



Improving With Age The Benjamin Rose Institute 2000 Annual Report

Dear Friends,

To improve the quality of life for older people, their families and their caregivers through community-based and residential care, research, education and advocacy.

— *Mission of The Benjamin Rose Institute*

Health care today presents significant challenges to those of us who govern and carry out the missions of our organizations. At Benjamin Rose, we work with the realities of increasingly complex and difficult issues. The challenges of 2000 required trustees and staff to work together to develop creative solutions and to plan strategically for the future to meet the needs of those we have promised to serve.

Individuals are living longer, some enjoying good health while others are experiencing diminished health. The need for chronic and long-term care in the community and in residential settings is growing. Like many health care organizations, we face nursing shortages, declining reimbursements from state and federal sources and increased regulations.

One way trustees and staff addressed this changing face of health care in 2000 was to expand

our vision for Margaret Wagner House. Our former nursing home is finding a new life as it offers a continuum of care, complete with social and health services and housing. We have renovated the 1st floor, which allows more people to be served by Concordia Care's Day Health Center, a social and health program for 135 participants with complicated medical problems. Through the Concordia Care partnership with The MetroHealth System, Benjamin Rose is able to expand its community-based services.

Late in the year, Benjamin Rose received a HUD grant for renovating the 4th and 5th floors of Margaret Wagner House. This funding will allow us to create affordable housing in the form of 24 apartments. In addition to the HUD grant, we have raised 75% of our capital campaign goal for renovations needed to complete the project.

The nursing home, Kethley House at Benjamin Rose Place, maintained a 96% occupancy rate. However, an average of 76% of the beds were reimbursed by Medicaid, which does not cover the full cost of care. Because of our nursing shortage, the need for contracted services further complicated the financial picture. We are fortunate to have committed staff willing to work overtime to ensure the quality of care for the residents. Throughout the agency, our mission-oriented staff is a cornerstone of Benjamin Rose.

Benjamin Rose continues to seek out partners and alliances when appropriate to maximize its own resources. This ensures that our agency is working to meet the ever-increasing needs of an aging society.

We thank our trustees, donors and staff for another successful year of providing for Cleveland's oldest citizens.



Jennifer B. Langston

Jennifer B. Langston
Chairman, Board of Directors



Alice J. Kethley

Alice J. Kethley, Ph.D.
President/CEO

1900

1902

1903

Origins

The Benjamin Rose Institute came to life upon the death of its benefactor, Mr. Benjamin Rose, in 1908. Mr. Rose had been a leader in industry and civic affairs at the start of the 20th century. In 1900, he opened The Rose Building, now occupied by Medical Mutual of Ohio. With 10 floors, it was the largest building in Ohio. The electric lights, hot and cold water, and quick-service elevators typified the same innovation Mr. Rose used in his meat-packing business. In May 2000, Medical Mutual celebrated the 100th anniversary of the timeless structure, including a rededication by Mayor Michael R. White. Today, the office building retains its grandeur. Though Mr. Rose was criticized for constructing his building at East Ninth and Prospect, the location is at the heart of today's commercial district.



Cornerstone principle:

Benjamin Rose wished for his agency to be enacted upon his death, so that he could leave a solid legacy that would grow. In the years preceding his death, he appointed a group of 15 women who would govern the organization, making his vision a reality.

What do the years mean?

The timeline that runs along the bottom of this report signifies key accomplishments of The Benjamin Rose Institute. See page 17 for an explanation of how the highlighted years show Benjamin Rose has improved with age.

1904

1906

1908

In-Home and Community-Based Care



Building upon the concept of keeping people in their own homes, **Benjamin Rose's Community Services Division expanded its outreach efforts in 2000.** Every Thursday, nurse Phyllis Lahr or one of her colleagues makes health education visits to a west side residence.

