



Elder Law & Advocacy Presents

# Your Future NOW

*A Practical Guide to Communication,  
Legal Issues & Caregiving Strategy  
for Caregivers & Their Loved Ones*



Companion Booklet for the  
*YOUR FUTURE NOW DVD*



Elder Law & Advocacy  
*Presents*

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**YOUR FUTURE NOW DVD**

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

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## INTRODUCTION

You may be reading this booklet as someone who provides care to another, or you may be the person needing care. The information applies in either case. This booklet is a companion guide for the DVD entitled “Your Future Now”—it expands on the information discussed in the program and provides resources to help you find the care you or your loved one needs. It focuses on legal aspects of caregiving, but also touches on other caregiving issues. The information presented here will help you understand the larger picture and how the many components of caregiving relate and interact. And if you follow the guidelines, you will have the legal matters of caregiving in place before you need them.

### *Who is a Caregiver?*

Many men and women are caregivers without realizing it. Do you take care of your spouse, take your elder family member to doctor’s appointments, help your parents with their finances and write checks for them to sign? Do you take older relatives to the grocery store or do shopping for them? If so, you are a caregiver. Caregiving can be a once-weekly event, full-time physical care, or anything in between.

As a caregiver, you are taking on a degree of responsibility for the person you care for. This can range from physical needs and comfort, to financial, legal, and health care issues. It is important that you understand the ways you can help, and the limitations as well.

With time, your loved one may need an increasing level of care beyond what you feel capable of providing alone. If this becomes the case for you, use outside sources to help make life less stressful for everyone. Respite care is a good example. Respite care offers you a temporary rest from the tasks of caregiving, and it can also provide your loved one a refreshing change of routine. You will find other examples in this booklet, as well as resources for locating them.

## *Planning Ahead*

Planning ahead will make life flow more smoothly and help maintain consistency in your loved one's physical and personal care, as well as financial and legal condition. It assures that his or her finances can be used to secure the best care possible and that the necessary legal forms are complete and in place.

The best way to plan effectively is to talk openly about the decisions that must be made. Once you have the information you need, you can establish a workable plan that addresses the issues that may arise.

Here are the main steps you will be taking in this process:

1. **GATHER INFORMATION:** so decisions are informed and made carefully.
2. **OPEN COMMUNICATION:** Discuss health care, estate planning and end-of-life decisions with key people.
3. **GET LEGAL:** Wills, Living Trusts, Power of Attorney, Physicians Orders for Life Sustaining Treatment (POLST), Do Not Resuscitate (DNR).
4. **DESIGNATE YOUR AGENT:** Choose the right person for each legal document.
5. **DO THE PAPERWORK:** Complete your Advance Health Care Directive (AHCD) forms.
6. **GET ORGANIZED:** and stay that way.

These steps form the outline for this booklet.



## GATHER INFORMATION

This booklet is a good start. There are resource listings in the back to help you with your research.

Other good sources of information are your physicians and health care professionals, and organizations dedicated to specific conditions, such as the Alzheimer's Association or the American Heart Association.

The Internet will prove invaluable as you search for information specific to your needs and will result in hundreds of sources. Be careful that you visit valid professional and/or accredited sites, not personal ones that reflect personal experiences and/or information which can be questionable.

Keep detailed notes as you go along. Information gathering can become complex at times, and keeping yourself organized will make the going easier. Keep your notes in one place where you know you won't lose them, and let others know where that place is. A hard-backed binder with individual pocket pages is a good storage method for your notes and documents, and will help you keep everything organized.

Occasionally make copies of the contents of your binder and store them in a separate place for safekeeping.



## OPEN COMMUNICATION

Most people find talking about end-of-life issues very difficult. It's easy to postpone upsetting tasks, but the delay often leads to much greater difficulty. It's best to share our thoughts with those we love and trust, so that we're prepared in times of need.

Openness and honesty are critical during this phase of planning. Talk openly to family and friends about values, beliefs, hopes, and fears about the end stages of life. Someone uncomfortable with the subject can be approached gently by recalling a family event or talking about a potential illness, or mentioning to whom you wish to leave a valued possession. You also can put the blame on your attorney by saying he or she insists the issues be discussed before any legal documents are completed. These are all "safe" ways to approach the subject, and can lead to open conversations of great value.

The questions in the following checklists can help focus your thinking and perhaps bring up issues you might not have thought about or discussed with your family. Addressing these questions will prepare you for completing portions of your AHCD and other important documents discussed in this booklet.

