



### DOES YOUR LOVED ONE DRINK NUTRITIONAL SUPPLEMENTS?

As a caregiver, you may be eligible to receive a case each month of the nutritional supplement used by your care recipient.

For more information, contact  
Margie DiDonna or Lisa Alley  
at Randolph Senior Adults Association  
336-625-3389

Funds provided by the  
Family Caregiver Support Program

## Can you Benefit from Options Counseling ????

Situations where Options Counseling may be helpful:

- Having difficulty managing household tasks, but want to remain in the home.
- Planning to retire and want to discuss options to sustain health, wellness, and independence.
- Deciding whether to move in with family, an apartment, or an assisted living facility.
- Supporting a disabled adult and wanting to make plans in the event of being unable to continue providing care.
- Lacking awareness of existing community resources.

**Certified Options Counselors can help you develop an Action Plan with follow-up to ensure that decisions and supports are working for you!**

*Options Counseling is a free service available to those 50 years of age and over.*

Margie DiDonna and Lisa Alley, Options Counselors  
Randolph Senior Adults Association  
The Harry and Jeanette Weinberg Adult REC  
347 W. Salisbury Street ~ Asheboro  
336-625-3389 or 1-800-252-2899



### Are you caring for a Veteran?

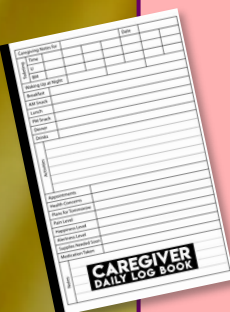
Call 704-638-9000 x15505 to see if you are eligible for services through the Program of Comprehensive Assistance for Family Caregivers (PCAFC).



A Caregiver Daily Log Book is a great way to keep notes on how your loved one is doing from day to day. It is especially helpful when there is more than one caregiver. Having notes on eating, toileting habits, and activities helps you to see patterns. It's also helpful to bring to doctor visits.

Log Books are available for a limited time at Randolph Senior Adults.

Contact Margie or Lisa at 336-625-3389



The Randolph Senior Adults Association proudly marks its 50th Anniversary this year, celebrating half a century of dedicated service to seniors in our community. For fifty years, we have remained steadfast in our commitment to enhancing the lives of those aged 50 and above, consistently providing vital services, resources, and opportunities that empower seniors to lead fulfilling lives.



RANDOLPH  
SENIOR  
ADULTS  
ASSOCIATION

# The Nurturer



A Newsletter for Family Caregivers in Randolph County Issue 30- September 2025



RANDOLPH  
SENIOR  
ADULTS  
ASSOCIATION

## Celebrating Six Years!

I can't believe that we are up to our 30th issue. When we started this newsletter six years ago in 2019, we weren't sure if people would be interested. Boy were we wrong!

We have received great feedback that we have helped many family caregivers and the ones they are caring for.

In the beginning we printed 1300 copies each quarter, and we now print 2000! Our list of those receiving *The Nurturer* by email keeps growing as well.

We are so glad that our little newsletter is making such an impact on the family caregivers of Randolph County!

Free copies of *The Nurturer* can be picked up at all Randolph Senior Adult Association centers, Regional Consolidated Services and other community locations.

*The Nurturer* is also available online at [www.senioradults.org](http://www.senioradults.org).

To receive free quarterly copies of *The Nurturer* in the mail or email, call 336-625-3389 or email: [rcaa2@senioradults.org](mailto:rcaa2@senioradults.org) to be added to our mailing list.

Follow Randolph Senior  
Adults Association  
On Facebook



## We Care Like Family

If you are, or know, a senior living alone in Randolph County, you need to know about the

## Citizen Well-Check Program

Use the Sheriff's App to register or an application is available on our website  
[www.randolphcountync.gov/sheriff](http://www.randolphcountync.gov/sheriff)

## How does the program work?

Seniors who participate in the FREE program are automatically checked on by phone Monday - Friday.

