

	PATIENT NAME:	test ToTest
	DOB:	12/12/1989
	AGE:	35
	SEX:	F
	PREPARED BY:	Provider Test Account

1. DIAGNOSIS

DEMENTIA SEVERITY RATING SCALE: 40/54	ACTIVITIES OF DAILY LIVING INDEX: 5/6
0 – 18 Mild 19 – 36 Moderate 37 – 54 Severe	5 – 6 Full function 3 – 4 Moderate impairment 0 – 2 Severe functional impairment

BRAINCHECK MEMORY NEUROCOGNITIVE ASSESSMENT

POPULATION RANK: 25 %	COMPOSITE IMPRESSION: Likely
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ESTIMATED LEVEL OF COGNITIVE IMPAIRMENT

Severe Dementia

Severe dementia causes profound memory loss, limited communication, and loss of independence. A person may not recognize loved ones, struggle to eat or walk, and require full-time care. Medical needs often increase, including help with feeding, toileting, and preventing infections. Providers may shift focus to comfort care and enhancing quality of life. Family members and caregivers play a central role in making decisions based on the person’s preferences and history.

DEPRESSION

0 – 4 Normal | 5 – 10 Possible indication of depression | >10-15 Likely indication of depression

GDS SCORE: 10	PRESENCE OF DEPRESSION: Possible
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ANXIETY

0 – 4 Normal | 5 – 9 Mild anxiety | 10 – 14 Moderate anxiety | ≥ 15-21 Severe anxiety

GAD7 SCORE: 6	PRESENCE OF ANXIETY: Mild
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[illegible]

REFERRALS

Review the referrals and provide any necessary contact information.

☐ Geriatrician Fssa 	☐ Hearing Screening 	☐ Neurologist
☐ Neuropsychologist 	☐ Occupational Therapist 	☐ Physical Therapist
☐ Psychiatrist 	☐ Sleep Evaluation 	☐ Speech-Language Pathologist
☐ Vision Screening 	☐ 	☐

CONSIDERATION OF CLINICAL TRIAL:

CONTACT INFO:

FOLLOW UP APPOINTMENT SCHEDULED AT:

FOLLOW UP BRAINCHECK COGNITIVE ASSESSMENT SCHEDULED AT:

NOTES

3. HEALTHY BODY, HEALTHY MIND

A. GENERAL HEALTH

In the late stage of dementia, a person's thinking and physical abilities can decline quite a bit. They may have trouble with memory, speaking, understanding what's happening around them, and knowing where they are or what time it is. Many people need help with everyday tasks like eating, using the bathroom, or moving around. Some may have trouble with bladder or bowel control, swallowing, or may lose weight over time. Even if speaking becomes difficult, connection is still possible. A gentle touch, a kind tone of voice, or a warm smile can bring comfort and help them feel cared for and understood.

At this stage, family and caregiver support becomes even more important. Some people may need 24 hour care at home or in a long-term care setting. The focus of care at this stage is to help the person feel as comfortable and supported as possible. By paying attention to their personal history, preferences, and what still brings them joy, caregivers can create meaningful moments and improve quality of life.

B. LIFESTYLE

Nutrition

Research shows that certain eating patterns can help protect brain health. A diet rich in foods like those found in Mediterranean cuisine—with plenty of vegetables, fish, and healthy oils—provides nutrients that support brain function. You don't need to completely change your eating habits. Instead, try gradually including more of these brain-friendly foods:

- Colorful Fruits and Vegetables: Especially those with deep purple, blue, and red colors like blueberries, strawberries, and cherries, which contain protective compounds
- Fish: Aim for oily fish like salmon or mackerel twice a week for beneficial omega-3 fatty acids
- Whole Grains: Choose wholemeal bread, brown rice, and whole grain pasta when possible
- Healthy Fats: Use olive oil for cooking and dressing foods instead of butter or other solid fats
- Protein Sources: Include beans, lentils, nuts and seeds alongside moderate amounts of lean meat
- Lower Sugar and Salt: Reduce intake of sweets, processed foods, and added salt

Remember that food preferences and eating habits are personal. If these suggestions seem overwhelming, start with small changes. Consider speaking with a healthcare provider about nutritional counseling, which may be covered by insurance.

