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Greetings,

As that old saying goes "March comes in like a lion and goes out like a lamb"; it's so true for today anyway. According to the Farmer's Almanac, weather folklore often included ideas that there should be a balance in weather and life. So, if a month came in bad (roaring like a lion), it should go out good and calm (docile, like a lamb).

With March being such a changeable month, in which we can see warm spring-like temperatures or late-season snowstorms, you can understand how this saying might hold true in some instances. Life, just as in the weather, can also seem to be in constant flux. It is up to each of us to find and use the tools that can help us restore a balance necessary to juggle life's demands and navigate its uncertainties.

Carrie Linder
ADRC of the North Bayfield Office Manager

Elizabeth Lexau
UW-Extension, Family Living Educator



BenefitsCheckUp is a free service of the National Council on Aging. Many adults over 55 need help paying for prescription drugs, health care, utilities, and other basic needs.

There are over 2,000 federal, state and private benefits programs available to help. But many people don't know these programs exist or how they can apply.

BenefitsCheckUp asks a series of questions to help identify benefits that could save you money and cover the costs of everyday expenses.

After answering the questions, you will get a report created just for you that describes the programs you may get help from.

<https://www.benefitscheckup.org/>

Facts on Aging Quiz

- T F 1. The majority of old people (past 65 years) have Alzheimer's disease.
- T F 2. As people grow older, their intelligence declines significantly.
- T F 3. It is very difficult for older things to learn new things.
- T F 4. Personality changes with age.
- T F 5. Memory loss is a normal part of aging.
- T F 6. As adults grow older, reaction time increases.



Asking for Help

Everyone needs help from time to time. Sometimes a crisis occurs – an accident, major health change or the death of someone close. Sometimes it's just a tough week when lots of little things go wrong. As a caregiver, responsibilities can feel overwhelming.

It can be hard to ask for help when we need it. We are taught to take care of ourselves and may see



asking for help as a sign of weakness. In our caregiving role we may feel that no one else can do our job. We even talk ourselves into thinking we actually don't need help,

but deep down, we know we could use some assistance. When we think these things, we are in fact admitting that we need help, and accepting this is the first step to getting help.

When you decide you can use help, think about specific things you need most. It may be something tangible like a ride to the store, your lawn mowed, your house cleaned, a meal prepared or an hour or two of respite care. Other times you may need someone to talk to or a shoulder to cry on. If you can't figure out what you need, ask a friend or counselor to help you clarify needs. Then write it down.

As you review your list, think about people you know who could help. Consider neighbors, people from church or community centers as well as family and friends. Many people feel honored to be asked. There also may be people at the ADRC, or other agencies who could offer assistance.

The next step is asking. Be specific. Include what you need and when. "Could I get a ride to the grocery store sometime tomorrow?" or "Would you please rake leaves for me this weekend?" or "Would you like to have coffee with me tomorrow – I need someone to talk to." By being specific, you are more likely to get help you really need. It also makes it easier for the person helping to give a clear answer. If the answer is no, don't get discouraged. It may take a few tries. Another option is to ask a friend to assist you in recruiting help.

Sometimes when people offer to help it may catch us off guard. We can't think of anything we need at the time. To remedy this, keep a pencil and paper handy and write down things you can use help with as you think of them. Then when people ask, "How can I help?" you can simply consult your list and give them a task. This helps you remember and allows people to choose something they can do.

Adapted from an article by Jane Mahoney Older Americans Act Consultant Greater Wisconsin Agency on Aging Resources

Preparation Pays Off for Caregivers

“As I was driving across southern Minnesota I thought about the things we would need – POA papers, insurance policies and answers to questions about resuscitation. I was so relieved that mom and I had taken the time and effort to go over all of these things earlier. Dealing with the decisions and emotions of Dad’s current situation was stressful enough by itself. “

During the years I worked as a Caregiver Coordinator, I talked with caregivers about home safety, caregiver burnout, self-care and preparing for the future. Throughout that time, I also watched my father’s health decline, and watched my mother become a full time caregiver.

As I visited with my mother about various things related to caregiving I slowly realized that I too had become a caregiver. Once I accepted this role I decided it was time to start paying attention to the many things I had encouraged other caregivers to do. I had never talked to my parents about their healthcare wishes, whether they have a will or powers of attorney (POA), where they stand financially in case someone needs nursing care or what type of insurance they have. I decided to address these issues whenever visiting my parents in South Dakota.