*These checklists are not legal documents; they are simply aids to your decision process.*

## How Much Care Do You Want?

Today's medical advances mean that many people can be kept alive **even if there is no chance that treatment will bring them back to health.** Carefully consider your preferences for the treatments listed below, and discuss them very thoroughly with your agent.

Circle the number from 1 to 5 that best indicates how you feel about each situation.

- 1 = I definitely want treatments to keep me alive.
- 2 = I probably would want treatments that might keep me alive.
- 3 = I'm unsure of what I would want in this situation.
- 4 = I probably would NOT want treatments that might keep me alive.
- 5 = I definitely do NOT want treatments that might keep me alive.

Yes.....No

**Knowing it won't cure you, do you want treatment to keep you alive if you:**

- 1 2 3 4 5 Cannot recognize or interact with friends or family.
- 1 2 3 4 5 Cannot think or talk clearly.
- 1 2 3 4 5 Cannot respond to requests.
- 1 2 3 4 5 Cannot walk, or confined to a wheelchair.
- 1 2 3 4 5 Cannot go outside and must spend all day indoors.
- 1 2 3 4 5 Are in severe pain most of the time.
- 1 2 3 4 5 Are in severe discomfort most of the time.
- 1 2 3 4 5 Are on a feeding tube.
- 1 2 3 4 5 Are on a kidney dialysis machine.
- 1 2 3 4 5 Are on a breathing machine to keep you alive.
- 1 2 3 4 5 Need someone to care for you 24 hours a day.
- 1 2 3 4 5 Must live in a nursing home permanently.
- 1 2 3 4 5 Other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Some Difficult Choices & Decisions

- Yes    Not sure    No
1. Do you want to donate **ORGANS** for transplant?           
 If Yes, check one:  I will donate any organs.  
 Just the following (circle)  
 Heart | Kidneys | Pancreas | Lungs | Liver | Intestines

2. Do you want to donate **TISSUES** for transplant?           
 If Yes, check one:  I will donate any tissues.  
 Just the following (circle)  
 Cornea | Skin | Bone Marrow | Heart Valves | Connective Tissue

*Be sure to include this information in your Advance Health Care Directive. You may also fill out an organ donor card or register as an organ donor when you renew your driver's license. But be sure to tell your agent and loved ones so they will support your wishes. Even with an organ donor card, hospitals will usually ask your agent or family to sign a consent form.*

4. Would you agree to an autopsy?           
*(Autopsies, done after death, are used for diagnostic and research purposes. The body can still be shown and buried.)*

5. I would prefer to be:  Buried     Cremated     No Preference

6. I would like my remains to be placed: \_\_\_\_\_  
 \_\_\_\_\_

7. I would like these songs or readings at my memorial service. I would like these people to participate.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Other preferences: \_\_\_\_\_  
 \_\_\_\_\_



## DESIGNATE YOUR AGENT

Your loved one will need someone to act on his or her behalf when it comes to health care, financial and legal situations. This person can be called an *advocate*, *proxy* or *agent*. Finding the right person(s) to fill this need is important. Here is a list of criteria which make a good agent:

- 1 Meets the legal guidelines for acting as agent (these criteria vary by state, but following the rules of who *cannot* be an agent should suffice).
- 2 Is willing to speak on your behalf and act on your wishes even if he or she doesn't agree with them.
- 3 Preferably lives close to you, or at least could travel easily if needed.
- 4 Knows and understands you well, and is someone you trust with your life.
- 5 Is comfortable talking with you now about sensitive issues, and is a good listener.
- 6 Will be available long-term if needed.
- 7 Is able to handle conflicts between family, friends, and medical professionals when it comes to your care.

- 8 Can be a strong advocate for you if your doctor or institution isn't responding.

There are some restrictions on who can be an agent. Criteria vary by state, but the general rules are that an agent *cannot* be:

- Anyone under age 18
- Your physician or care facility owner (unless it's your spouse or relative)
- An employee of your physician or facility (unless it's your spouse or relative)

Once you have chosen a potential agent, discuss your decisions and concerns with that person and make certain he or she is willing and able to handle the responsibility. Then inform everyone of your choice. This includes your family, friends and health care professionals.

### What Can My Agent Do?

These are the rights you can assign to your agent. They take effect only after you are unable to make decisions for yourself, unless you specify that your agent can act immediately.