Exercise

Regular movement is one of the most powerful tools for supporting brain health. Exercise increases blood flow to the brain, promotes the growth of new brain cells, and helps maintain existing neural connections. Even moderate activity can make a significant difference. Here's what research recommends:

- Aim for regular activity: Try for 30 minutes of moderate activity (like brisk walking) five days a week, or 25 minutes of more vigorous activity (like swimming or cycling) three days a week
- Start where you are: If 30 minutes feels overwhelming, begin with 10-minute sessions and gradually build up
- Include different types of movement: While aerobic (heart-pumping) exercise is especially beneficial for the brain, strength training 2-3 times weekly also provides important benefits

- Focus on consistency: Regular, moderate activity is more beneficial than occasional intense workouts
- Choose enjoyable activities: Walking with friends, gardening, dancing, or gentle yoga can all provide benefits while being pleasurable

Outdoor Activity

Sunlight is one of the best natural sources of vitamin D, which supports overall health—including brain health. Fresh air and natural light can also help improve mood, reduce anxiety, and support better sleep. Even a short time outdoors can make a big difference. Here are some simple ways to enjoy the outdoors:

- Aim for 15 to 30 minutes outside, two to three times a week, if possible.
- Go outdoors during times of stress or restlessness. A change in environment can help reduce agitation.
- Try relaxing activities like sitting on a porch, enjoying a garden, or taking a short morning walk.
- Choose familiar places—these can offer comfort and a sense of security.
- If walking is difficult, simply sitting in the sun with a hat and sunscreen can still offer benefits.

Always make sure the person is dressed appropriately for the weather and stays safe during outdoor time.

C. SENSORY

Changes in vision and hearing often accompany aging and can compound the challenges of dementia. These sensory changes may cause confusion or communication difficulties that might be mistaken for cognitive problems.

People who are 65 or older, especially those with cognitive changes, should have regular vision and hearing tests. Addressing sensory problems often improves quality of life and can reduce some dementia-related challenges.

D. COGNITIVE STIMULATION

Keeping the Mind Active

Learning new skills creates beneficial connections in the brain at any age. These new pathways can help compensate for changes that occur with dementia. The key is trying activities that are new and moderately challenging:

- If crossword puzzles are already a favorite activity, try something different like sudoku
- Learn to play a new card game or board game
- Try a new hobby like painting, learning common phrases in another language, or playing chess
- Join a class at a community center to learn something you've always been curious about

Activities should be enjoyable and slightly challenging, but not frustrating. The goal is to engage the brain in new ways while having a positive experience.

Social Connection

Regular social interaction is essential for brain health. Staying connected with others helps maintain thinking skills and emotional wellbeing. Simple ways to stay socially active include:

- Joining groups based on interests, such as book clubs or walking groups
- Attending community center activities or classes
- Spending time with family and friends in comfortable settings
- Volunteering for causes that matter to you

- Participating in faith community activities if this is important to you

As disease progresses, social situations might become more challenging due to memory difficulties or communication changes. Creating supportive, understanding environments where the person feels safe and valued is important. Even brief, positive social interactions can provide significant benefits.

4. MOOD and EMOTION

Psychological symptoms commonly occur alongside cognitive decline. These conditions should be addressed because they have the potential to accelerate cognitive decline and increase the risk of developing dementia. Behavioral problems and mood disorders, such as depression and anxiety, can occur early in the progression of dementia and gradually increase in severity over time.

A. DEPRESSION

Many individuals with cognitive impairment may struggle with low feelings including sadness, guilt, and hopelessness, but are often unable to communicate that they are depressed. However, their actions can provide clues as to their psychological condition. For example, a person who always loved gardening will likely respond to an activity involving flowers, such as floral arrangements. However, a depressed person with dementia, develops apathy, often ignoring or skipping out on activities they used to enjoy. Physical manifestations of psychological distress, such as gastrointestinal (GI) disturbances or headaches, can be another clue that something is wrong. Many dementia symptoms are similar to depression symptoms, making it difficult to identify sometimes. If unsure, discuss it with the provider.

B. ANXIETY

People who have anxiety may feel restless, tired, uneasy, irritable, and struggle to concentrate. They may also have physical symptoms – fast or irregular heartbeats (palpitations), shortness of breath, dizziness, nausea or diarrhea.

It may become hard for them to rely on a care partner for care and direction. If you see signs of anxiety, discuss them with the primary provider.

C. APATHY

Apathy is very common in people with dementia. Unlike occasional disinterest that everyone experiences, apathy in dementia reflects actual changes in the brain areas responsible for motivation and interest. The parts of the brain that help us initiate actions and feel excitement become compromised, making it physically difficult for the person to start activities or feel enthusiasm, even for things they once enjoyed. While it can't be "cured", thoughtful support and engaging environments can significantly improve quality of life.