Cogswell Hall is home to nearly 30 women, who appreciate Mrs. Lahr's informative visits. Mrs. Lahr spends time talking to each of the building's residents. "I check their blood pressure, and encourage them to ask me about any changes in how they feel," explains Mrs. Lahr. Annette Little, resident director during 2000, says,

"We really enjoy her visits. It puts a different twist on Thursdays." The visits began in July. Cogswell Hall consultant Patricia Nash helped implement a recommendation in Cogswell Hall's strategic plan for a wellness program. The suggestion was made to the Cogswell Hall Board of Trustees that they contract for preventative health services with Benjamin Rose. The educational visits proved so helpful, Mrs. Lahr's visits increased from two hours to three. These people were served in addition to the unduplicated 1,958 clients served by the Community Services Division in 2000.

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In a move that recognizes spirituality as an integral part of a person's everyday being, Community Services Division staff formed a Spirituality Committee. The creation of the committee heralds a recent development in professional caregiving by understanding that every human's life is sacred and meaningful. By

acknowledging each person's physical, emotional and spiritual aspects, service providers can give more comprehensive help to the client. **The committee held its first memorial service in 2000. Clients, staff, their family members and the significant others of Community Services staff were remembered with music, dance and moments of silence.** Families of deceased clients attended, and were given a flower to put in a vase when their loved one's name was called. Case managers thoughtfully placed flowers in the vase for those clients who had no family, or whose families were unable to attend. The memorial service is perhaps the newest approach to the personalized, respectful care Mr. Benjamin Rose wished for clients of his agency. The committee has also developed a Sympathy Card that staff can send to family members of clients and friends associated with Benjamin Rose. Furthermore, the committee continues to invite input

and discussion from other staff through in-services and postings on educational bulletin boards in the agency. "Staff have expressed a great deal of interest and enthusiasm in the efforts of the committee because it helps remember the meaningful nature of our work with clients," explains committee leader and mental health program specialist Ken Eckstein.



2000



Cornerstone principle:

In his will, Benjamin Rose stated his organization would enable older people to maintain their dignity by remaining in their own homes. Services provided outside the home, such as adult day care, can allow them to remain in their homes longer.

The Benjamin Rose Adult Day Program began holding participant council meetings in 2000. The nearly 75 Adult Day Program participants are older adults with Alzheimer's disease or related disorders, developmental disabilities, or chronic mental illness. "Although people may have memory loss, they are still the same person they spent their entire life becoming," says the Program's activities leader, Chrystene Morris. "Rather than sticking to an agenda, we first take time to build trust and get friendly." Ms. Morris finds that the clients will express their needs, concerns, and offer possible solutions. The council meets once a month to review the previous month's activities and plan upcoming special events. One such activity was the council's decision to plant "Living" Easter baskets (photo) to raise money for their Annual Family Summer Picnic.

In-Home and Community-Based Care: History and Future

Prior to the Social Security Act of 1935, many people outlived their finances. Dejected, they would have to move in with a relative or live in a publicly funded "poorhouse." Having been approached for assistance by a once-prosperous friend, Mr. Benjamin Rose set up the agency that bears his name. Originally, Benjamin Rose trustees visited applicants and decided who would receive the stipends to remain in their own homes. It wasn't until the 1930s that the agency's first executive director, Margaret Wagner, implemented social work and medical services. As the need for more people to remain in their homes increased with an aging population, Benjamin Rose expanded its care programs. They are offered with the same, reassuring touch of the early trustees. Today, services offered through the Community Services Division include: home health care, housekeeping, Senior Companion visits, mental health services, adult day services, social services, respite and information and referral to other helpful organizations. As the age 65-and-over population is projected to reach 70 million by 2030, in-home and community-based care will become commonplace.

1925

1930

1935

Residential and Rehabilitative Care



The underlying theme of hospice care is to make a person's last days of life as comfortable and special to them as possible. Yet, because it is an emotionally difficult time, families of dying patients often turn to staff at the hospice unit at Kethley House at Benjamin Rose Place for support. **Employees from maintenance to nursing to dietary staff attended a 10-week education series specially designed by Hospice of the Western Reserve (HWR).** The presentations from HWR staff helped educate Kethley House employees on how to deal with difficult decisions they encounter while trying to make

sure each patient's last days are meaningful. One presentation, "The Philosophy of Hospice," helped dispel the myth that hospice is for cancer patients only, while highlighting the fact that hospice care follows family members after their loved one has died.

