

Alzheimers Association: www.alz.org

American Association of Retired Persons: www.aarp.org

Caring.com: www.caring.com

Family Caregiver Alliance: www.caregiver.org

Leading Age California: www.aging.org/consumers

Leading Age National: www.leadingage.org/consumers

National Alliance for Caregiving: www.caregiving.org

National Council on Aging: www.ncoa.org

Next Avenue: www.nextavenue.org

Next Step in Care: www.nextstepincare.org

UCSF Memory and Aging Center: www.memory.ucsf.edu

ELDER PLACEMENT SPECIALISTS

Exceptional Senior Placement Services: www.exceptionalseniorplacement.com

Mona Lalchandani, CEO (510) 910-0344

Insight Memory Care Choices: www.insightmemorycarechoices.com

Sandra Wallace, CEO (650) 208-8809

Leslie Stanfield, Senior Placement: www.lesliestanfield.com

Leslie Stanfield, CEO (925) 215-0770

Senior Visionary Services: www.seniorvisionaryservices.com

Jann Oldenburg, CEO (888) 758-6719

PRODUCTS FOR INDEPENDENT LIVING

Online directories of adaptive devices to improve function and ease in the categories of vision, hearing, mobility, medical, household, and computers

Disabled World

<http://www.disabled-world.com/assisted-devices>

MaxiAids

phone to order(800) 522-6294

phone for information(631) 752-0521

phone for TTY (800) 281-3555

web: www.maxiaids.com

Solutions: Products that Make Life Easier

phone: (877) 718-7901

web: www.solutions.com

The Wright Stuff

phone: (877) 750-0376

email: info@thewright-stuff.com

web: <http://www.thewright-stuff.com>

VETERANS

Includes information about benefits such as the Veterans Aid and Assistance program to subsidize care

U.S. Department of Veterans Affairs: www.benefits.va.gov

California Department of Veterans Affairs: www.calvet.ca.gov

SOME HOUSING OPTIONS NEAR BERKELEY

FREQUENTLY EXPLORED by RETIREES and THEIR FAMILIES

ACTIVE SENIOR LIVING COMMUNITY

Rossmoor Walnut Creek Senior Active Living (unlicensed)

1001 Golden Rain Rd. Walnut Creek

(925) 988-7700

www.rossmoor.com

For listing of local realtors handling Rossmoor homes:

www.rossmoor.com/live-at-rossmoor/real-estate-info

AFFORDABLE SENIOR HOUSING

Satellite Affordable Housing Associates

1521 University Avenue Berkeley

(510) 647-0700

<http://sahahomes.org/>

Strawberry Creek Lodge is a SAHA community

1320 Addison St. Berkeley

(510) 841-8330
www.strawberrycreeklodge.org

MULTILEVEL COMMUNITIES

Bayside Park Residential, Assisted Living, and Memory Care
1440 40th Street Emeryville
(510) 500-9312
www.baywidepark.watermarkcommunities.com

The Berkshires Residential, Assisted Living, Memory Care
2235 Sacramento Street Berkeley
(510) 969-9852
www.vintagesenior.com/the-berkshire

El Cerrito Royale Residential, Assisted Living, Memory Care
6510 Gladys Avenue El Cerrito
(510) 234-5200
www.elcerritoroyale.com

Pinole Senior Village Assisted Living, Memory Care
2850 Estates Avenue Pinole
(510) 275-4062
www.westmontliving.com/senior_living/Pinole_CA

Reutlinger Community for Jewish Living
Residential, Assisted Living, Tikvah Enhanced Assisted Living, Memory Care, Skilled Nursing, Rehabilitation
4000 Camino Tassajara Danville
(925) 648.2800
www.rcjl.org

Sunrise of Oakland Hills Assisted Living, Memory Care
11889 Skyline Blvd Oakland
(510) 531-7190
www.sunriseseniorliving.com/communities/sunrise-of-oakland-hill

MEMORY CARE

Lakeside Park Memory Care
468 Perkins St. Oakland
(510) 444-4684
www.lakesidepark.watermarkcommunities.com

CONTINUING CARE RETIREMENT COMMUNITIES

Lake Park
CCRC –Residential, Assisted Living, Memory Care, Skilled Nursing, Rehabilitation
1850 Alice Oakland
(510) 835-5511 www.lakeparkretirement.org

Piedmont Gardens

CCRC- Residential, Assisted Living, Memory Care,
Skilled Nursing, Rehabilitation
110 41ST Street Oakland
(510) 922-0490
www.piedmontgardens.com

St. Paul's Towers

CCRC- Residential, Assisted Living, Memory Care, Skilled Nursing,
Rehabilitation
100 Bay Place Oakland
(510) 835-4700
www.stpaulstowers-esc.org

NOT FOR PROFIT SKILLED NURSING

Chaparral House Skilled Nursing, Rehabilitation
1309 Allston Way Berkeley
(510) 848-8774
www.chaparralhouse.org

IN PLANNING, Affiliated with UC Berkeley

Belmont Village Senior Living Community
Independent, Assisted Living, Memory Care
University Village, San Pablo Avenue Albany