- The right to select or discharge care providers and institutions
- The right to refuse or consent to treatment
- The right to access medical records
- The right to withdraw or withhold life-sustaining treatment
- In the case of death, you may also permit or restrict your agent to make organ donations, authorize an autopsy, and direct the disposition of your remains

You should also name a backup agent in case the first person is unavailable. Remember also that the person you select to be your agent does not have to be the same person who oversees your financial affairs.

You may change or revoke your health care agent at any time. Just inform your supervising health care provider in person or in writing.



### GET LEGAL

In general, **capacity** is a term that relates to soundness of mind and an intelligent understanding and perception of one's actions. Capacity is the power to create or to enter into a legal relation as a person of sound mind or normal intelligence. A person with legal capacity can dispose of his or her property as he or she sees fit. The legal definition of capacity varies depending on the circumstances; for example, in California a person's testamentary capacity (ability to make a will or other estate planning instrument) is determined by the California Probate Code. A summary of the key criteria in this code is on page 24.

Having your loved one sign legal documents while he or she has the mental capacity to do so is very important. This will allow the caregiver to take care of medical and financial needs of the care receiver when he or she can no longer make those personal decisions. Once mental capacity diminishes, there are few options available to make personal, medical, and financial decisions. This is why it is so important to resolve these issues while mentally alert and capable of making sound decisions.

Here are the legal documents that should be in place *now*, before capacity diminishes.

- Will
- Revocable Living Trust
- Power of Attorney

- ❑ POLST (Physician Orders for Life-Sustaining Treatment)
- ❑ DNR (Do Not Resuscitate) if applicable
- ❑ Advance Health Care Directive

## Will

Your will is a legal document in which you give instructions to be carried out after your death. In your will you can name:

- An executor, who gathers and manages your assets, pays debts, expenses and taxes that might be due, and with the court’s approval, distributes your assets to your beneficiaries according to the instructions in your will. This is a very important role with significant responsibilities, and it can be a time-consuming job. Choose your executor carefully.
- Beneficiaries (family members, friends, spouse, domestic partner or charitable organizations, for example) to receive your assets. You may list specific gifts—such as jewelry or money—to certain beneficiaries, and you should indicate what should be done with any remaining assets.
- A guardian for your minor children until they are 18 years old.

**What Wills Don’t Cover:** Your will affects only those assets that are titled in your name at your death. Some assets that are NOT affected by your will include:

- Life insurance
- Retirement plans
- Assets owned as a joint tenant with right of survivorship
- “Transfer on death” or “pay on death”
- “Community property with right of survivorship”
- Living trusts
- Your spouse’s or domestic partner’s half of community property

**Without a Will:** If you die without a will (referred to as *intestate*), California law will determine what happens to your estate. If you are mar-

ried or have established a registered domestic partnership, your spouse or domestic partner will receive all of your community property assets. This person will also receive part of your separate property assets, and the rest of your separate property assets will be distributed to your children or other close relatives.

If you are not married or not in a registered domestic partnership, your assets will be distributed to your children, grandchildren or other relatives. The State of California is the beneficiary of your estate ONLY if you die intestate and you (and your deceased spouse or domestic partner) have no living relatives.

**Legal Assistance:** A lawyer can make suggestions and help you understand the many ways that assets can be handled for the benefit of your beneficiaries. Your lawyer will supervise the signing of your will, or give you detailed instructions on how to execute it. For larger or more complex estates, a lawyer can also help you develop a complete estate plan and offer alternative plans that may save taxes.

**Keep Your Will Up-to-Date:** Review your will periodically. If it is not up to date when you die, your estate may not be distributed as you wish. Your will can be changed only through a *codicil*—an amendment to your will. Do not change your will by crossing out words or sentences, or by making any notes or written corrections on it.

You may also establish a new will which revokes your old will. Some instances where you might want to draft a new will are:

- If you get married or divorced, or establish a registered domestic partnership or terminate one.
- When there are any other major changes in your family (such as births and deaths).
- When the value of your assets significantly increases or decreases.
- When it is no longer appropriate for your proposed guardian or executor or trustee to retain that role on your behalf.

If you have moved to California from another state and have a will that is valid under the laws of that state, California will honor its validity. It is important for you to review your will with a qualified California lawyer,



however, since California law will govern the probate of your will if you live here at your death. And if you move out of state, your California will should be reviewed by a lawyer in that state.