- If no answer during attempts, a deputy will be dispatched to determine welfare.
- If you are not going to be available by phone, you can check out for the day by calling into an assigned number.

or call us 336-318-6689



Sheriff's Office Crime Prevention Division  
727 McDowell Rd., Asheboro, NC 27205

## JOIN US AT THE MOVIES!



FREE  
Over  
50\*

Upcoming Movies . . .  
... at the **SUNSET THEATRE**

**September 4**  
Room for One More (1952)

**October 2**  
Stagecoach (1939)

**November 6**  
Marty (1955)

Doors open at 12:00 - Movie starts at 1:00

\*Free admission, popcorn & small soda for ages 50+



When you contribute to Randolph Senior Adults Association, a non-profit organization, you make an immediate difference in the lives of seniors and their caregivers. Our caregiver and meal programs help seniors stay independent for as long as possible so they can age at home in their community.

Donations can be made:

Online - [www.senioradults.org](http://www.senioradults.org)  
Call - 336-625-3389

Mail - Randolph Senior Adults Association  
347 W. Salisbury Street, Asheboro, NC 27203

Thank you for your generosity!



## RANDOLPH SENIOR ADULTS LOCATIONS

### ASHEBORO SENIOR CENTER RANDOLPH SENIOR ADULTS MAIN OFFICE

The Harry and Jeanette Weinberg Adult  
Resource & Education Center  
347 W. Salisbury Street  
Asheboro, NC 27203  
336-625-3389 or 1-800-252-2899

### ARCHDALE SENIOR CENTER

108 Park Drive  
Archdale, NC 27263  
336-431-1938

### RANDLEMAN SENIOR CENTER

144 W. Academy Street  
Randleman, NC 27317  
336-498-4332

### LIBERTY SENIOR CENTER

239 S. Fayetteville Street  
Liberty, NC 27298  
336-622-5844

### OUR PLACE ADULT DAY CARE

714 Farr Street  
Asheboro, NC 27203  
336-629-3787

### RCATS TRANSPORTATION

347 W. Salisbury Street  
Asheboro, NC 27203  
Randolph County - 336-629-7433  
Montgomery County – 910-572-3430

[www.senioradults.org](http://www.senioradults.org)

Follow us on facebook and Instagram!



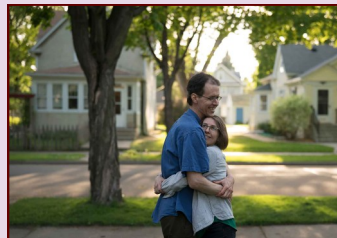
## 5 TIPS TO BE A GOOD CAREGIVER

**Practice Open Communication**—Communication is the most important factor when trying to be a good caregiver. Caregivers should try their best to communicate with patience, understanding and empathy. A lot of the times, a person being taken care of can feel like they're a burden or a nuisance. Healthy communication and reassurance can help prevent that. And don't forget to keep communication open between you and your other family and friends, as well. Asking for help isn't always easy, but remember: those who care about you want to support you.

**Don't Forget to Take Care of Yourself**—When you're constantly having to tend to someone who's ill, it's easy to forget about your own needs. Some caregivers are so overwhelmed that they are unable to take time for their other loved ones or hobbies, and many feel guilt being away from the person in need. However, we can't expect to be a good caregiver if we are not in good shape ourselves. Prioritizing your own health, physical and mental, is crucial for both you and your loved one.

To help take care of yourself, try these tips:

- Join a caregiver support group
- Remember to breathe
- Get some laughs
- Talk to someone once a day
- Get adequate rest
- Ask for help, even when it's difficult



The most important thing is to first take care of yourself... even if it is a quiet ride in the car, a walk or even a trip to the grocery store. You cannot take care of a loved one if you are not taking care of yourself.

**Patience**—Being patient is important in two ways. First, it's helpful to be patient with yourself. You will make mistakes—all humans do—but remember: You are trying your best, and no one is perfect.

It's also good to be aware that sometimes communication can be difficult when you're caregiving. Your loved one who is going through a hard time might say or do things that hurt your feelings. In that situation, you can try your best to be patient and empathetic by not taking things personally. They're going through a hard time too.

It may also be painful or frustrating to see your loved one unable to take care of themselves the way they used to. Viewing these situations with a lens of understanding and acceptance can be a way to battle the discouragement.