- Maintain gentle encouragement without pushing too hard
- Create structured routines with meaningful activities
- Celebrate small victories and participation
- Seek out activities specifically designed for people with dementia, such as community music groups or memory cafés
- Consider professional support from occupational therapists, music therapists, or other specialists
- Focus on creating a supportive environment rather than trying to "fix" the apathy

D. HALLUCINATIONS

Hallucinations are experienced by many people with dementia, particularly with certain types of memory conditions. These experiences happen because of changes in how the brain processes sensory information and distinguishes between thoughts and external reality. For the person experiencing them, hallucinations feel completely real. This isn't 'confusion' or 'making things up'—the brain is actually creating sensory experiences that seem as vivid and convincing as actual perceptions. What the person sees or hears varies widely, from harmless images (like flowers or small animals) to frightening ones (like intruders). Here are some helpful approaches:

- Respond calmly and supportively, acknowledging the person's experience
- Avoid arguing about whether what they're seeing is “real”
- Gently redirect attention if the hallucination is causing distress
- Check for environmental factors that might contribute (poor lighting, reflections, etc.)
- Ensure vision and hearing are regularly assessed
- Speak with healthcare providers about medication options if hallucinations cause significant distress

E. AGGRESSION

Some people with dementia may show aggressive behaviors, which typically become more common in the middle and later stages. These behaviors almost always stem from the person's inability to express needs, understand their environment, or process information properly. Physical discomfort, fear, misunderstanding others' actions, and overwhelming surroundings are common triggers. The brain changes in dementia can affect impulse control and emotional regulation, making it harder for the person to manage frustration or anxiety in helpful ways. What might appear as “aggression” is often a defensive response or an attempt to communicate when other methods fail. Identifying and addressing the underlying causes not only reduces these challenging episodes but significantly improves quality of life for everyone involved.

During an Aggressive Episode

- Stay calm and keep your voice gentle and reassuring
- Give the person plenty of physical space
- Avoid sudden movements or restraining the person
- Ensure your own safety, leaving the room if necessary
- Listen attentively to what they're trying to communicate
- Acknowledge their feelings without judgment
- Maintain open body language and gentle eye contact
- Calmly explain your presence and intentions

After an Aggressive Episode

- Never blame or punish the person, as they may not remember what happened
- Focus on comfort and reassurance, as they may still feel upset
- Talk through your own feelings with a supportive person
- Look for patterns or triggers that might have contributed
- Consider whether pain, discomfort, or environmental factors played a role

Remember that behavior is a form of communication. By looking for the need or emotion behind aggressive behavior, you can often prevent future episodes and improve quality of life.

5. BEHAVIORAL STRATEGIES

In the late stage of dementia, behavior changes can become more pronounced. The person may be agitated often, may not recognize their primary care partner, and may have no awareness of recent experiences or their surroundings. Communication becomes more difficult, and they may struggle to express their needs, feelings, or desires. They may rely heavily on non-verbal cues, so it's important to observe their body language, facial expressions, and actions closely, as these may be their only way of conveying what they need or are experiencing.

A. SYMPTOMS

Here are some common symptoms and what to do with them.

Cognitive Changes

Various aspects of cognitive ability may be affected including memory, language, judgment, problem-solving, and spatial awareness. As the disease progresses, these symptoms tend to become more pronounced, making it increasingly challenging for individuals to remember recent events, recognize familiar faces, communicate clearly, concentrate, and perform everyday tasks. The following are some tips that could be helpful for these cognitive changes:

- Create a structured and safe environment to help reduce confusion and increase familiarity
- Reduce background noise and distractions to help them focus on the task at hand
- Use memory aid such as labels, notes, calendars, alarms or timers, pill dispensers
- Simplify a task into smaller steps and provide clear instructions
- Encourage physical and social activities
- Establish a consistent daily routine

Sleep Issues

Quality sleep is vital for brain health and overall wellbeing. During sleep, the brain repairs cells, balances hormones, and processes information from the day. Most older adults need 7-9 hours of sleep each night, the same as younger adults. These practices can help improve sleep:

- Maintain a schedule: Go to bed and wake up at consistent times, even on weekends
- Create a restful environment: Use soft lighting in the bedroom and keep the room comfortable
- Manage noise: Try using gentle background sounds, calming music, or earplugs if needed
- Reserve bed for sleep: Avoid watching TV or eating in bed to help the brain associate bed with rest
- Limit daytime napping: If napping, keep it brief and earlier in the day

Personality Changes

Individuals with dementia may experience symptoms such as suspicion, aggression, hallucinations, and paranoia, which can be challenging to manage. They may see things in a new or unusual way, misunderstand something they saw or heard, feel frustrated and exhibit poor impulse control due to brain changes. Here are some tips to manage them:

- Consider underlying medical causes such as an infection, treatable condition, overlooked needs such as thirst and hunger, and review medications.
- Create a calm and safe environment, increase lighting and avoid overstimulation.
- Listen to them. Accept their reality. Validate their feelings. Reassure them and let them know you care.
- Use distraction with familiar music, photos, or consider an activity or exercise.
- Avoid confrontational behavior or language, as this can escalate feelings of suspicion, aggression, or fear.

Sundowning

In the late afternoon and evening, individuals with dementia may display an increase in behavioral expressions, such as confusion, anxiety, pacing, and aggression, known as “sundowning”. Several factors can worsen sundowning, such as insomnia, underlying infections, dehydration, pain, medication side-effects, fatigue, over-stimulation, and difficulties in differentiating reality from dreams. It is crucial to identify and address the underlying trigger to alleviate sundowning. Furthermore, other therapies, such as light therapy, music therapy, and environmental modifications, may also prove beneficial. Providing familiar objects, photos, and music can offer comfort and reassurance to the person experiencing these behaviors.

B. COMMUNICATION

As dementia progresses over time, a person with dementia will lose the ability to communicate which can be very challenging and frustrating. It's important to meet the person where they are. Don't argue or correct them. Instead, go along with their reality. Because verbal communication is limited, it helps to learn other ways to connect. Using all five senses—touch, sound, smell, taste, and sight—can support meaningful interaction. Tips for communication include:

- Be patient and calm. Don't rush. Give plenty of reassurance and encouragement.
- Use touch gently. A warm hand on the shoulder or holding their hand can show love and support.
- Make eye contact. Sit at their level and face them when speaking.
- Use their name. Familiarity helps them feel recognized and respected.
- Speak softly and slowly. Use a calm tone. Avoid interrupting or correcting them.
- Keep it simple. Use short, clear sentences. Say one thing at a time.
- Offer limited choices. Give no more than two options. Avoid open-ended questions.
- Use positive suggestions. For example, say “Let's go here” instead of “Don't go there.”
- Speak like you would to any adult. Avoid baby talk or condescending tones.
- Listen with care. Even if they repeat themselves, listen with patience and without judgment.
- Pay attention to body language. Use hand gestures and facial expressions to support your message.
- Notice their behavior. Actions may speak louder than words and can signal pain, fear, or unmet needs.
- Keep talking. Even if they can't respond, your voice and presence still matter.
- Stay positive. Your mood affects how they feel—try to make them feel safe and valued.

C. ACTIVITY OF DAILY LIFE

It may become more challenging to handle some daily tasks such as grocery shopping, housework, finances, and food preparation over time as their cognitive ability continues to decline. Regular monitoring of their abilities and adjusting the level of assistance provided as needed can help ensure that they are able to maintain their independence and quality of life for as long as possible. Here are some suggestions to help manage these tasks:

- Create a consistent and structured routine. For example, establish a regular day and time for grocery shopping or housework, and stick to it as much as possible.

- Simplify tasks into smaller, more manageable steps. For example, instead of asking the person to prepare an entire meal, suggest they help with a specific task such as chopping vegetables.
- When cognitive function declines, it can be helpful to use memory aids such as lists, labels, or notes around the residence to help prompt memory, keep track of tasks, and stay organized. For example, make a shopping list before going to the store, or label cabinets and drawers to help with finding items.
- Simplify finances: Consider simplifying finances by setting up automatic bill payments or delegating financial management to a trusted family member or financial advisor.