**Probate:** The provisions of a will are carried out through a court-supervised process called probate. Typically, your executor starts the probate process after your death by filing a petition in court and seeking official appointment as executor. Probate can be a lengthy and complex process, delaying full settlement of your estate for months, or even years. However, some smaller estates do not need to be probated. Call Elder Law & Advocacy (858-565-1392) if you have questions about whether a will should be probated.

## Revocable Living Trust

A Revocable Living Trust allows you to appoint a trustee to manage your financial affairs.

It is called a “living trust” because it is created during the your lifetime.

In a living trust, you transfer ownership of your assets to the trust. Your trustee can be yourself, another individual such as a family member or friend, or it can be a bank or other financial institution. If you choose an individual to serve as your trustee, make sure that he or she is trustworthy and able to manage your assets. In the event that you are incapacitated, your chosen trustee will manage the trust funds for you.

With a living trust, there is no automatic court supervision or probate required as there is under a will. This is generally faster and less costly than the distribution of assets pursuant to a will.

For many people, a living trust is an ideal arrangement both for management of assets and as a will substitute. However, it is not right for everyone. Under a living trust, the trustee who manages the assets has an obligation to use trust assets only for the beneficiary’s benefit, but there is no ongoing court supervision of the trustee.

Also, a living trust is more costly to have drafted than a will. These are costs that you will pay up front, as opposed to probate costs, which are paid after a person’s death by his or her heirs. In the long run, the cost of a will and the cost of a living trust may be about the same.

## Power of Attorney

A Durable Power of Attorney for Property (DPA) allows you to give authority to your agent or attorney-in-fact to make financial or legal decisions and financial transactions on your behalf. Your agent is not subject to court review of his or her actions. Any trusted adult—such as a spouse, partner, relative or friend—can serve as your agent. It is critical that the person or agency you choose be trustworthy and sensitive to your wishes.

A DPA is effective as of the day it is signed and executed. This means that even if you are competent to make your own decisions, your attorney-in-fact will also have the legal authority to act on your behalf and engage in financial transactions.

A “springing” DPA, on the other hand, becomes effective at a later date, usually when you become mentally incapacitated; it “springs” into effect at the point you lose legal capacity.

A springing DPA is often a better choice because you retain complete control over your assets and finances until you need assistance because of mental incapacity.

Having a qualified attorney—who is familiar with the state-specific requirements for DPA forms—create your DPA is a wise decision. An attorney will create the DPA to meet your specific needs, whereas pre-printed forms are generic and may not include the instructions you prefer.



**Elder Law & Advocacy** can provide assistance with the preparation of a basic will at no charge for qualifying seniors. Call 858-565-1392 or visit [www.seniorlaw-sd.org](http://www.seniorlaw-sd.org)



## POLST

(Physician’s Orders for Life Sustaining Treatment)

The California POLST form is voluntary, and its goal is to make certain that you receive the level of care you desire. The POLST provides documentation of your preferences and provides life-sustaining treatment orders that reflect these values. In institutional settings, the POLST should be the first document in the clinical record. It is a further assurance that your wishes as detailed in your AHCD will be followed.

## DNR

DNR (Do Not Resuscitate): This is a form which instructs medical personnel not to use resuscitative measures. It should be drafted and signed by a physician and included in your medical record.

## Conservatorship

Once the care receiver no longer has capacity, then the options are very limited. A conservatorship must be established to manage his or her financial and personal affairs.

A relative, friend or a public official may petition the court for the appointment of a conservator over an individual. The petition must contain facts establishing why the individual cannot manage his or her financial affairs and/or make decisions concerning personal care.

A probate conservatorship is a judicial procedure in which someone is appointed to manage another person's financial and/or personal affairs. The establishment of a conservatorship restricts an individual's power over his or her own financial and personal care decisions.

Once a petition is filed with the court, a court investigator is appointed to report back to the court whether or not the appointment of a conservator is justified. An attorney is also appointed for the conservatee.

The judge determines, based on the petition, the investigator's report, and any evidence taken during a hearing, whether or not the conservatorship is required and what types of special powers may be granted to the conservator.



When your loved one has these instruments in place, all executed while he or she is in sound mind, your job as a caregiver will be easier. Be sure to also take these steps for yourself as soon as possible.

If you do not have these important instruments in place, contact an attorney to help you get them done.



## DO THE PAPERWORK

### *Advance Health Care Directive*

Advance directives for health care are written instructions that communicate your wishes about the care and treatment you want to receive if you reach the point where you can no longer speak for yourself. You should execute this document with the assistance of an attorney to assure it is legal and binding.