**Establish Boundaries**—When spending so much time with one person, and sharing their most intimate moments, it's still important to establish some boundaries. These boundaries include you knowing your own limitations and what you are comfortable doing for that person.

Boundaries also apply to the person receiving the care. How do they wish to be cared for? What are their likes and dislikes? These boundaries will allow both people to be happier.

**Remind Yourself Why You're Doing This**—Sometimes, you can become a caregiver out of necessity or a sudden unfortunate life event. But, at the core of any of this is love and empathy. Caregivers love and want the best for the person they're with. You can use that compassion to keep you motivated through hard times.

**Above All, Give Care from the Heart**—Above all, a good caregiver is simply one who cares. You are not expected to be perfect, so make sure you give yourself just as much love and patience as you offer your loved one.

[caringbridge.org](http://caringbridge.org)



## BALANCING WORK & CAREGIVING

Many people who work are also caregivers. If you talk with colleagues or supervisors, their understanding and helpfulness may surprise you. Here are some tips and points to keep in mind when talking to your employer:

- Describe your caregiving circumstances and situation. Remember: you're in charge of how much of your situation you feel comfortable sharing.
- Talk to your employer sooner rather than later to help you come up with a plan in case of an emergency or crisis. It can also give you a chance to talk about what kind of flexibility or support you may need in the future.
- Emphasize your commitment to being productive at work and discuss ways to meet your work responsibilities while you're caregiving. When you do need help, be straightforward and direct.
- Create a plan that both you and your employer are comfortable with. Thank them for understanding.
- Inform your employer if your caregiving circumstances change or progress.

[nc-caregivers.com](http://nc-caregivers.com)



"Doctors diagnose, nurses  
heal, and caregivers  
make sense of it all."

## SUPPORT GROUPS

### Diabetes Support Group

Third Monday each month – 4:00-5:00pm  
Randolph Health  
208-D Foust Street, Asheboro  
336-625-9400

### Dementia Support Group

Second Thursday of each month - 6:30 pm  
Cross Road Village Clubhouse  
1302 Old Cox Road, Asheboro  
Bernie Raymond - 336-629-7811

### Asheboro Parkinson's Support Group

Second Friday of each month - 10:30 am  
Hospice of Randolph  
416 Vision Drive, Asheboro  
Annette Caughron - 336-580-9937

### Duke Dementia Family Support Program Various Support Groups via Zoom

Various dates and times  
Natalie Leary - 919-660-7542  
[dukefamilysupport.org/support-groups/](http://dukefamilysupport.org/support-groups/)



"You have not  
lived today until  
you have done  
something for  
someone who can  
never repay you."  
—John Bunyan  
[OperationGratitude.com](http://OperationGratitude.com)

## SITTERS LIST

Randolph Senior Adults maintains a list of sitters willing to sit, assist with personal care, homemaker chores, errands, etc. This is an option for someone needing in-home help and able to pay out-of-pocket. It is up to the individual or family member to check references and conduct interviews.

**A copy of the Sitters List can be mailed or emailed to you.**

Please contact:  
Margie DiDona or Lisa Alley  
at 336-625-3389 or [rcaa2@senioradults.org](mailto:rcaa2@senioradults.org)

## RESOURCES

**NC Stroke Association**  
336-713-5052  
[ncstroke.org](http://ncstroke.org)

**National Stroke Association**  
888-4STROKE (888-478-7653)  
[stroke.org](http://stroke.org)

**American Diabetes Association**  
800-DIABETES (800-342-2383)  
[diabetes.org](http://diabetes.org)

**The Foundation for Peripheral Neuropathy**  
877-883-9942  
[www.foundationforpn.org](http://www.foundationforpn.org)

**National Kidney Foundation**  
800-622-9010  
[kidney.org](http://kidney.org)

**Arthritis Foundation**  
800-283-7800  
[arthritis.org](http://arthritis.org)

**Parkinson's Foundation**  
1-800-473-4636  
[parkinson.org](http://parkinson.org)

**Anxiety & Depression Association of America**  
1-240-485-1001  
[adaa.org](http://adaa.org)

**National Alliance on Mental Illness (NAMI)**  
Main - [nami.org](http://nami.org) 800-950-6264  
NC - [naminc.org](http://naminc.org) 800-451-9682