Some basic self-care tasks like bathing could also be challenging and need extensive assistance:

Feeding

Mealtime challenges often emerge as dementia progresses. Changes in perception, coordination, and food preferences are common. Here are some tips:

- Create a calm, quiet eating environment with minimal distractions
- Use contrasting colors to help distinguish food from the plate (for example, dark plates for light-colored foods)
- Serve only one or two foods at a time to prevent overwhelm
- Check food temperature before serving
- If utensils become difficult, offer finger foods like sandwich quarters, fruit pieces, or chicken strips
- Model eating movements if needed
- Make mealtimes social by eating together
- Allow plenty of time for meals
- Watch for signs of swallowing difficulties—coughing during eating, a wet-sounding voice, or frequent throat clearing might indicate a need for evaluation by a healthcare professional

6. PLANNING

Thoughtful preparation across several key areas can help ensure dignity and peace of mind as dementia progresses. Early planning allows the person to participate in decisions and express their wishes for future care.

COLLECTING PERSONAL INFORMATION

Gathering personal information early on is recommended. This can include information such as:

- Social Security Number
- Insurance policy numbers (long-term care, life, home, and car)
- Contact information of attorneys, financial advisors or accountants the person with dementia has established services with
- All income sources (pension plans, stock certificates, etc).
- Tax records
- Credit card and outstanding debt (bills and mortgage papers)

This type of information may be needed to access government benefit programs like Medicare or veterans' benefits, private insurance information, and loan and savings information.

EMERGENCY MEDICAL BINDER

Creating an emergency medical binder, kept in a safe and accessible place, will be helpful when dealing with urgent medical issues. The emergency medical binder should include:

- Current Medication List
- Pharmacy contact information
- Medical history
- List of any allergies
- List of emergency contacts
- Healthcare providers' contact information
- Any other official medical documentation preferences (see below)

CARE OPTIONS

Depending on the stages of disease, there are a number of housing options to consider:

- Independent living or retirement communities for those who can maintain their daily activities independently.
- Assisted living facilities with some in-house care and organized activities, and special sections for residents with dementia.
- Life care or continuing care retirement communities with a lifetime commitment to continued care as older adults age.
- Nursing homes or skilled nursing care facilities offering long-term, 24-hour care for late-stage dementia, with special memory care sections.
- Palliative care, which is specialized medical care focused on symptom management to improve the quality of life for individuals with serious illnesses, and provide additional support services.
- Hospice care, available for those with terminal illnesses in the home, hospital, or hospice facility, with Medicare covering costs for older adults with dementia.

Talk to your provider which care options are appropriate for your stage.

For more information, please visit the Resources section.

7. SAFETY OF ENVIRONMENT

As the disease progresses, it is important to evaluate potential safety issues and understand how to create an environment as free from danger as possible. Engage the person in conversation to talk about living decisions, enabling them to make choices where possible. The best living environment for them is one that helps them to be as happy and independent as possible.

Consider these recommendations to increase home and individual safety.

Falls

Falls are a significant cause of morbidity among the older adults, particularly the ones with cognitive declines. Here are some tips to reduce the risks:

- Remove clutter, loose rugs, and obstacles from pathways
- Ensure good lighting, especially on stairs and in hallways
- Install grab bars in bathrooms and handrails on stairs
- Consider contrasting colors at the edges of steps to improve visibility
- Choose footwear with non-slip soles that fit properly
- Consider a physical therapy evaluation for personalized balance exercises
- Be aware that some medications can increase fall risk
- Address vision problems promptly

8. CAREGIVER SUPPORT

While caring for an individual with dementia can be very rewarding, it can also be very overwhelming. The roles associated with caring for another person can be stressful and, at times, can take a toll on your health, as all your time and effort is focused on the patient's needs. Remember to maintain your physical and emotional health by taking time for yourself to exercise, eat healthy food choices, connect with others who can offer emotional support and look for resources to help. It's important to take care of yourself as well as your loved one.

A. LIFESTYLE CHANGES

Possibly due to shared environmental exposures, caregivers who are spouses of persons with dementia may be at increased risk of developing dementia themselves. Caregiving can be stressful. Be aware of dementia risk factors (hypertension, poor diet, diabetes, etc.) to decrease your risk of developing dementia, and consider making lifestyle changes (see lifestyle section above) to maximize your health.

B. RESPITE CARE

Respite care provides temporary relief for primary care partners, allowing time for rest, personal activities, and self-care. Regular breaks from care responsibilities are essential for preventing burnout and maintaining your own health.

Types of respite care include:

- In-home services: Trained companions or home health aides who come to your home
- Adult day centers: Programs where your loved one can participate in activities and receive care during daytime hours
- Short-term residential stays: Temporary care in assisted living or nursing facilities
- Family and friend support: Coordinated help from your personal network

Respite care might be covered by long-term care insurance, veterans' benefits, or state-based programs. The ARCH National Respite Network and Resource Center can help identify options in your area.