In your AHCD, you will:

- 1 Officially designate your health care agent, who will have the legal authority to make health care decisions for you if you are no longer able to speak for yourself.
- 2 Prepare instructions for health care in the event of any situation in which you can no longer make these decisions for yourself.

The work you have already done in this booklet, by completing the checklists provided earlier, has prepared you for the questions that will be asked on the AHCD form. Consult your notes if you get confused or aren't sure how to complete a section.



**Elder Law & Advocacy**  
can assist qualifying  
seniors with the  
preparation of an  
AHCD at no charge.  
Call 858-565-1392 or visit  
[www.seniorlaw-sd.org](http://www.seniorlaw-sd.org)



Standardized forms are not required to complete an AHCD. However, any AHCD will need to include specific legal language concerning witnesses or notary public. Standardized forms also provide you with guidelines for completing a thorough AHCD.

If you need more room than the AHCD form provides, attach additional pages with your written instructions. A completed form must include your name, your signature, the date executed, and the signature of two witnesses or the stamp of a notary public. Don't forget to sign and witness any additional pages, too.

Keep the original form where family or friends can easily find it.

If you spend extended time in another state, you should also complete advance directives there, using that state's forms and rules. If you are to be admitted to a hospital or institution, be sure to take a copy of your AHCD. All copies of the AHCD have the same effect as the original.

You may change or revoke your AHCD at any time. Completing a new AHCD will automatically take the place of your previous one. An AHCD remains valid forever unless you revoke it, create a new one, or specify a date on which you want it to expire.

You can order a standardized AHCD kit from the California Medical Association at CMA Publications 800-882-1262.  
You may also order a kit from the CMA website:  
[www.cmanet.org/bookstore/fulllist.cfm](http://www.cmanet.org/bookstore/fulllist.cfm).  
These kits are available for a nominal fee.



## GET ORGANIZED

- 1 Keep your original AHCD, Will, Durable Power of Attorney, and other legal forms and notes where they can be found easily.
- 2 Your attorney should keep a copy of your Will and Durable Power of Attorney.
- 3 Give your agent a copy of the AHCD plus any worksheets or notes. Make sure he or she knows where to find the original.
- 4 Give your doctor a copy of your AHCD and ask that it be put in your medical record. If your doctor has objections to your decisions, either work them out or find another doctor.
- 5 Carry an advance directive wallet card with you.
- 6 Take a copy of your AHCD with you when entering a hospital or nursing home and ask that it be placed in your medical record.
- 7 Some organizations offer to register advance directives electronically and some churches and synagogues keep advance directives on file for members. You may wish to consider such a service as a back-up.
- 8 Keep all your insurance information—medical, long-term care, life

and special needs policies—in an accessible place. Tell a trusted person where these documents are located.

- 8 Unless already specified in a legal document, write out instructions for your funeral, burial or cremation preferences, and how they will be paid for. Keep this document with your ACHD.
- 9 Keep a list of ALL your documents in an accessible place, give copies to trusted relatives or friends, and let everyone know where the originals are kept.
- 10 Keep a Vial of Life on the refrigerator. This is a plastic sleeve containing important medical information for which paramedics and other emergency personnel are trained to look. A Vial of Life can be obtained free by calling 858-495-5083.

## RESOURCES

## California Probate Code Summary Relating to Capacity

Diagnosis of a mental or physical disorder is not sufficient to support whether someone lacks capacity.

If he or she lacks even ONE of the following functions, then incapacity may be determined by the court.

- Alertness and attention, including, but not limited to, the following:
  - o Level and quality of consciousness.
  - o Awareness of time, place, person, and situation.
  - o Ability to pay attention and concentrate.
- Information processing, including, but not limited to, the following:
  - o Short- and long-term memory, including immediate recall.
  - o Ability to understand or communicate with others, either verbally or otherwise.
  - o Recognition of familiar objects and familiar persons.
  - o Ability to understand and appreciate quantities.
  - o Ability to reason using abstract concepts.
  - o Ability to plan, organize, and carry out actions in one's own rational self-interest.
  - o Ability to reason logically.
- Thought processes. Deficits in these functions may be demonstrated by the presence of the following:
  - o Severely disorganized thinking.
  - o Hallucinations.
  - o Delusions.
  - o Uncontrollable, repetitive, or intrusive thoughts.
- Ability to modulate mood and affect. Persistent or recurrent euphoria, anger, anxiety, fear, panic, depression, hopelessness or despair, helplessness, apathy or indifference, that is inappropriate in the individual's circumstances is a sign of incapacity.
- The frequency, severity, and duration of periods of impairment are indications to the court of the level of the person's soundness of mind.