**Family Caregiver Alliance**  
Online information and resources for caregivers  
[caregiver.org](http://caregiver.org)

**Family Caregiving**  
[aarp.org/caregiving/](http://aarp.org/caregiving/)



## A CAREGIVING CONVERSATION: UNPACKING ANTICIPATORY GRIEF



Hospice of the Piedmont Bereavement Team Leader Kirsten Goard, MSW, LCSW, has a great deal of experience talking with people about their grief. In her work, she has a strong conviction to break the stigma that grief is something we should “get over” and is dedicating her career to meeting individuals where they are and equipping them with lasting strategies for coping with grief. Kirsten recently took part in a candid conversation about a topic near and dear to her heart —anticipatory grief.

**Hospice: During your time with Hospice of the Piedmont and Hospice of Randolph, you’ve intentionally brought anticipatory grief to the forefront – unpacking this topic for those we support in hospice care, our own team members as well as members of the community. What is anticipatory grief and why is it an important conversation topic?**

**Kirsten:** These are good questions. When we hear the word “grief,” our minds tend to think of the emotions individuals experience after the death of a loved one. Anticipatory grief refers to the grief and mourning that can occur before the death of a loved one, as someone begins to sense an impending loss. It often occurs when someone is diagnosed with a terminal illness or when death is imminent.

**Hospice: It sounds like anticipatory grief usually impacts individuals in the midst of already stressful circumstances.**

**Kirsten:** That’s part of what makes

anticipatory grief even more challenging. It’s a natural response to difficult life circumstances, and multiple things are happening at once. As a loved one’s health declines and their care needs increase, anyone involved in the care – especially the caregiver(s) and the person receiving care – can experience waves of anticipatory grief.

The caregiver may begin mourning the changes taking place in their loved one’s condition, uncertainty about the future and may feel at a loss trying to picture life without their loved one. The person receiving care may begin mourning the loss of their hopes and plans as well as changes in routine and a loss of independence as their condition changes.

Anticipatory grief can allow people to begin working through their emotions and adjusting to the inevitable. While it can offer a chance for closure, it can also cause significant stress, emotional turmoil, and confusion, as well as a wide range of feelings including sadness, anger, guilt, and even relief.

**Hospice: Does anticipatory grief only impact emotions?**

**Kirsten:** Often physical and behavioral symptoms accompany the emotional symptoms of anticipatory grief. It affects everyone differently, but there are quite a few common symptoms. For example, physical symptoms can include fatigue and exhaustion, sleep disturbances, loss of appetite or even overeating, as well as headaches and stomach aches. Behavioral symptoms can include avoidance – refusing to think about or talking about the illness – and withdrawing from social activities and relationships.

**Hospice: Anticipatory grief sounds complex as it impacts many aspects of life. Are there specific coping strategies that can help?**

**Kirsten:** Yes. Coping with anticipatory grief involves acknowledging your feelings, seeking support, and giving yourself the space to grieve. This means allowing yourself to feel and express your emotions without judgment and

self-criticism. Connecting with others who understand – whether a friend, another caregiver or a professional counselor can also be tremendously beneficial.

**Hospice: If someone is reading this and identifies with the symptoms of grief that you’ve shared, what encouragement would you like to offer?**

**Kirsten:** If you’re experiencing anticipatory grief, know that you’re not alone. A great first step is to learn more about this type of grief at our new Anticipatory Grief 101 virtual session. This one-time introductory support and education session explores common symptoms, helps normalize the grief experience, and provides encouragement and helpful coping strategies. This session is open to anyone in the community, but caregivers may find it especially beneficial because as I mentioned earlier, anticipatory grief is a common experience for most caregivers at some point or many points throughout the caregiving journey.

I also want to encourage readers to connect with others facing similar circumstances. Caregiver Coffee House is a new social group that meets monthly and offers a welcoming space where caregivers can come together over a cup of coffee to share experiences, challenges, and support.

