

The Boulder Times



July 2024

Boulder Creek: Celebrating 10 years and still blooming

Hello everyone,

1. **Cancelled until August:** Our next Family Council and Family Dementia Support Group will be on 13th at 11:30am. Our Elderly Waiver Speakers from the County are unable to be here and have rescheduled for October. Our August Guest Speaker will be Jane Nelson-Como from A.C.E.. Education will still be provided each month in the newsletter. A light lunch will be provide for attendees. Water will be served. Bring your own beverage if you prefer something else.
2. Our 10-year anniversary celebration will be curtailed to non-public events with the exception of the food truck and our city-wide scavenger hunt.
3. Tuesday July 23rd Scotty Biggs BBQ Food Truck with his delicious BBQ will be in the BC parking lot from 11-2pm.m Did someone say BBQ I hope you will come out and support it.
4. Tuesday Aug 20 at 6pm will be the 2nd of the “Summer Dementia Awareness Movie Nights”. Movie Showing will be award winning movie, “The Father” with Anthony Hopkins. August movie, “Away from Her” with Olympia Dukakis has been rescheduled to September.

5. If you have not signed up to see Gene and would like to please talk to Mary or Jan.
6. If you have a new care plan to sign, please stop by Jan's office so we can take care of it.
7. **Boulder Creek Lending Library:** Please take a moment to check it out the next time you are in the area. It's there for your use.
8. The Anniversary T-shirts should be ready to go the first week of July.
9. **State of MN Quality of Life Surveyors should be coming soon** to interview our residents. Survey company hired is call "Vital Research". If you prefer your loved one not be interviewed, please contact me by email as soon as able. I need to show proof of your choice to the surveyors. You as family members will also be receiving survey questions in the mail. **This is your opportunity as family members to speak on behalf of your loved ones. It is not junk mail.**
10. Treats are always wonderful. **Please bring treats to share not to leave.** We are finding more crumbs on the floor than are hitting the residents mouths. (That means we are also finding ants! Yes, believe it or not, those normally dormant ants come out when those delicious treats are left out and about.)
11. As always, my door is open. Please feel free to contact me with any questions or concerns.



Anniversary Week will include:

A Daily City-Wide Dementia Awareness Scavenger Hunt

- 1) Look for a daily clue M-F on the BC website or FB page. The clue will lead you to a purple Boulder. If you find the Boulder return it to Boulder Creek for Marshall Chamber Bucks.**

Plan B: Covid Contingency Plan

If we still have covid in the building the week of July 1-6 we in an abundance of caution will be cancelling the majority of the public activities in order to mitigate the spread.

- 1) Monday: Short Stories and Popcorn
- 2) Tuesdays: Scotty Bigs BBQ Food Truck/Lemonade and Cream Puffs in the Courtyard
- 3) Wednesday: Walker Wash Sprinkler Fun in Courtyard
- 4) Thursday: Root beer Floats
- 5) Friday: Freezie Pops
- 6) The daily City-Wide Scavenger hunt will still happen.
- 7) Everything else public in July will be cancelled
- 8) This includes cancelling the family council/support group and the dementia movie night. July speakers will come in October. Movie night will start up again in Aug and continue into October
- 9) The virtual dementia tour will take place at a later date (tba)
- 10) A BC family picnic will be held in the courtyard before the weather changes.

Press release



10 Years and Going Strong

Boulder Creek Assisted Living & Memory Care opened up its doors on June 30th 2014.

The Carr Family who has spent a life time dedicated to serving the needs of the Marshall community and the surrounding area realized the area still had an unmet need. With the realization that SW Minnesota was still lacking in one area when serving the older population. They had built Hill St. Place & later Boulder Estates, but still found that there was a missing piece. As people were living longer it became apparent that we did not have adequate or enough facilities to serve those in our community with memory issues. So, they set out to fix the problem. They didn't want it to be just another memory care though, they wanted it to be something special. Under the guidance of Executive Director Jim Knudson, a young woman working in Tenant Services at Boulder Estates named Jamie Engers Lanners took up and spearheaded the issue. Later, she became our first housing manager. She did the research and brought forward all the information. She herself had a loved one who had suffered from dementia and wanted to make a place that would feel like home, but be safe and secure for those suffering from this devastating disease. She wanted them to be able to "Live Life to the Fullest" for as long as they had.