For purposes of a judicial determination, a person has the capacity to give informed consent to a proposed medical treatment if the person is able to do ALL of the following:

- Respond knowingly and intelligently to queries about that medical treatment.
- Participate in that treatment decision by means of a rational thought process.
- Understand all of the following items of minimum basic medical treatment information with respect to that treatment:
  - o The nature and seriousness of the illness, disorder, or defect that the person has.
  - o The nature of the medical treatment that is being recommended by the person's health care providers.
  - o The probable degree and duration of any benefits and risks of any medical intervention that is being recommended by the person's health care providers, and the consequences of lack of treatment.
  - o The nature, risks, and benefits of any reasonable alternatives.

A person who has the capacity to consent to a proposed medical treatment also has the capacity to refuse treatment.

## ELDER LAW & ADVOCACY

### *Agency Background and Goals*

For 30 years, Elder Law & Advocacy (EL&A) has been providing pro bono legal services to older individuals and their caregivers in San Diego and Imperial Counties who have little or no ability to pay for services. Services are related to financial elder abuse, consumer and credit, Medicare health insurance, housing, problems in long-term care facilities, estate planning and end-of-life issues, family law, durable powers of attorney. Our program sends staff attorneys into the community to 40 senior and community centers and nutrition sites, reaching more than 7,000 people each year.

When a senior is too medically fragile to travel to a community site, our staff makes a "home visit." Many clients are homeless or living on fixed incomes and can barely pay for food and housing. Many are homebound due to physical challenges. They can't pay for services, even when these services would significantly reduce stress, remedy serious financial problems, relieve a crisis, significantly lower the cost of medication or solve a family problem related to a will or trust.

Elder Law & Advocacy serves seniors with a wide range of services...from simple counseling about consumer law issues to complex litigation involving nursing home abuse and neglect, and predatory lending.

**Staff And Volunteers:** Elder Law & Advocacy employs experienced attorneys along with additional employees who provide clerical and administrative support. Each year, law students and pro bono attorneys and law firms assist with cases for elders. Elder Law & Advocacy's Medicare counseling program also utilizes community volunteers, many of whom have been volunteers at Elder Law & Advocacy for years.

**Community Education:** An important component of every program provided by Elder Law & Advocacy is community education. Members of our staff, as well as informed volunteers from the community, participate in seminars, panels, television and radio shows, health fairs, and other events to bring information to the commu-

nity. Many presentations are made in senior centers, nutrition sites, senior clubs, and other locations where older individuals congregate. Brochures, educational pamphlets and flyers are distributed to enable the senior community to maintain timely information concerning matters particularly affecting them, with an emphasis on financial elder abuse prevention.

To make an appointment with an attorney, Medicare counselor or to schedule a community education presentation, call 858-565-1392.

**Our Future:** Elder Law & Advocacy is committed to excellence in its programs and constantly strives to use a “best practices” approach in its service delivery. We collaborate and partner with numerous other community service providers in order to offer our clients access to as many resources as possible, and we are constantly expanding our resource network. The organization looks forward to a bright future of continued professional, dedicated and innovative service to the community.

## ELDER LAW & ADVOCACY PROGRAMS

### SENIOR LEGAL SERVICES

Legal services for persons ages 60 and over.

### HEALTH INSURANCE COUNSELING & ADVOCACY PROGRAM (HICAP)

Information, counseling, and advocacy for matters involving health insurance, long term care insurance, Medicare, Medicare Part D and HMOs.

### CAREGIVER LEGAL SUPPORT

Legal advice & representation for relative caregivers of individuals ages 60+.

### NURSING HOME RIGHTS ENFORCEMENT PROJECT (NHREP)

Health monitoring & legal assistance for skilled nursing home residents.

### PARTNERS IN CARING

Legal assistance for minority caregivers of elders with chronic and disabling health conditions through a collaborative network of support service agencies.

### LITIGATION DEPARTMENT

Assists a limited number of its legal services clients with elder abuse matters.

### SENIOR SHIELD

Community education program to help seniors avoid scams. It focuses on the prevention & litigation of financial abuse cases. Most victims are 70 – 80 years old and above. Senior Shield has three primary goals.