Learning more about anticipatory grief and connecting with a supportive community can help individuals navigate the grief journey with greater peace and confidence.



To learn more about  
**Caregiver Coffee House and  
Anticipatory Grief 101**, scan the  
QR code or visit our website!



[www.hospiceofthepiedmont.org/  
events/](http://www.hospiceofthepiedmont.org/events/)



809 Curry Drive  
Asheboro, NC 27205  
336-628-4200

### What is StayWell Senior Care?

StayWell Senior Care is a certified PACE Program (A Program of All Inclusive Care for the Elderly) providing an alternative to nursing home placement. StayWell Senior Care allows individuals in need of skilled nursing care to remain in their home or community setting and receive quality care from a team of clinical experts.

### How to Qualify?

Residents of Randolph, Moore, and Montgomery counties who are certified by the State of NC to require nursing home care are eligible. Participants must be 55 or older and able to live safely in the community at the time of enrollment.



### ARE YOU OR A LOVED ONE ON MEDICARE AND STRUGGLING TO PAY BILLS?

Medicare beneficiaries may be eligible for  
**Medicare Savings Programs**

To lower drug costs, *Part D Extra Help* is available for individuals with gross monthly income below \$1,956, or \$2,644 for a married couple living together.

Those with income below \$1,781 (or \$2,400 per couple) may also be eligible to have their \$185 monthly Medicare Part B premium paid by the state.

**To apply contact:**  
**Margie DiDona or Lisa Alley—SHIIP Coordinators\***  
**at Randolph Senior Adults Association**  
**336-625-3389**

*\*Seniors’ Health Insurance Information Program (SHIIP) is a division of the NC Department of Insurance.*

### INCONTINENCE SUPPLIES

Incontinence supplies can be an expensive part of caregiving. Randolph Senior Adults receives donations of pullups, taped briefs, bladder pads, gloves and bed pads. If you or a family member is in need, please contact:

**Margie DiDona or Lisa Alley**  
**at Randolph Senior Adults Association**  
**336-625-3389**

### DID YOU KNOW . . .

That Randolph Senior Adults has a medical equipment loan closet? We accept gently used walkers, canes, shower benches or stools, manual wheelchairs, and bedside commodes. If you would like to borrow or donate any of these items, please call 336-625-3389.

*\*Items other than those mentioned above can be donated to Christians United Outreach Center (CUOC) at 930 S. Fayetteville Street, Asheboro or call 336-625-1500.*



## Coloring Corner



**Family Caregiver Support Program** provides a range of supports that assist family caregivers

### Eligible family caregivers are:

- A caregiver of any age providing care for an older adult age 60 or older or providing care for a person with Alzheimer’s disease or related brain disorder.
- A caregiver (who is not the birth or adoptive parent) age 55 or older, raising a related child age 18 and younger or an adult with a disability.
- A caregiver age 55 or older (including parents) who provides care for a related adult with a disability.

### RANDOLPH COUNTY AGENCIES PROVIDING SERVICES WITH FCSP FUNDS:

**Randolph Senior Adults Association** provides Care Planning Assistance, Liquid Nutritional Supplements, Powerful Tools for Caregivers workshop, Caregiver Skills Class, and *The Nurturer* newsletter.

**Call Margie DiDona or Lisa Alley at 336-625-3389 for more information.**

**Regional Consolidated Services** offers caregiver respite care, minor home improvement, and medical equipment.

**Contact Evelyn Perez at 336-629-5141**

6 FALLS PREVENTION STEPS

- 1. Ask your older loved one if they are concerned about falling. If they're concerned about falling, dizziness, or balance, suggest that they discuss it with their health care provider who can assess their risk and suggest programs or services that could help.
- 2. Find out if your older loved one is experiencing any problems with managing their own health. Are they having trouble remembering to take their medications—or are they experiencing side effects? Is it getting more difficult for them to do things they used to do easily? Also make sure they're taking advantage of all the preventive benefits now offered under Medicare, such as the Annual Wellness visit. Encourage them to speak openly with their health care provider about all of their concerns.
- 3. If your older loved one wears glasses, make sure they have a current prescription and they're using the glasses as advised by their eye doctor. Remember that using tint-changing lenses can be hazardous when going from bright sun into darkened buildings and homes. A simple strategy is to change glasses upon entry or stop until their lenses adjust. Bifocals also can be problematic on stairs, so it's important to be cautious.
- 4. Notice if they're holding onto walls, furniture, or someone else when walking or having difficulty walking or arising from a chair. These are all signs that it might be time to see a physical therapist.

A trained physical therapist can help your older loved one improve their balance, strength, and gait through exercise. They might also suggest a cane or walker—and provide guidance on how to use these aids. Make sure to follow their advice. Poorly fit aids actually can increase the risk of falling.

5. If your older loved one is having a hard time keeping track of medicines or is experiencing side effects, encourage them to discuss their concerns with their doctor or pharmacist. Suggest that they have their medications reviewed each time they get a new prescription. Also, beware of non-prescription medications that contain sleep aids—including painkillers with “PM” in their names. These can lead to balance issues and dizziness. If your older loved one is having sleeping problems, encourage them to talk to their doctor or pharmacist about safer alternatives.

6. Do a walk-through safety assessment of their home. There are many simple and inexpensive ways to make a home safer. For professional assistance, consult an Occupational Therapist. Lighting: Increase lighting throughout the house, especially at the top and bottom of stairs. Ensure that lighting is readily available when getting up in the middle of the night. Stairs: Make sure there are two secure rails on all stairs. Bathrooms: Install grab bars in the tub/shower and near the toilet. For even greater safety, consider using a shower chair and hand-held shower.

ncoa.org



DEMENTIA RESOURCES

**Alzheimer's Association**  
800-272-3900 (24 hours/7 days)  
alz.org

**Dementia Alliance of NC**  
919-832-3732  
dementianc.org

**Positive Approach to Brain Change**  
877-877-1671  
teepasnow.com

**Lewy Body Dementia Association**  
LBD Caregiver Link: 800-539-9767  
www.lbda.org

**Duke Family Support Program  
Project CARE**  
(Dementia and Alzheimer's)  
800-646-2028  
dukefamilysupport.org

WANDERING

Alzheimer's disease causes people to lose their ability to recognize familiar places and faces. It's common for a person living with dementia to wander or become lost or confused about their location, and it can happen at any stage of the disease. Six in 10 people living with dementia will wander at least once; many do so repeatedly. Although common, wandering can be dangerous — even life-threatening — and the stress of this risk weighs heavily on caregivers and family.

Who's at risk for wandering?

Everyone living with Alzheimer's or other dementia is at risk for wandering. Common signs a person may be at risk of wandering include:

- Returning from a regular walk or drive later than usual.
- Forgetting how to get to familiar places.
- Talking about fulfilling former obligations, such as going to work.
- Trying or wanting to “go home” even when at home.
- Becoming restless, pacing or making repetitive movements.
- Having difficulty locating familiar places, such as the bathroom, bedroom or dining room.
- Asking the whereabouts of past friends and family.
- Acting as if doing a hobby or chore, but nothing gets done.
- Appearing lost in a new or changed environment.
- Becoming nervous or anxious in crowded areas, such as markets or restaurants.

Reduce the risk of wandering

The following tips may help reduce the risk of wandering and can bring peace of mind to caregivers and family members; however, these actions cannot guarantee that a person living with dementia won't wander.

- Provide opportunities for the person to engage in structured, meaningful activities throughout the day.
- Identify the time of day the person is most likely to wander (for those who experience “sundowning,” this may be starting in the early evening). Plan things to do during this time — activities and exercise may help reduce anxiety, agitation and restlessness.
- Ensure all basic needs are met, including toileting, nutrition and hydration. Consider reducing — but not eliminating — liquids up to two hours before bedtime so the person doesn't have to use and find the bathroom during the night.
- Involve the person in daily activities, such as folding laundry or preparing dinner. Learn about creating a daily plan.
- Reassure the person if they feel lost, abandoned or disoriented.
- If the person is still safely able to drive, consider using a GPS device to help if they get lost.
- If the person is no longer driving, remove access to car keys — a person living with dementia may not just wander by foot. The person may forget that he or she can no longer drive.
- Avoid busy places that are confusing and can cause disorientation, such as shopping malls.
- Assess the person's response to new surroundings. Do not leave someone with dementia unsupervised if new surroundings may cause confusion, disorientation or agitation.