That is how the idea of Boulder Creek was born. Now here we are 10 years later. We have had some growing pains and a few directors along the way. Each one brought something special to the table with the idea of making things better for our residents. This was evident through the addition of aroma therapy patches under Tammy Gustafson, as well as new technology, and training under Desiree Petrich. Under the current Assisted Living Director, Jan Mason we have changed over from a homecare to an Assisted Living license. Boulder Creek has also added a community dementia lending library, on-site therapy dog, and most recently bringing in the Blue Hug. It is a facility focused on establishing a stable foundation for adults with dementia through service, community, choice, and individuality. The building was specifically designed into two distinctive neighborhoods, that offered a homey atmosphere where tenants can feel free to explore and not feel confined to limited areas. Boulder Creek consists of 31 rooms- 15 in the North neighborhood, and 16 in the South Neighborhood. To reside comfortably at Boulder Creek a resident must have a dementia or related diagnosis. They must be medically stable, safe to themselves and others, and must be willing to accept assistance from the staff as needed.

Boulder Creek provides 24-hour home health care and services: in addition, all staff employed by Boulder Creek are specifically trained in Dementia related care, and keep this training up through yearly continuing education. We make sure all of our service plans are individualize and based upon the individuals wants and needs. Our Nurse Supervisor/Case Manager begins this process upon a potential residents initial screening to make sure that we as a facility are able to provide the care they need. These

assessments will continue throughout the time the resident resides at Boulder Creek. Our nurses and staff want to make sure the service plans match the residents ever changing needs. Our priority is the resident.

Boulder Creek also employs an activity staff to keep the residents active through exercising, participating in crafts, and working on daily living skills. While it appears to be all fun and games, they work hard to modify activities to the residents ever changing needs and use sensory based activities to continue to keep the connections of our residents going as long as possible. In addition to group activities, they have 1-1 activities that are purposeful and tailored to each individual resident. The activities staff has been expanded to provide activities 7 days a week and in addition has begun to take part in end-of-life cares as well.

Boulder Creek's primary focus is dementia and everything that comes with it. So, that is what we focus on, and that is what we try to do well. We offer the option of on-site therapy, labs, beauty shop, and house calls by our nurse practitioner, as well as church, entertainment, and volunteers to include our own senior companion. In addition, since we know dementia doesn't only affect the individuals suffering from the disease; we also work hard to provide education and support for the families. Boulder Creek provides a monthly family council, and family support group to give the families a voice, ask questions, learn, and also receive support from other family members who are going through the same thing. Speakers are brought in to provide education on pertinent topics so families can make informed decisions for their loved ones.

Everyone who enters through the doors as a resident, family member, or staff is part of the Boulder Creek family. That's why people whose loved ones are here know that Boulder Creek cares. Family cares about and supports each other. We cared from the start. We care now and we are committed to caring in the future...

Boulder Creek Assisted Living Memory Care where our residents can 'Live Life to the Fullest!'

Employment Opportunities:

WANTED: Home Health Aides

(CNA Licensure Preferred)

Currently hiring for: Day, Evening, and Overnight Shifts

We are seeking staff to add to our team! The right person for this position must enjoy working with the elderly and have a compassionate understanding of their care needs. Position includes every other weekend and a holiday rotation.

Looking for Full-time RN or LPN to hold charge position. 36-40 per week.

Looking for a Full or Part-time Dining Staff. *If you have any questions, please contact Margaret at 507-537-2415

To Apply: Stop in to one of our locations to pick up an application or apply online at boulder-creek.org or boulderestates.org

Boulder Creek

601 Village Drive
Marshall, MN 56258

Boulder Estates

604 Village Drive
Marshall, MN 56258

Benefits include: Competitive Wages, Paid Time Off, Rewarding Work, On the Job Training, Education Reimbursement Programs, Continuing Education, Health Insurance, Life Insurance, Short Term Disability, and more! *If you have any questions, please contact Jennifer at 507-401-3606.

Welcome to Mary 's Corner

BC's Nurse Supervisor/Case Manager

Hello Boulder Creek families!

Let's have a word about speech and language with dementia. Dementia can impact the part of the brain responsible for language. This can affect how a person conveys their thoughts and feelings; common behaviors can include mixing up words (word salad) and creating false memories without motivation (confabulation) which can lead to misunderstandings and frustrations.

A person might say something like, "Dreams spoke orange sunset," or "Spider bubbles flew blue." To us, this makes absolutely no sense at all. How does a person respond to that? You might think to yourself, 'How can I hold a conversation and have a meaningful visit when I have no idea what my loved one is trying say?' Be observant of context clues. For example, are they pointing to something and trying to tell you about it? You could say, "Oh, wow! Look at that shirt! It's purple. Purple is your favorite color." Watch nonverbals like their facial expression. Do they appear to be distressed or in pain? Giving neutral, open-ended responses is a good choice. "Oh, yeah?" or "Tell me more about..." The most important rule is this: Do not say, "Do you remember me?" or "Don't you remember when...." or (when looking at pictures): "Do you know who this is? What's his name?"

Gauging appropriate conversational timing, you can introduce a different observation to them to divert their attention and avoid getting stuck in an obsessive rut about one thing or another. Often, their train of thought might be easily 'derailed,' as their mind struggles to dig deep to find the right words. They may shrug their shoulders, seem to give up and say, '...well, whatever,' or 'I don't know.' If this happens, don't feel bad. Be there as you always have been to love and support them. A kind smile and a warm hug is a language that everyone understands.

As always, it is a joy and privilege to serve and care for your loved ones. Thank you for entrusting them to us! Please feel free to contact me with any ideas, suggestions, questions or concerns. As a reminder, typically my schedule is Monday-Thursday from 7:30 am-5:00 pm.

Mary Mitzner, RN
Nurse Supervisor/Case Manager
Boulder Creek Assisted Living
Phone: (507) 337-9536





Family Council Agenda

July 2024

No Meeting Due to Covid Concerns

Open the meeting with New Business

New Business:

1. Our current census is 15 on North, (2 men and 13 ladies), and 14 on South (all ladies with 1 pending). All admits on hold until further notice
2. Expecting Surveyors at any time....
3. We are still looking for items on our "Wishlist" for our treasure boxes.
4. Our Aug Family Council will now have Jane Nelson-Como as a guest speaker. July's speakers from the county have been rescheduled to October.
5. Our Sept Family Council will now have Deb Vizecky, Regional Ombudsman- due to a family emergency she had to reschedule.

6. Please note Jan is a notary and can notarize paperwork for you & your loved ones.

Ask for any questions, new business

Close the Meeting

July Education:

4 Main Types of Dementia: What's the Difference?



More than 55 million people around the world [live with dementia](#), with close to 10 million new cases diagnosed each year. The syndrome ranks 7th among the leading causes of death due to disease. From those that have it to loving

caregivers, the 4 main types of dementia impart heavy physical, mental, emotional, social and financial tolls.

Keep reading to find out more about these different types of dementia, ways to lower your risk of them and how to slow down their progress.

What Is Dementia?

Dementia is not a disease but a syndrome. These are a group of dementia signs and symptoms along with physical findings that often occur together and for which direct causes aren't fully known.

The 4 main types of dementia impair the way your brain functions (i.e., your cognitive or mental functions), oftentimes slowly and progressively.

Who's at Risk for Dementia?

Is dementia a normal part of aging? It isn't. But most people with the different types of dementia are older than 65 and the risk rises greatly with each decade beyond this age.

These can also up your risk or cause 1 or more of the 4 types of dementia:

- Family (e.g., parent or sibling) history
- Certain health conditions and lifestyle behaviors such as [heart disease](#), [type 2 diabetes](#), [high blood pressure](#), [high cholesterol](#) and smoking nicotine
- Reversible causes such as heavy and prolonged use of alcohol, heavy metal toxins (such as lead and mercury), removable brain tumors, [Lyme disease](#), [multiple sclerosis](#), vitamin B12, thiamin or niacin deficiency and

side effects of medicines to treat [anxiety](#), colds and [flu](#), [insomnia](#) and [depression](#)

4 Main Types of Dementia Stages and Symptoms

Mental functions tend to deteriorate over a few years to a decade or more. But this differs for each person and often depends on which type of dementia you have.

Early Dementia

Early symptoms of the 4 main types of dementia can be subtle and easily missed.

You may find it harder to:

- Complete your daily tasks
- Comprehend some aspects of language
- Find and use the right words
- Focus clearly and think abstractly
- Navigate through congested areas, even in familiar places
- Perform more complex tasks
- Reason and use good judgment
- Remember recent events

Moderate Dementia

At this point, you may find you just can't:

- Control your behavior
- Keep track of time
- Know where you are most of the time
- Learn and recall new concepts
- Name and recognize objects you once knew (called anomia)

- Perform basic self-care tasks (e.g., bathing, dressing, eating and toileting)
- Recognize certain people
- Recall large chunks of information from your past
- Understand much of what you see and hear

You get lost more often, even in your home. And some of your traits become pronounced. For instance, concerns (e.g., money) become obsessions.

You may also come across as:

- Angry
- Anxious
- Apathetic
- Indecisive
- Inflexible
- Irritable
- Passive
- Self-centered
- Withdrawn

You may struggle with [insomnia](#) and restless sleep during bedtime hours. This can cause you to feel [groggy and drowsy](#) or [excessively sleepy](#) and lead to [oversleeping](#) during wakeful hours.

Severe Dementia

Late-stage dementia symptoms involve losing almost all mental functions and muscle control. Hallucinations and delusions are also common symptoms.

Once you reach the advanced stages of the 4 main types of dementia, you likely can't:

- Control bladder or bowel functions
- Eat or drink without choking or aspirating (inhaling bits of food, liquids or mouth secretions into your lungs)
- Perform any self-care measures
- Recognize your face or that of family members or friends (called prosopagnosia)
- Recall any memories
- Talk or articulate words normally (called dysarthria)
- Use or understand language (called aphasia)
- Walk, move or get out of bed without help

What Are the 4 Main Types of Dementia?

The 4 main types of dementia include:

Alzheimer's Disease

You may wonder, "Is Alzheimer's a type of dementia?" It's the most common type of dementia, accounting for upwards of 60% to 80% of all cases.

With Alzheimer's, you slowly lose cognitive abilities. Parts of your brain degenerate. This destroys nerve cells and the ones that remain respond less to neurotransmitters.

These are chemical messengers that transmit signals between nerve cells in your brain. In particular, your acetylcholine levels drop.

Acetylcholine helps you concentrate, learn and forge memories. This type of dementia often impacts recent memory much more than other mental functions.

Your brain forms:

- Abnormal protein deposits (plaques) called beta-amyloid
- Clumps of dead nerve cells around a beta-amyloid core called senile or neuritic plaques
- Twisted and disorganized strands of protein fibers in your nerve cells called neurofibrillary tangles
- Higher levels of an abnormal protein called tau — a component of beta-amyloid and neurofibrillary tangles
- Abnormal proteins called Lewy bodies, although the other formations are more common

Vascular Dementia

This is the second most common type of dementia in older adults. It often occurs as a mixed dementia type, meaning it occurs alongside Alzheimer's disease.

Having a major [stroke](#) [or many small ones] ups your risk of vascular dementia. Strokes block the blood supply to parts of your brain, causing an infarct (death of affected brain tissue).

Health conditions and behaviors that impair blood flow can damage parts of your brain and raise your risk for stroke and this dementia type. These include smoking along with:

- [Atherosclerosis](#)
- Atrial fibrillation (quivering abnormal heart rhythm that can cause blood clots to travel from your heart to your brain)
- [Diabetes](#)
- [High blood pressure](#)
- [High cholesterol](#)

- Thrombolia (excessive blood clotting)

Vascular dementia symptoms tend to progress stepwise up and down. They suddenly get worse, and then plateau or get better to some degree. If another stroke happens, they worsen again.

Dementia With Lewy Bodies

This ranks third among the 4 main types of dementia. Lewy bodies destroy your nerve cells.

These proteins form throughout your brain's outer layer (i.e., gray matter and cerebral cortex). Your cerebral cortex controls thinking and perception and your ability to use and comprehend language.

Dementia with Lewy bodies can cause:

- Dramatic shifts in alertness and mental function
- Issues with planning, problem-solving, doing complex tasks, copying or drawing and using good judgment
- Psychotic symptoms such as [detailed and often threatening] hallucinations and [complex and bizarre] delusions
- Symptoms seen with Parkinson's disease such as stiff muscles, shuffling steps, balance issues, tremors and stooped posture
- Sleep problems such as rapid eye movement sleep behavior disorder, causing you to physically act out your dreams while sleeping
- Fainting and problems urinating, having a bowel movement or regulating body temperature (which can cause excess sweating or not enough) due to a haywire autonomic nervous system.

Frontotemporal Dementia

Around half of all frontotemporal dementias are inherited. The telltale symptoms of the 4 main types of dementia show up with this type, too. But dementia symptoms often show up before you're 65. And you can usually carry out daily tasks and stay aware of the time, date and place.

With this type of dementia, your brain cells house abnormal amounts of tau. It causes loss of nerve cells due to atrophy (shrinking) of your brain's frontal and temporal lobes.

These areas of your brain help control behavior and personality. As such, disruptive behaviors and personality shifts may ensue.

You may speak rudely to others and display compulsive behaviors such as walking to the same place every day, picking up and manipulating random objects or placing items in your mouth.

Your impulse control and inhibitions may also go by the wayside, which can amplify your interest in sex and tendency to overeat. You're also more likely to neglect your personal hygiene and have problems with aphasia, dysarthria, anomia and prosopagnosia.

How to Diagnose Dementia

To diagnose dementia, your doctor starts with a:

- Medical history
- Physical exam
- Memory and other cognitive tests to gauge your mental status

Your doctor may then order:

- Blood tests, including a check of your thyroid hormone and vitamin B12 levels
- Brain scan such as computed tomography (CT) or magnetic resonance imaging (MRI) to check for abnormalities that cause dementia
- Positron emission tomography (PET) or single-photon emission CT (SPECT) to identify which of the 4 main types of dementia you have

Can Dementia Be Prevented?

There's no surefire way to prevent it. But you can lower your risk of the 4 main types of dementia and help extend your lifespan with lifestyle strategies.

Aim to:

- Follow a wholesome eating plan, especially one that supports a healthy weight (e.g., [Mayo Clinic diet](#)) and your heart and blood vessel health (e.g., Mediterranean-DASH Intervention for Neurodegenerative Delay [MIND] diet)
- Get at least 30 minutes of brisk exercise 5 or more days a week
- Keep your blood pressure, blood sugar and cholesterol levels in check
- Quit smoking or never start
- Interact with others often and stay socially active
- Stimulate your mind (e.g., play a musical instrument, work on puzzles or play games that challenge your brain)

How Are the 4 Main Types of Dementia Treated?

There's no cure for most types of dementia, although vascular dementia can be stopped or reversed once the underlying cause or illness is treated. The care plan includes:

Measures to Keep You Safe and Oriented

Nurses or occupational and physical therapists can visit your home and recommend changes to help you stay safe, oriented and stimulated. They can also assess how well you function in certain sticky situations such as driving or making meals.

Your health care team recommends strategies to maintain:

- **Structure** to help you feel more secure and oriented. Changes to your daily routine, caregivers and surroundings must be explained beforehand using clear and simple terms.
- **Scheduled activities** that help you feel productive, independent and less anxious, depressed or [stressed](#). These often include simple activities that you once enjoyed or kept your interest prior to having dementia.
- **Proper amounts of stimulation.** Hobbies and interests can help keep you engaged with life and your mind alert. But these must be kept simple or broken down into small actions to help keep you from getting overwhelmed and more confused by too much stimulation.

Medicines to Support Mental Function

These medicines may improve mental function for a period of time. They include:

- **Cholinesterase inhibitors** (e.g., donepezil, galantamine, rivastigmine) can help with Alzheimer's and dementia with Lewy bodies. These help your nerve cells communicate better by blocking an enzyme that breaks down acetylcholine called acetylcholinesterase.
- **Memantine** to help with moderate to severe dementia and slow the loss of your mental functions. It blocks receptors in your brain that bind to a chemical [thought to damage brain cells] called glutamate.

Medicines for Disruptive Behavior

If measures to support safety and curb disruptive behavior don't help, these medicines may be considered:

- Antipsychotic drugs for advanced dementia with psychotic behavior. These medicines help with agitation and outbursts but work best for delusions, hallucinations and paranoia.
- Antiseizure drugs may also help with violent outbursts.

Medicines to Treat Other Symptoms of Dementia

Antidepressants can help with depression. And a short course of sedatives may be prescribed to help relieve anxiety.