"Understanding Messages and Needs of the Dying" and "Beginning Discussions on End of Life Care" were among the other topics. "It was exciting to watch the staff grow in their knowledge about hospice," says Kethley House education director Carol Hrusovsky. Kethley House has agreements with other hospice programs, including those of The Cleveland Clinic Foundation, Montefiore Home and the Visiting Nurse Association.

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Old and young, tall and short, tired and energetic. Appreciating differences and bringing unity across the life span is one objective of The Intergenerational School.

Every other Wednesday, six children ages five to seven march over to Kethley House at Benjamin Rose Place for intergenerational programming. The Intergenerational School, located at the Fairhill Center, is just a couple hundred yards from Kethley House. A free Cleveland community school, its goal is to build bridges between children and adults through stimulating exercises. The adults who partake in these activities have been diagnosed with early stages Alzheimer's disease. When the youth arrive, each one is paired up with a resident. Music therapist Debra Caspary gives each duo a chance to take part in a song together. After music, the children and adults discuss their differences. The children help transport the residents to lunch. "It really helps the children gain an understanding of older people, and the adults enjoy the positive energy the kids bring," says Kethley House executive administrator Jerome Weissfeld.

Catherine Whitehouse, principal of The Intergenerational School, agrees. "We hope to expand on these activities next year and build from this successful pilot program."



2000



Cornerstone principle:

In addition to committing to help older adults to remain at home, Benjamin Rose also stipulated homes could be established for them. The agency opened its first residential facility in 1941.

Today, nearly 12.8 million Americans need long-term care. There are more than 1,000 long-term care facilities throughout the state of Ohio alone. These facilities reflect the changing population of nursing home residents. Benjamin Rose's nursing home, Kethley House at Benjamin Rose Place, is one of those facilities. Twenty-five percent of Kethley House's residents are over age 90. Many of these residents require more medically intense care. As a result, Kethley House's intermediate nursing unit was designated a medium skilled nursing unit in 2000. Kethley House was designed to allow future residents, such as those in the medium skilled unit, to age in place. Opened in 1997, Kethley House at Benjamin Rose Place in 2000 was home to 175 long-term residents and received 605 new admissions, many of which were for subacute or hospice care.

Residential and Rehabilitative Care: History and Future

Early nursing homes in America were often poorhouses. Older people who could not afford to live in their own homes would be housed with sick, poor or mentally ill people. Eventually, churches, charities and fraternal organizations began building long-term care homes for older people unable to stay at home. The stigma of living in such homes lessened as the life span of the average American increased. As the use of in-home care increased with programs like those offered by Benjamin Rose's Community Services Division, more people chose to stay at home. This trend is encouraged by the availability of short-term subacute care in nursing facilities like Kethley House. People recovering from surgery and strokes can return home after rehabilitative care. Now, older people often do not enter nursing homes permanently until they have major medical needs. In turn, nursing home care is costly to both the government and consumer. As a result, more day health programs, such as Concordia Care which is co-sponsored by Benjamin Rose and The MetroHealth System, are available to at-risk elders and focus on preventative medical care and social activities.

1953

1956

1959

Applied Research



The year 2000 saw the completion of a research project designed to relieve stressed family caregivers. The Caregiver Options Program and Evaluation (COPE) was designed to examine whether family caregivers—most often spouses or daughters—given time off from taking care of an older relative, are less likely to develop health problems. Taking care of a loved one with physical limitations or cognitive impairment such as Alzheimer’s disease can become more demanding as the older person’s condition worsens. COPE participants included 127 families

who received help from Benjamin Rose’s Community Services Division or the Cleveland Area Alzheimer’s Association. With funding from nine Cleveland-area foundations, each participating family received up to \$1,200 in stipends to cover the cost of care while the caregiver took time off. Principal investigator Dr. Carol Whitlatch notes, “other communities and organizations could learn ways to relieve family caregivers from stress from the COPE model.” An unexpected benefit of COPE was the expansion of respite services offered by collaborating organizations, such as the Jewish Family Services Association. Explained one 58-year-old caregiving daughter, “COPE has been a blessing. I didn’t know how we could get the chores done without it.”

...

In the past decade, managed care has become a controversial topic. In a first-of-its kind study, the Margaret Blenkner Research Center in 2000 investigated whether coupling

managed health care with support and information services could make life easier for families caring for a relative with Alzheimer’s disease or other type of dementia. Results of “Cleveland Alzheimer’s Managed Care Demonstration” indicate that support and information services can reduce the strain of family caregiving, increase satisfaction with the managed care plan, and reduce the likelihood of the Alzheimer’s patient having to go to the emergency room for care. The study involved over 200 families in northeastern Ohio who are members of the Kaiser Permanente managed care system. Research Center staff collaborated with Kaiser and the Cleveland Area Alzheimer’s Association to develop an innovative service model that would ensure patients and family members easy access to support and information services. Families given access to this service model were compared to families who received usual services.

“These results mean that the service model can be used and tested by other health plans and Alzheimer’s Association chapters across the country,” explains principal investigator Dr. David Bass.



2000



Cornerstone principle:

Creating the state-of-the art Margaret Wagner House nursing home required much research. The board felt they needed readily available solid information on which to base major decisions. They voted to establish an in-house research center. Both the Margaret Blenkner Research Center and Margaret Wagner House opened in 1961.

Nurse assistants, who provide over 90% of the direct care for nursing home residents, have a distressingly low retention rate. The Margaret Blenkner Research Center sought to stem staff turnover through a three-year study that concluded in 2000.

“Improving Work Settings and Job Outcomes for Nurse Assistants in Skilled Care Facilities” consisted of three components: 1) interviewing nurse assistants to monitor job satisfaction; 2) using those findings to develop (with the Cleveland Area Alzheimer’s Association) a career ladder for nurse assistants who care for residents with dementia in six area facilities; and, 3) holding focus groups with nurse supervisors and nurse assistants at five local nursing facilities. “The study reflects our long-standing commitment to improve the quality of resident care as well as working conditions for our employees,” says principal investigator Dr. Linda Noelker, who worked with Dr. Farida Ejaz on the study.

Applied Gerontological Research: History and Future

Major changes in American lifestyles were brought about by the Social Security Act of 1935 and World War II. After the war, the Gerontological Society of America was established as a professional organization to promote scientific research on the aging process as it was recognized that the population of older Americans was growing. The aging of the population also led to the formation of Benjamin Rose’s Research Center. The Center’s first director, Dr. Margaret Blenkner, conducted pioneering research on the use of home care for older persons with chronic conditions after hospital discharge. Nationally, the Margaret Blenkner Research Center is highly regarded for its innovative applied aging research. Hands-on studies such as those described here will continue to play a pivotal role in defining future services for the ever-changing population of older adults.

1969

1970

1971

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1993

1994

1995

Timeline

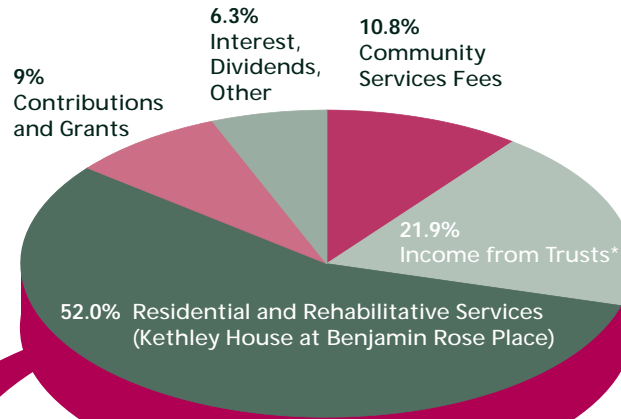
- 1900** Prominent industrialist Benjamin Rose opens his state-of-the-art office building at E. 9th St. and Prospect Ave.
- 1908** Mr. Rose dies. His will stipulates the agency bearing his name is to be enacted upon his death.
- 1909** The first Board meeting is held, and the first clients, personally visited by the trustees, receive monthly stipends of \$17.34.
- 1930** Margaret Wagner is named the agency's first Executive Director. One of her first actions was to add social work and medical services to the Institute's responsibilities and organize a medical advisory committee.
- 1941** Benjamin Rose sponsors the formation of the "Kaffee Klatsche," a forerunner of the Golden Age Centers. The Kaffee Klatsche offers a social outlet for older people.
- 1951** Benjamin Rose collaborates with the A.M. McGregor Home, another social service agency, to provide in-home casework for 20 McGregor clients.
- 1953** The Benjamin Rose Hospital opens. It is perhaps the only hospital in the nation devoted to rehabilitation for older people. It is connected to University Hospitals via a tunnel.
- 1959** Margaret Wagner retires. Mary Hemmy, a social work professor from the University of Pittsburgh, replaces her. Margaret Wagner remains a consultant in the construction of the Institute's first nursing home.
- 1961** Margaret Wagner House opens. It replaces the three residential homes and is called "the most modern nursing home" by *The Plain Dealer*.
The Board of Trustees establishes a research center later called the Margaret Blenkner Research Center to measure needs of older people and their families and to evaluate the impact of services.
- 1969** A research study demonstrates the benefits of home health aide service following hospitalization. Benjamin Rose establishes a Home Aide Department.
A research study headed up by research center director Margaret Blenkner demonstrates the need for protective services for older people.
- 1971** The Benjamin Rose Library opens. It is one of the few in the nation devoted to geriatrics and gerontology that is affiliated with a health and social service agency.
- 1972** The first newsletter, the *Bulletin*, is published to keep staff and friends of the agency up to date on the expanding organization.
- 1977** Coordinated service projects are established in the community. The goal is to provide health and social services through a team approach to older residents in their homes.
- 1978** Dr. Hemmy retires as Executive Director. She is replaced by Dr. Barbara Silverstone, who co-authored a nationally acclaimed book, *You and Your Aging Parent*.
- 1979** Benjamin Rose takes over sponsorship of the Retired Senior Volunteer Program (RSVP). The program had been under the auspices of the City of Cleveland since 1972.
- 1979-1982** Community Services Division establishes neighborhood offices on the near west side, at Eliza Bryant Center, in East Cleveland, and at Shaker Square.
- 1980** The Research Center receives two major grants from the Administration on Aging and National Institute of Mental Health to investigate stress and well-being among family caregivers.
- 1981** Benjamin Rose starts its Senior Companion Program, one of the largest in the U.S.
- 1982** Benjamin Rose receives Medicare/Medicaid certification for home health care services, allowing a greater number of limited income clients to be served.
Margaret Wagner House receives its first Robert Wood Johnson grant to become a teaching nursing home. The grant allows nurse assistants and nurses to acquire hands-on training.
- 1983** The Short Term Rehabilitation Program is established at Margaret Wagner House, offering physical and occupational therapy for people recovering from stroke, hip replacement, etc.
- 1984** Margaret Wagner dies in the home bearing her name. Dr. Silverstone resigns as Executive Director.
The Information Systems and Services Department is established under the auspices of the Margaret Blenkner Research Center.
- 1985** Dr. Alice J. Kethley, a renowned expert in aging, becomes the Institute's fourth Executive Director.
Benjamin Rose sells The Rose Building to Medical Mutual of Ohio after 77 years of occupancy. The agency moves its administration to The Hanna Building.
- 1986** Benjamin Rose teams up with University Hospitals to form Fairhill Center. It later becomes a thriving campus of agencies for older people.
Benjamin Rose begins providing day care services at Margaret Wagner House. Services are provided for Alzheimer's patients as a research project funded by the Ohio Department of Aging and The Cleveland Foundation.
- 1990** The Research Center completes its first of three major studies on improving working conditions for nurse assistants. The study reveals evidence of the importance of mutual respect between residents and staff.
- 1993** Cuyahoga County Community Mental Health Board awards funding to Benjamin Rose to accommodate clients of the closing Chronic Illness Center.
Dr. Kethley and Board President Juanita Storey sign the deed to purchase 22 acres of land on Cleveland's east side. The land is later named Benjamin Rose Place.
- 1994** Benjamin Rose embarks on Project BRIDGE (Benjamin Rose Institute Developing Gerontological Environments). The objective is to plan and develop the land currently called Benjamin Rose Place.
- 1996** Benjamin Rose forms a Cleveland PACE (Program for All-Inclusive Care for the Elderly) site, Concordia Care. Alice Kethley leads the formation of HealthRays Alliance, a group of long-term care providers, offering joint planning, group purchasing to members and setting high care standards for residential services.
- 1997** Kethley House at Benjamin Rose Place opens; residents transfer there from Margaret Wagner House. Its state-of-the-art design is able to handle older populations of the future.
- 1998** Benjamin Rose celebrates its 90th anniversary with a research conference/public event. The event features Dr. Robert Kahn and actor Edward Asner. Information from Dr. Kahn's book is used to develop the agency's MythBusters public education campaign.
- 1999** The Adult Day Program moves from Fairhill Center to Shaker Heights.
- 2000** Renovation is completed on the first floor of Margaret Wagner House. The changes will enable Concordia Care to serve more frail people with limited incomes at its day health center.

1996

1997

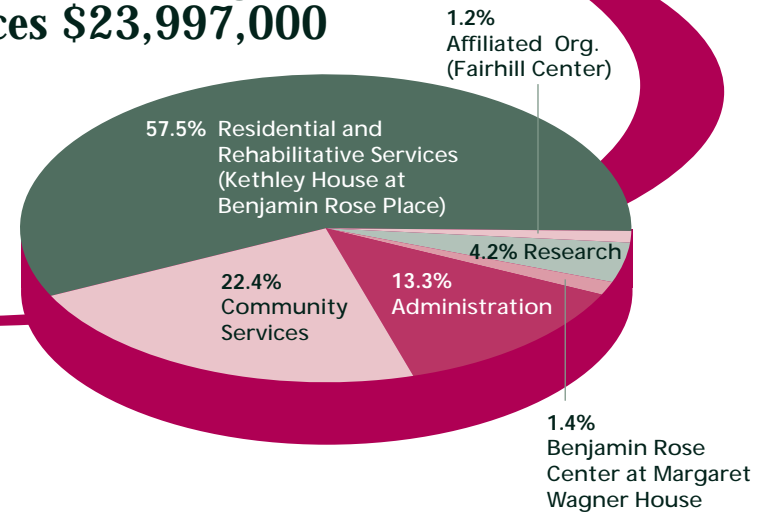
1998

Sources of Program Support \$22,960,000



*Gain on sale of investments and Capital Campaign funding not included

Cost of Program Services \$23,997,000



In 2000, The Benjamin Rose Institute provided approximately \$1.4 million in charity care to nursing home residents and in-home clients who could not afford the cost of care. Benjamin Rose is dependent on gifts for the difference

between the cost of services and the sources of support. Financial statement audits by Ernst & Young, LLP are located at the Institute's Finance Office.

1999

2000

2001

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- Past Board Chair, American Society on Aging
- Adjunct Associate Professor, Frances Payne Bolton School of Nursing, Case Western Reserve University
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KETHLEY HOUSE AT BENJAMIN ROSE PLACE

11900 Fairhill Road, Cleveland, Ohio 44120-1053
216/795-5450

Jerome M. Weissfeld, MS, CHE, LNHA, Executive Administrator, Kethley House at Benjamin Rose Place

- Diplomate, American College of Health Care Executives
- Member, Board of Trustees, AIDS Task Force of Greater Cleveland