For individuals in the early stage of the disease and their care partners, the following strategies may also help reduce the risk of wandering or getting lost:

- Decide on a set time each day to check in with each other.
- Review scheduled activities and appointments daily together.
- If the care partner is not available, identify a companion for the person living with dementia as needed.
- Consider alternative transportation options if getting lost or driving safely becomes a concern.

Prepare your home

As the disease progresses and the risk for wandering increases, assess your individual situation to see which of the safety measures below may work best to help prevent wandering.

- Place deadbolts out of the line of sight, either high or low, on exterior doors. (Do not leave a person with dementia unsupervised in new or changed surroundings, and never lock a person in at home.)
- Use night lights throughout the home.
- Cover door knobs with cloth the same color as the door or use safety covers.
- Camouflage doors by painting them the same color as the walls or covering them with removable curtains or screens.
- Use black tape or paint to create a two-foot black threshold in front of the door. It may act as a visual stop barrier.
- Install warning bells above doors or use a monitoring device that signals when a door is opened.
- Place a pressure-sensitive mat in front of the door or at the person's bedside to alert you to movement.
- Put hedges or a fence around the patio, yard or other outside common areas.
- Use safety gates or brightly colored netting to prevent access to stairs or the outdoors.
- Monitor noise levels to help reduce excessive stimulation.
- Create indoor and outdoor common areas that can be safely explored.
- Label all doors with signs or symbols to explain the purpose of each room.
- Store items that may trigger a person's instinct to leave, such as coats, hats, pocketbooks, keys and wallets.
- Do not leave the person alone in a car.

Plan ahead

The stress experienced by families and caregivers when a person living with dementia wanders and becomes lost is significant. Have a plan in place beforehand, so you know what to do in case of an emergency:

- Consider enrolling the person living with dementia in a wandering response service.
- Ask neighbors, friends and family to call if they see the person wandering, lost or dressed inappropriately.
- Keep a recent, close-up photo of the person on hand to give to police, should the need arise.
- Know the person's neighborhood. Identify potentially dangerous areas near the home, such as bodies of water, open stairwells, dense foliage, tunnels, bus stops and roads with heavy traffic.
- Create a list of places the person might wander to, such as past jobs, former homes, places of worship or a favorite restaurant.

Take action when wandering occurs

- Start search efforts immediately. When looking, consider whether the individual is right- or left-handed — wandering patterns generally follow the direction of the dominant hand.
- Begin by looking in the surrounding vicinity — many individuals who wander are found within 1.5 miles of where they disappeared.
- Check local landscapes, such as ponds, tree lines or fence lines — many individuals are found within brush or brier.
- If applicable, search areas the person has wandered to in the past.
- If the person is not found within 15 minutes, call 911 to file a missing person's report. Inform the authorities that the person has dementia.

alz.org



North Carolina  
Caregiver Portal

Powered by Truaita

Access free training and resources to help you build skills and confidence to provide care at home.

With articles, videos, tip-sheets, and professional level training, there is something for everyone.

nc-caregivers.com

THE NORTH CAROLINA CAREGIVER PORTAL ALSO HAS OPPORTUNITIES FOR CAREGIVERS TO INTERACT WITH OTHER FAMILY CAREGIVERS

Under the **Forum** tab, you can chat (text) with other caregivers. There is a main feed, and there are also group feeds you can join on these topics:

- \* Emotional Wellbeing
- \* Skills and Tips
- \* Information and Resources
- \* Caring for a Spouse
- \* Caring for a Parent
- \* Dementia Care

Under the **Events** tab you can join:

- \* Webinars
- \* Virtual Support Groups
- \* Anonymous Groups—Cameras and microphone's Off. These discussions are led by a Care Educator. You can share your thoughts by typing in the chat box, or just observe and learn from others.

You can find all this at nc-caregivers.com