When I was only a “daughter”, a trip to visit my parents was like a mini-vacation. Mom would have a pan of caramel rolls waiting with other favorite foods. I would kick

back on the couch, let the grandparents play with my kids and just enjoy the visit. When I added “caregiver” to my role, visits had more of a purpose than just relaxing. I began to talk with my mother about the not-so-fun topics of estate planning, advance directives and long term care. I discovered it is easier to encourage other people to do these things than to do them yourself.

Over the past year I learned a lot about my parents. I now know they have POA papers in place. I know the names and locations of their insurance policies. I know their feelings about healthcare and end-of-life issues and I helped them start inquiring about financial assistance in case there is need for long term care. Discussing these topics was not fun. There were times I thought it might be easier to wait until we really needed the information and figure it out then.



Last week I got that dreaded call — my dad was in the hospital with pneumonia and chronic heart failure. I made an emergency trip home to help my frantic mother. As I was driving across Minnesota, I thought about things we would need: POA papers, insurance policies and answers to questions about resuscitation. I was so



relieved that mom and I had taken the time and effort to go over all of these things earlier. Dealing with the decisions and emotions of Dad’s current situation was stressful enough by itself. I could not imagine the added stress of having to fumble through files searching for documents or not knowing anything about financing nursing home care.

All those unpleasant conversations and planning paid off! Regardless of how uncomfortable it was to have these conversations, I was glad I was bold enough to do so before the crisis.

My dad survived the pneumonia but was too weak to return home. We placed him in a nursing home for rehab with hopes of moving back home. Time will tell whether this will be possible. For now, he has adjusted beautifully to life in a memory care wing of a local nursing home and my mother struggles with loneliness and guilt. Ahh, the life of a caregiver.

If you need help in your caregiving role, contact The ADRG of the North: 1-866-663-3607

<http://adrc-n-wi.org/>

*Jane Mahoney,
Greater Wisconsin Agency on Aging*

Answers to Facts on Aging Quiz

1. The majority of old people (past 65 years) have Alzheimer's disease.

False. According to the 2014 Alzheimer's Disease Facts and Figure Report published by the Alzheimer's Association, one in nine people 65 and older (11%) have Alzheimer's disease. About one-third of people age 85 and older (32%) have Alzheimer's disease. Of those with Alzheimer's disease, the vast majority (82%) are age 75 or older.

2. As people grow older, their intelligence declines significantly.

False. Although there are some circumstances where the statement may hold true, current research evidence suggests that intellectual performance in health individuals holds up well into old age. The average magnitude of intellectual decline is typically small in the 60s and 70s and is probably of little significance for competent behavior. There is more average decline for most abilities observed once the 80s are reached, although even in this age range there are substantial individual differences. The good news is that research indicates this is a life stage programmed for plasticity and the development of unique capabilities and that intellectual decline can be modified by lifestyle interventions, such as physical activity, a healthy diet, mental stimulation, and social interaction.



3. It is very difficult for older adults to learn new things.

False. Although learning performance tends on average to decline with age, all age groups can learn. Research studies have shown that learning performance can be improved with instructions and practice, extra time to learn information or skills, and relevance of the learning task to interest and expertise. It is well established that those who regularly practice their learning skills maintain their learning efficiency over their life span.

4. Personality changes with age.

False. Personality remains consistent in men and women throughout life. Personality impacts roles and life satisfaction. Particular traits in youth and middle age will not only persist but may be more pronounced in later life.



5. Memory loss is a normal part of aging.

True. As one ages there may be *modest* memory loss, primarily short-term memory. Retrieval of information may slow with age. The causes of these changes are unknown, but may include stress, physical disease, medication effects, depression, and age-related brain changes. Lack of attention, fatigue, hearing loss, and misunderstanding are among factors impacting memory loss in persons of all ages. Strategies such as activity and exercise, association, visualization, environmental cueing, organization by category and connection to a place may help prompt memory.

6. As adults grow older, reaction time increases.

True. Reaction time is the interval that elapses between the onset of a stimulus and the completion of a motor response, such as hitting the brake pedal of a car when the traffic light turns yellow or red. When processing ordinary stimuli, adults do show increases in response time with increasing age.