C. EMOTIONS

It is common for caregivers to feel overwhelmed, anxious, frustrated, and even angry at times. Seeking support can be beneficial. Joining a caregiver support group can provide a safe and supportive environment to share experiences, ask questions, and receive emotional support from others who are going through similar experiences. Consider reaching out to local organizations or support groups to find one that fits your needs.

Grief and Loss

As dementia is a progressive and fatal condition, caring for a loved one experiencing these changes can be difficult. You may experience grief and loss throughout your caregiving journey. It is a slow, gradual loss. Allow yourself to grieve these losses and don't push these feelings down. Name your feelings, accept the changes, create room for hope and talk about them with a trusted friend, family member, counselor, or provider. Sometimes talking with another caregiver with a similar experience can be helpful, as you can each share your feelings and strategies for coping and living with the losses. Talking about your emotions with a professional may help you feel less alone.

9. RESOURCES

NIA Alzheimer's and Related Dementias Education and Referral (ADEAR) Center (nia.nih.gov/health/alzheimers)

Learn more about the disease, and get news, tips, and resources provided by the National Institute on Aging (NIA).

Alzheimer's Association (alz.org)

Alzheimer's Association is the leading voluntary health organization in Alzheimer's care, support and research. 24/7 Helpline (800.272.3900) is available for crisis guidance, decision support etc. In addition, both in-person (alz.org/events/event_search) and online (alzconnected.org) support groups are available.

Alzheimer's Foundation of America (alzfdn.org)

The Alzheimer's Foundation of America's (AFA) mission is to provide optimal care and services to individuals living with Alzheimer's disease and related illnesses and to their families and caregivers.

Alzheimers.gov (alzheimers.gov)

Explore the Alzheimers.gov portal for information and resources on Alzheimer's and related dementia caregiving from across the federal government.

AARP (aarp.org/caregiving)

AARP is a nonprofit, nonpartisan organization that empowers people to choose how they live as they age.

Family Caregiver Alliance® (caregiver.org)

Family Caregiver Alliance is the first community-based nonprofit organization in the country to address the needs of families and friends providing long-term care for loved ones at home.

ALZConnected® (alzconnected.org)

ALZConnected is a dedicated community where people with Alzheimer's, their caregivers, and others affected by the disease can share answers, opinions, ideas, and support.

Eldercare Locator (eldercare.acl.gov | 1-800-677-1116)

A public service of the U.S. Administration on Aging connecting you to services for older adults and their families.

Community Resource Finder (communityresourcefinder.org)

Alzheimer's Association AARP Community Resource Finder is a database of dementia and aging-related resources powered by Healthlinkdimensions®.

Home Health Care Services (medicare.gov/care-compare/?providerType=HomeHealth)

Home health care aides are skilled, licensed medical professionals who come to your home and help you recover from a hospital stay, illness, or injury.

National Respite Locator Service (archrespice.org/caregiver-resources/respitlocator/)

Respite services provide short-term care which allows the caregiver to get a break to rest or go on a vacation.

BenefitsCheckUp (benefitscheckup.org | 1-571-527-3900)

Help people to understand benefits available from federal, state, and local programs by the National Council on Aging (NCOA).

Meals on Wheels Association of America (mealsonwheelsamerica.org | 1-888-998-6325)

Provides information on local meal delivery and group meal locations for seniors.

SAMHSA (samhsa.gov | 1-800-662-4357)

Substance Abuse & Mental Health Services Administration National Helpline is free, confidential, 24/7, 365 days a year treatment referral and information service in English and Spanish for individuals and families facing mental issues.

NAMI Helpline (nami.org/help | 1-800-950-6264)

National Alliance on Mental Illness Helpline is a free, nationwide peer-support service (10 am - 10 pm ET) providing information, resource referrals and support to people living with a mental health condition and their family members and caregivers.

MyGrief.ca (mygrief.ca)

An online resource to help people move through their grief.

The Conversation Project (theconversationproject.org)

Offers a guide for how to talk about the end of life.

National Association for Elder Law Attorneys (naela.org)

Offers a directory of elder law attorneys.

National Hospice and Palliative Care Organization (allianceforcareathome.org/find-a-provider)

Provides information about hospice and palliative care and local hospice and palliative care organizations.

LOCAL RESOURCES

Review the local resources and provide any necessary contact information.

Name

Contact Information
