

The Client

Some casualties of dementia are expected: Memory. Health. Appetite. Hygiene. But some losses can be a surprise—like the deterioration of Harold’s relationship with his adult children as tension escalated over his wife’s care.

Harold, always a stickler for certain social rules, was becoming more and more rigid in his expectations. Something as simple as running a little late could trigger his agitation with his kids. The relationship was falling apart fast.

The Challenge

Harold and Betty’s situation is a common one: an elderly couple living at home, the wife with dementia, the husband shouldering her care. As so often happens, Harold didn’t realize he himself was compromised. He’d recently had a close call with cancer and was struggling with recurring bouts of pneumonia.

He was showing the beginning signs of dementia himself. His own functions were declining and when his children tried to intervene, they were met with constant obstacles, which put both their parents’ care in jeopardy.

Another challenge with Harold and Betty—and another common theme—was their alcohol consumption. The couple, gregarious and social, had enjoyed alcohol before their health declined. Harold loved to drink with his wife,



but both were at risk for falls, and Betty’s high anxiety required a heavy dose of medication. Medications + alcohol + dementia never equals anything good.

Betty’s children recognized that their mother’s dementia was progressing. She needed more care, they knew, than their father could provide. She wasn’t bathing. She wasn’t taking her pills. She was sleeping constantly. She wasn’t eating. She wasn’t engaging in activities that would bring her joy. She was *existing*. That wasn’t enough for Betty’s kids.

The Solution

What the family needed was for Tender Rose to provide care for both of them. We paired them with two regular Memory Care Professionals (MCPs) and a Care Coordinator who monitors health, communicates with the children, and arranges medical appointments.

We started with 12-hour care, seven days a week, but are always on the lookout for signs of pneumonia or too many cocktails. In those situations, we seamlessly increase to 24/7 care until the situation is diffused.

We also came up with creative ways to limit the couple's drinking. Sometimes we have a heart-to-heart with Harold, who desperately loves his wife, to remind him why Betty can't drink. When the couple heads out to a restaurant, we call ahead and ask the bartender to water down the drinks. And we've helped them both rediscover healthier ways of enjoying life.

Before Betty became ill, the couple had a rich social life. They loved people, loved going out, loved interacting with the world. But their health problems isolated them. We've found ways to encourage them to re-enter their lives. Our MCPs take the couple for walks around the neighborhood. We explore the back yard and local coffee shops. We play trivia games. We help them have fun again.



The Outcome

Couples care can sound intimidating: twice the care, twice the price. But in fact, couples care at home is more cost effective. Facilities charge double for two people, whereas we don't with our one-on-one care.

More importantly, the relationship between Harold and his children has been repaired. The tension in the family was palpable when we first started working with them. The kids were angry at their parents, angry at each other, angry at the situation. But at the heart of the tension was the desire to do what's best for their parents. We helped them achieve it.

If someone you know with dementia is refusing care, needs medical help or has no quality of life, call us. We'll help you find a solution.

Call (415) 340-3990 or visit www.TenderRose.com

Care in Full
Bloom