Breytspraak, L. & Badura, L. (2015). *Facts on Aging Quiz* (revised; based on Palmore (1977; 1981)). Retrieved from <http://info.umkc.edu/aging/quiz/>.

Watch this space... The next issue of *Living Well in our Best Years* will contain more quiz questions from this series.

When **You're** the Target:

How Caregivers Can Handle Family Criticism

It's an unfortunate reality that the caregiver will always be a potential target for criticism, particularly from family members and friends who don't understand what it's like to provide care for an elderly loved one.

If you find yourself in this situation, there are a few strategies you can use to cope with any sharp remarks:

- **Don't make it personal:** Try to avoid internalizing any insults you receive, whether they come from an elderly loved one that you're taking care of, another family member, or a friend. In all likelihood, the source of their venom has nothing to do with you, but with their own individual challenges and burdens.
- **Accept that you can't make everyone happy:** It's cliché, but especially true for family caregivers: if you try to please everyone, you will end up pleasing no one. Family members and friends will not always agree with the decisions you make regarding a loved one's care. While it's a good idea to take into account the viewpoints of others, it's also important to learn how to [trust your instincts](#) and stand by your choices.
- **Understand that criticism is inevitable:** No one relishes receiving negative feedback, but unfortunately it's an inevitable consequence of assuming the caregiver role.
- **Turn your frown upside down:** You've probably heard it before, but research has consistently shown that even a fake smile may provide mood-boosting benefits, and can help you mentally and physically relax.
- **Don't be a pushover:** Criticism may be unavoidable, but that doesn't mean that you should tolerate abusive behavior. If a family member is consistently hurling hurtful remarks in your direction, calmly tell them that you refuse to be treated that way and physically remove yourself from their presence.



- **Seek support:** Receiving a harsh critique—especially when it comes from a family member or close friend—can be difficult to cope with. Many of those who find fault with your caregiving decisions probably don't fully understand the spectrum of emotion and stress that weigh on a caregiver's heart and mind. It's not their fault; they've just never been in your shoes.

One of the best ways to cope with criticism is to find an outlet where you can share your experiences and receive honest feedback from men and women who've been family caregivers before. Online support groups, such as the AgingCare.com [Caregiver Forum](#) can allow you to tap into an ever-present wellspring of encouragement, inspiration and guidance from fellow caregivers.

It may be hard, especially in the beginning, but eventually you will develop your own process for coping with criticism in a healthy, productive way.

Provided courtesy of AgingCare.com, the go-to destination for family caregivers. AgingCare.com offers resources and support to help caregivers manage stress and minimize [family conflict while caregiving](#). This article is one of a series of articles included in the eBook, *Family Caring for Family*. Download your free copy at www.AgingCare.com/ebook. (see Aging.com for more information on underlined/linked topics.)

See page 8 for information on Family Caregiver

Elderly Nutrition Program

Greater Wisconsin Agency on Aging Resources (GWAAR)

Good nutrition is critical to good health—no matter what your age. Studies show that the right diet and adequate intake are especially important for older people and that poor nutrition is the biggest threat to an older adult's independence.



Wisconsin's Elderly Nutrition Program is a step in that direction. The program offers tasty, nutritious meals to anyone aged 60 and older (in some tribes aged 55 or older). Each meal provides at least 1/3 of the daily amounts of nutrients needed to promote good health. Participants are provided with an opportunity to donate toward the cost of the meal, but no one (aged 60 or older) will be denied a meal regardless of their ability to donate.



Meal Sites (Senior Dining Locations)

Many communities offer meals in a specific location—often a senior center or other community facility—where older adults can easily gather for food, fellowship, and fun. It's not uncommon for new friendships to form during these meals—which are usually served at lunch time. Some locations offer evening meals. Card games, crafting sessions, book groups, or other activities often take place before, during, or after the meal. The goal is to offer “more than a meal.”

Home-Delivered Meals

Often referred to as Meals on Wheels, home-delivered meals are great for folks who cannot get to a meal site and who meet certain eligibility requirements and need a nutritious meal. Friendly drivers bring delicious, home-style, freshly prepared meals to your door Monday through Friday. Every delivery comes with the well-being check that Meals on Wheels has become famous for!



The nutrition program offers more than just a meal. It provides socialization, nutrition education, counselling, and is often the gateway to many other services. The program is offered by all county and tribal aging units/ADRCs in Wisconsin.

See Page 7 for more information about Bayfield County Senior Dining & Home Delivered Meals.

Bayfield County Senior Dining & Home Delivered Meals

<http://www.bayfieldcounty.org/477/Senior-Dining-Home-Delivered-Meals>

Home Delivered Meals

Home delivered meals are for people age 60 or older who are homebound due to health reasons, and physically or emotionally unable to travel for a meal with others. It is for those who are unable to obtain food and prepare nutritious meals for themselves on a daily basis. Meals are delivered by our drivers, including a number of community volunteers who are concerned with the well-being of each participant.

Senior Dining Sites

The Senior Dining Sites program provides hot, nutritious, and well-balanced meals as well as the opportunity to meet new friends and take part in recreational activities like cards, bingo, and exercise classes. Any person age 60 or older, regardless of income, and a spouse of any age can participate.

All meals must be reserved at least one day in advance, except for the Time Out Restaurant in Washburn and South Shore School in Port Wing. Senior citizens are given the opportunity and encouraged to contribute what they can afford towards the cost of each meal. This allows us to serve more seniors in our communities.

Additional Information

Menus are published every week in the County Journal and the Ashland Daily Press. Menus are also displayed on bulletin boards at all senior dining sites.

The suggested contribution is \$2.50 per meal. The suggested donation for meals served at Iron River and Benoit is \$4 per meal. Contributions are voluntary and confidential. No one is denied service because of inability to contribute to the cost of meals.

Senior Dining Areas	Address	Phone	Meal Time
Barnes Town Hall	3360 County Hwy N. - Barnes	715-795-2495	12:00 p.m., Monday - Thursday
Benoit Community Center	County Trunk F - Benoit	715-373-6144, ext. 118	4:45 p.m., third Wednesday of the month
Iron River Community Center	8275 E. Mill St. - Iron River	715-373-6144, ext. 118	11:30 a.m., second Thursday of the month
Port Wing - South Shore School	9135 School Road - Port Wing	715-774-3500	11:45 a.m., every Tuesday (No meals served June, July or Aug)
Red Cliff Senior Center	37655 New Housing Rd - Red Cliff	715-779-3746	Noon, Monday through Friday
Time Out Restaurant	4 W. Bayfield St. - Washburn	715-373-5333	11:30 a.m., Monday, Tuesday, Thursday, and Friday



ROUND-THE-CLOCK ALZHEIMER'S DISEASE INFORMATION & SUPPORT 24/7 Helpline

Our free **24/7 Helpline** allows people with Alzheimer's disease or dementia, caregivers, families and the public to:

- ◆ Speak confidentially with master's-level care consultants for decision-making support crisis assistance and education on issues families face every day.
- ◆ Learn about the signs of Alzheimer's disease and other dementias.
- ◆ Find out about local programs and services.
- ◆ Get general information about medications and other treatment options, and legal, financial and care decisions.
- ◆ Receive help in their preferred language through our bilingual staff or translation service, which accommodates more than 200 languages.
- ◆ **24/7 Helpline 1.800.272.3900** Access support through our TTY service (TTY: 866.403.3073) if assistance is required via a teletype device.

The Alzheimer's Association 24/7 Helpline is supported in part by a grant number 90AC2811 from the US Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201.

www.alz.org/gwwi

Alzheimer's Association Offers Telephone Support Group Phone Support Group available the last Tuesday of every month

Wausau, WI – March 3, 2017 - The Alzheimer's Association is pleased to announce that an Alzheimer's Caregiver Support Group will now be available by phone each month. A telephone support group is a way for people in rural communities to connect with other families, answer questions and provide support to each other.

This telephone phone support group will begin on **Tuesday, March 28, 10:00 am – 11:00 am**. It will be held the last Tuesday of every month at 10:00 a.m.

Sharlene Bellefeuille, Outreach Specialist for the Alzheimer's Association, is the group's facilitator. Persons participating in this phone support group will receive the monthly phone number a few days prior to the scheduled telephone support group meeting. It is open to local area families and caregivers, including those in the Chequamegon Bay area.

There is no charge to participate. **Pre-registration is required** in order to get the call-in information. Persons interested should reach out to the Alzheimer's Association at [1.800.272.3900](tel:1.800.272.3900).

Support groups create a safe, confidential, supportive environment or community and a chance for participants to develop informal mutual support and social relationships. They also educate and inform participants about dementia and help participants develop methods and skills to solve problems. The groups encourage caregivers to maintain their own personal, physical and emotional health so that they can provide the best care for the persons with dementia.

For more information, please contact the Alzheimer's Association at [1.800.272.3900](tel:1.800.272.3900).



Medicare 101



Beginning January 2017, the Bayfield County Elder Benefits Specialist, Sheila Mack, will be providing “Medicare 101” presentations once per month, through September, throughout Bayfield County. These presentations will introduce you to the basics of Medicare and give you information you need before making any decisions about whether or not you want to enroll in all parts of Medicare at age 65, some parts of Medicare, or none of them, along with possible consequences of not enrolling when you are first eligible. You will also learn about the three types of insurance that supplement Medicare and the need for creditable prescription drug coverage either through Medicare Part D or Wisconsin SeniorCare. (Medicare only pays 80% of hospital and medical costs.)

If you will be turning 65 this year, attending one of these trainings is strongly encouraged. In order to provide prompt and efficient service to as many clients as possible, individuals requesting assistance in signing up for Medicare will be asked to attend this training prior to scheduling an individual appointment. This training will give you enough information to understand your options and be ready to make decisions when it is time to do so.

Below is a list of the dates and towns/cities that *Medicare 101* will be offered. All presentations will start at 3:00 and last up to 2 hours, depending upon the information reviewed and questions asked by those attending the presentation. If you plan to attend, you must register by the day before the presentation is held, by calling Karen Bodin at 715-373-6144, ext. 115. Registration is necessary to prepare enough materials for everyone who attends.



MEDICARE 101

3:00 pm—5:00 pm

The classes are free, but pre-registration is required!

Call Karen Bodin at 715-373-6144 ext 115

March 14

Cable Community Center

April 11

Benoit Community Center

May 9

Cornucopia – Immanuel
Lutheran Church

June 13

Barnes – Town Hall

July 11

Washburn Public Library

August 8

Iron River Community
Center

September 12

Drummond Public Library

Relationships Matter!

Staying Socially Active May Help Maintain Mental Fitness

Research links larger social networks to higher cognitive functioning in older adults

Washington, DC — Staying socially engaged with a wide circle of friends and family may help maintain our thinking skills and slow cognitive decline as we age, according to a report out today by the [Global Council on Brain Health](#) (GCBH).

“It’s not uncommon for our social networks to shrink in size as we get older,” said Marilyn Albert, Ph.D., GCBH Chair, Professor of Neurology and Director of the Division of Cognitive Neuroscience at Johns Hopkins University in Baltimore, Maryland. “This report provides many helpful suggestions about the things we can do to improve the *quality* of our relationships with family and friends, which may be beneficial in maintaining our mental abilities.”

The Brain and Social Connectedness report addresses the social benefits of having pets, the role that age-friendly communities play in fostering social ties, and how close relationships promote both physical health and psychological well-being. The report also covers how social media like Facebook and Skype helps older adults maintain their social connections.



Separately, a new [AARP consumer survey](#) finds nearly 4 in 10 adults age 40-plus say they lack social connections and report worse brain health.

Tips for Improving Social Engagement

A few tips for older adults to help improve their social involvement:

- Cultivate social connections with people of different ages, including younger people.
- Join a club or take a class to meet new people.
- Visit, call, or email regularly with relatives, friends, and neighbors.
- Volunteer, or visit a lonely neighbor or friend.

“We know that loneliness and social isolation can increase physical health risks for older people,” said Sarah Lock, AARP Senior Vice President for Policy, and GCBH Execu-



tive Director. “The GCBH’s consensus that people who are socially engaged have a lower risk for cognitive decline shows us just how important social connections are to brain health.”

About GCBH

The GCBH, founded in 2015, is an independent international group of scientists, health professionals, scholars and policy experts working on brain health issues. Convened by AARP with support from [Age UK](#), the goal of the GCBH is to review the current scientific evidence and provide recommendations for people so that they can maintain and improve their brain health.

The full GCBH recommendations can be found here: www.globalcouncilonbrainhealth.org

Source: AARP



What do all the terms mean?

In our day-to-day lives we are exposed to numerous terms, abbreviations & acronyms - not to mention an entirely new "language" if you text. It's often challenging to understand all the terms that are thrown at us daily. Professionals use a variety of terms and sometimes forget that not everyone knows the meaning. The following list is a sampling of some of the most frequently used terms and acronyms related to caregiving. We include this glossary frequently.

ADRC (Aging and Disability Resource Center) According to the Wisconsin Department of Health Services, "ADRCs are the first place to go to get accurate, unbiased information on all aspects of life related to aging or living with a disability. ADRCs are friendly, welcoming places where anyone -- individuals, concerned families, friends, or professionals working with issues related to aging or disabilities -- can go for information specifically tailored to their situation. The ADRC provides information on a broad range of programs and services, helps people understand the various long term care options available to them, helps people apply for programs and benefits, and serves as the access point for publicly-funded long term care."

ADLs (Activities of Daily Living) These all the necessary activities required to function on a daily basis. They include activities such as dressing, bathing, eating, cooking meals, managing finances and completing housework.

Adult Day Care An Adult Day Care facility provides services during business hours Monday through Friday in a group setting. A variety of activities are provided for socialization and physical and mental stimulation. Utilizing an Adult Day Care is a great way for caregivers to take time for themselves and have peace of mind that their loved one is safe, engaged and cared for.

Advance Directives An advance directive is a legal document that allows you to communicate your health care wishes. The advance directives used in Wisconsin are the Power of Attorney for Health Care and the Living Will. Both are excellent documents to complete. They allow you to "speak for yourself" and allow your wishes to be known in the event you are no longer able to.

CBRF (Community Based Residential Facility) CBRFs are staffed group living settings that provide room, board, supervision and other supportive services to five or more adult residents. They are intended for people who cannot live alone but do not require a nursing home level of care.

MOW (Home Delivered Meals or Meals on Wheels) This service delivers hot, nutritious meals to people who are homebound. A great way to get the nutrients both you and your loved one needs without having to take the time to prepare the meals. Many people are surprised by how good these meals really are!

Respite or Respite Care Respite care provides a temporary break from the responsibilities of caregiving. Respite care is provided in-home, at Adult Day Care centers or in a care facility (such as a CBRF). It benefits both the caregiver and their loved one. By taking some time for themselves, caregivers are able to recharge.

SNF (pronounced "sniff" - Skilled Nursing Facility) Also known as nursing homes or long term care facilities, these facilities provide medical care to persons who reside in them. Most provide both short term (rehabilitative) and long term care and are staffed with Registered Nurses, Certified Nursing Assistants, Physical, Occupational and Speech Therapies.

Supportive Home Care. Supportive home care provides in-home non-medical care. Services include (but are not limited to) housekeeping, meal preparation, companionship and assistance with personal cares. Utilizing supportive home is a great way for caregivers to run errands and keep their own medical appointments.

So many programs, services and resources are available to assist on older adults and caregivers. If you would like to meet with someone to discuss services and options that can assist you, please call the Aging and Disability Resource Center of the North at **1-866-663-3607**

We'd love to hear from you!



Hours of operation:
8:00-4:00 Monday through Friday
Phone Number: **1-866-663-3607**

Visit the ADRC office:
117 E 5th Street ~ Washburn, WI 54891
Appointments are not necessary, but are helpful.

Website: www.adrc-n-wi.org
Email: ADRC@bayfieldcounty.org

Bayfield County Extension Office
U.S. Department of Agriculture
Cooperative Extension Service
Courthouse, P.O. Box 218
Washburn, WI 54891

NONPROFIT
U.S. POSTAGE
PAID
PERMIT NO. 28
WASHBURN, WI



Change Service Requested



Hours of operation:

8:00-4:00 Monday through Friday

Phone Number:

1-866-663-3607

Visit the ADRC office:

117 E 5th Street

Washburn, WI 54891

Appointments are not necessary, but are helpful.

Website: www.adrc-n-wi.org



Bayfield County – UW Extension

County Administration Bldg

117 E. 5th Street

Washburn, WI 54891

Phone: 715-373-6104

Fax: 715-373-6304

Office hours 8 AM – 4 PM.: Monday – Friday

Website: <http://bayfield.uwex.edu/>

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