- Increase public awareness about financial scams and Medicare fraud
- Litigate cases utilizing staff and pro bono attorneys.
- Advocate for seniors by educating lawmakers about predatory schemes and trends.

### BI-LINGUAL PARTNERSHIP CLINIC IMPERIAL COUNTY

Provides courthouse based assistance for family members seeking conservatorship over an elder.

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There is no charge to qualifying clients for these program services; however, donations are encouraged and are necessary to support and enhance the programs on an on-going basis.

## Additional Contacts

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## GUIDES, HANDBOOKS, CDS & DVDs

**“Caregiver’s Tool Box, Information You Need... Pockets for Notes & Papers... An Organizer to Help Simplify Your Life”**

published by Aging & Independence Services, County of San Diego. An indispensable organizer to keep stress at a minimum. Available free by calling 858 495-5083.

**“Caregiver’s Handbook, A Guide & Resource for the Sandwich Generation”**

published by Aging & Independence Services, County of San Diego. A publication which addresses the needs of caregivers, who are often caught between elder parents and dependent children, all needing care and supervision. Available free by calling 858 495-5083,

**“A Good Death: Challenges Choices and Care Options”**

by Charles Meyer (1998). Down-to-earth, lay-language explanation of the implications of end-of-life care decisions from a religious and spiritual perspective.

**“Caring Conversations Workbook”**

published by the Center for Practical Bioethics, Town Pavilion, 1100 Walnut St., Ste. 2900, Kansas City, MO 64106-2197 (Tel. 816-221-1100). This is both a workbook and advance directive. It can be downloaded for free [www.midbio.org](http://www.midbio.org).

**“Handbook for Mortals: Guidance for People Facing Serious Illness”**

by Joanne Lynn, M.D., and Joan Harrold, M.D. (NY: Oxford University Press, 1999), available at [www.abccd-caring.org](http://www.abccd-caring.org). A most comprehensive and readable 242-page guide to dealing with serious, eventually fatal illness.

**“Hard Choices for Loving People: CPR, Artificial Feeding, Comfort Care and the Patient with a Life-Threatening Illness”**

by Hank Dunn. A&A Publishers, Inc., P.O. Box 1098, Herndon, VA 20172-1098 (Tel. 703-707-0174). Web site: [www.hard-choices.com](http://www.hard-choices.com). A concise and helpful 48-page booklet on end-of-life decisions concerning resuscitation, food and fluids, hospitalization, and cure versus comfort care.

**“Making Health Care Decisions for Others: A Guide to Being a Health Care Proxy or Surrogate”**

by the Division of Bioethics, Dept. of Epidemiology and Social Medicine, Montefiore Medical Center, Albert Einstein College of Medicine, Bronx, NY. Available at: [www.montefiore.org/prof/clinical/desm/prog-serv/bioethics/index.html](http://www.montefiore.org/prof/clinical/desm/prog-serv/bioethics/index.html). A guide every proxy or agent needs to read.

## Additional Contacts

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## ORGANIZATIONS AND WEB SITES

### Caregiving Resources

**Your Future Now (DVD)**  
DVD about AHCD and other  
caregiving issues. Available free at  
[www.caregiverplanning.org](http://www.caregiverplanning.org)

**Family Caregiver Support Program,  
County of San Diego/Aging &  
Independence Services**  
([www.sdcounty.ca.gov/hhsa/pro-  
grams/ais/caregiver\\_support/](http://www.sdcounty.ca.gov/hhsa/programs/ais/caregiver_support/))

**Family Caregiver Alliance**  
180 Montgomery Street, Suite 1100  
San Francisco, CA 94104  
415-434-3388  
800-445-8106  
[www.caregiver.org](http://www.caregiver.org)

**American Hospice Foundation**  
2120 L Street, NW, Suite 200  
Washington, D. C. 20037  
202-223-0204

**American Pain Society**  
4700 W. Lake Avenue  
Glenview, IL 60025  
847-375-4715

**Americans for Better Care of the  
Dying (ABCD)**  
4125 Albemarle St., NW, Suite 210  
Washington, DC 20016  
202-895-9485

**American Medical Association (with  
Robert Wood Johnson Foundation)**  
515 North State Street  
Chicago, IL 60610  
312-464-5000

**Growth House, Inc.**  
San Francisco, CA  
415-255-9045

**Hospice Foundation of America**  
2001 S St., NW #300  
Washington, D. C. 20009  
800-854-3402

**Last Acts Coalition**  
Medicare Rights Center  
(800) 333-4114 (toll free)  
212-869-3850

**National Hospice and Palliative  
Care Organization**  
1700 Diagonal Road, Suite 300  
Alexandria, VA 22314  
800-658-8898 or 703-243-5900