Mary S. Grant, MHSA, LNHA, Assistant Administrator,
Fax: 216/795-1178

Rosemary Mirrotto, MSSA, LISW, Director of Social Work,
Fax: 216/795-1178

Carmencita B. Lang, Director of Dietary Services,
Fax: 216/795-1178

Richard A. Fertal, A.A., Director of Support Services,
Fax: 216/795-1145

Therese Kramer-Dietzel, MA, ADC, ATR, BC, Director of Program Services, Fax: 216/795-1178

Charles Molta, MD, MACP, Medical Director,
Fax: 216/795-1145

Cheryl Booker, RN, BSN, CNA, Director of Nursing,
Fax: 216/795-1145

Marcia Kehl, RN, MSN, Assistant Director of Nursing,
Fax: 216/795-1145

Laurie Thomas, LPT, Director of Rehabilitative Therapies,
Fax: 216/795-3359

Total Kethley House Staff: 281

(Total Full-Time Equivalent Staff: 209)

COMMUNITY SERVICES DIVISION

Benjamin Rose Center at Margaret Wagner House
2373 Euclid Heights Boulevard

Cleveland Heights, Ohio 44106-2797

Phone: 216/791-8000 Main Fax: 216/791-8030

Georgia J. Anetzberger, PhD, ACSW, LISW, Vice President for Community Services

- Adjunct Assistant Professor, Case Western Reserve University
- Fellow, Gerontological Society of America
- Consulting Editor, *Journal of Elder Abuse and Neglect*
- Board Member, National Committee for the Prevention of Elder Abuse
- Board Member, Retired Senior Volunteer Program

Mary Ann Caston, MPH, RN, Director of Central Operations

Doris Matthey, MSW, LISW, Director of Mental Health Services

Sylvia Pla-Raith, MA, Administrator, Senior Companion Program

Kamla Nagpaul, MSSA, ACSW, LISW, Director of Social Work

Semanthie Brooks, MSW, ACSW, LISW, Director of Clinical Operations

Eileen Wallenhorst, RNC, Director of Health Services

Intake Services

Joann Nagy, RN, Administrator

Sylvia Galizio, BA, LSW, Intake Specialist

At Your Call - BRI

Mary Lou Bender, RN, Administrator

Adult Day Program

Fax: 216/535-2215

16500 Chagrin Boulevard

Shaker Heights, Ohio 44120 216/535-2211

Linda Elliott, MA, A.T.R., Administrator

Total CSD Staff: 104 full-time; 2 part-time; 48 flexible

MARGARET BLENKNER RESEARCH CENTER

(same address and phone number as Central Office)

Fax: 216/621-3505

David M. Bass, PhD, Director for Research

- Senior Fellow, Institute for Life-Span Development and Gerontology, The University of Akron
- Fellow, Gerontological Society of America
- Adjunct Professor, Department of Sociology, The University of Akron
- Research Committee, American Society on Aging
- Sidney Katz, MD, MA**, Distinguished Scholar
- Professor Emeritus of Geriatric Medicine, Columbia University, College of Physicians and Surgeons
- Co-director, Stroud Center on Scientific Studies of Quality of Life, Columbia University College of Physicians and Surgeons
- Farida K. Ejaz, PhD**, Senior Coordinator for Residential Care Research
- Adjunct Faculty, Mandel School of Applied Social Sciences, Case Western Reserve University
- Long Term Care Research Interest Group, GSA
- Research Committee, American Society on Aging
- Carol J. Whitlatch, PhD**, Senior Research Associate
- Adjunct Faculty, Mandel School of Applied Social Sciences, Case Western Reserve University
- Research Advisory Committee, Family Caregiver Alliance
- Associate Editor, *Dementia: The International Journal of Social Research and Practice*

Library

12200 Fairhill Road, Cleveland, Ohio 44120-1013

216/231-7230 Fax: 216/231-7323

Karen Bensing, MSLS, AHIP, Librarian

Total Research Staff: 21

2000 Annual Report: Polly Clemo, Vice President for Institute Advancement; Anne Schleicher, Writer/Editor; Maryanne Lutjen, Donor and Gift Information; Steve Zorc, Photography; Academy Graphic Communication, Design and Production.

**Staff directory as of April 24, 2001*

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