**Supportive Care of the Dying: A  
Coalition for Compassionate Care**  
c/o Providence Hospital System  
4805 NE Glisan St.  
Portland, OR 97213  
503-215-5053

### Fraud & Scams

**Elder Law & Advocacy**  
858-565-1392 or 800-434-0222

**California Attorney General's Office**  
([ag.ca.gov](http://ag.ca.gov))  
800-925-5225: General Information  
800-880-0240: Identity Theft Victims  
800-722-0432: Elder Abuse

**California Department of Consumer  
Affairs**  
([dca.ca.gov](http://dca.ca.gov))  
800-952-5210: Consumer Complaints



### California Department of Corporations

(www.corp.ca.gov)  
866-275-2677

### California Department of Insurance

(insurance.ca.gov)  
800-927-4357  
Insurance & annuity scams

### Federal Trade Commission

(ftc.gov)

## HOUSING

### Assisted Living, Nursing Homes, Mobile Homes

#### California Advocates for Nursing Home Reform

(canhr.org)  
800-474-1116  
Consumer assistance with nursing home issues

#### Mobile Home Ombudsman

(hcd.ca.gov)  
800-952-5275  
Information and complaints

## GOVERNMENT BENEFITS & ENTITLEMENTS

### Health Insurance Counseling & Advocacy Program (HICAP)

(calhealthadvocates.org)  
Medicare counseling and advocacy assistance. San Diego and Imperial County locations through Elder Law & Advocacy at 858-434-0222 or 800-434-0222

### Social Security Administration

(socialsecurity.gov)  
800-772-1213  
Benefits status, local office locations

### U.S. Department of Housing and Urban Development

(www.hud.gov)

## FINANCIAL ELDER ABUSE, SCAMS & FRAUDS

Financial elder abuse can destroy a senior's next egg, result in the loss of a senior's home, and cause emotional and ultimately physical distress, all serious challenges to a senior's ability to remain financially secure, independent and healthy.

### SIMPLE STEPS TO AVOID BECOMING A VICTIM

- Do not keep large amounts of cash on hand
- Never allow anyone into your home who is not well known to you
- Do not hesitate to hang up the phone when someone calls and wants to sell you something
- Never give out bank account, social security or credit card numbers over the telephone unless you initiated the call
- Shred all unused credit card applications
- If a power of attorney is being misused, revoke it immediately—do not wait
- Keep all cash, checkbooks and legal documents in a safe place
- Make sure anyone preparing legal documents, such as a trust, is a licensed attorney in good standing

### COMMON SCAMS

**Lottery or Sweepstakes Scam:** An individual calls or a letter or “notification” comes in the mail announcing the “win.” In order to claim the prize, money must be sent by the “winner” within a certain amount of time. Never send money! This is a scam.

**Let-Us-Review-Your-Living-Trust Scam:** An invitation to a free breakfast or lunch advertising a “free” estate planning seminar. Attendees are asked to give out personal contact and sometimes financial information. Later, an overpriced trust amendment is sold, sometimes along

with another financial product-an annuity or life insurance policy. Beware! These documents may harm your current estate plan or may stick you with an inappropriate investment.

**Door-to-Door Contractors:** Sales people who have looked over the outside of your home without permission, tell you that you need repairs and offer a low cost. Caution! These people are often unlicensed, take money up front “for materials” and do little or no work.

**“I Need to Use Your Phone” Scam:** Two individuals approach your home, using a fake emergency to get inside. Watch out! The thieves stay with the resident while the other steals property.

**Home Loan Modification Scam:** The advertisement offers to modify your loan regardless of your credit score, at a great rate. After requesting a substantial amount of money up front, no work is done to modify your loan.



To check on suspicious offers before acting on them, or if you think you may be the victim of a scam, call Elder Law & Advocacy’s Senior Shield Hotline at 858-715-1648.

You can also visit the **Senior Shield ScamScreen** website at [www.seniorscamscreen.org](http://www.seniorscamscreen.org) for more information and helpful tips to avoid scams.

**[www.seniorlaw-sd.org](http://www.seniorlaw-sd.org)**  
(Website of Elder Law & Advocacy)

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**AGING & INDEPENDENCE SERVICES**

COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY