"It was impossible for me to believe or envision that a new program could be better than all the programs we've seen before. But now I see it." So said Dr. Robin Goldenberg during a conference with the staff of Mountain Empire PACE on June 18th.

Mountain Empire PACE is a one-year-old Program of All-Inclusive Care for the Elderly at Mountain Empire Older Citizens, Inc. PACE enrolls frail older people who can live safely at home in a comprehensive program of health and social services. PACE participants get primary and specialty medical care, medicine, hospital care, rehab therapies, a program of daily activities, in-home personal care, social services and counseling, transportation, and medically-necessary dental, eye, and hearing services. In fact, they get every service covered by Medicare and/or Medicaid - planned and coordinated by a specially trained team of healthcare professionals.

Dr. Goldenberg is a specialist in the prevention and treatment of infectious diseases. He visited Big Stone Gap as part of a nine-member team of auditors from the Centers for Medicare and Medicaid Services (CMS) and the Virginia Department of Medical Assistance Services (DMAS). The Audit Team conducted an extensive review of Mountain Empire PACE over a three-day period to make sure the program complies with federal and state regulations. This compliance audit was the first of three routine compliance reviews that CMS will perform for Mountain Empire PACE during its first three years of operation.

The Audit Team delivered a preliminary verbal report.

See MARKS, on page 6B
Annual Duck Race Raises $5,000 for MEOC

Heritage Hall Nursing Home of Big Stone Gap and Mountain Empire Older Citizens once again partnered to raise money for MEOC’s Emergency Fuel Fund and Big Stone Gap Heritage Hall’s Residents’ Christmas Fund with a duck race on the Powell River.

Hundreds of plastic ducks, each with the number of a corresponding ticket purchased for $5, are dumped upstream. The first ten ducks to cross the finish line near Jessie Lea RV Park and Campground are winners. After prize monies are paid out, the sponsoring organizations split the proceeds, with each fund receiving $5,000.

Above, Big Stone Gap Heritage Hall Administrator Patty Akers (right) presents the $5,000 sponsorship check for the 2009 Walkathon to MEOC Emergency Services Program Director Margaret Sturgill.

MEOC’s Emergency Services Program Director, Margaret Sturgill in her waders, is pictured here with Heritage Hall’s Mrs. Duck who is actually the Director of Nursing, Tyra Wilson. The Annual Duck Race is becoming a Big Stone Gap tradition.

Prize payouts were: $1,000, Barbara Austin; $500, C. Don Smith; $250, Gilford Gibson; $150, Gilford Gibson; $100, Buna Waters; and five $50 winners: Emily Carter, Charles Million, Mike Buckles, Eddie Wells and Charlie McCracken.

Thanks so much to the Big Stone Gap Heritage Hall folks for all the work and planning that go into this event.
Mountain Empire PACE Welcomes New Staff

Participants in the Mountain Empire PACE program now have several new staff members providing their care. To meet the growing number of participants, new staff have been hired in the Adult Day Health Center, the Social Work Department and in Administration.

Amy Mooneyhan of Appalachia recently joined the staff of the Adult Day Health Center as a personal care aide. Amy has worked in the healthcare profession for 20 years and says she enjoys providing care for elderly individuals.

“To me, it is a blessing knowing that I am making a difference in someone’s everyday life,” she said.

Amy said it brings her great satisfaction knowing that she is able to bring a smile to someone’s face or help lift them up when they are feeling down or lonely. Amy’s experience in the healthcare field ranges from working in nursing facilities to also doing in-home personal care.

“The patients I have taken care of over the years know me to a very compassionate companion and a hard worker,” she said.

As our number of participants continues to grow, so does the amount of medical records we must maintain. For that reason, Mountain Empire PACE has hired additional personnel to assist with medical records and reception.

Kim Bacon of Rose Hill says she has spent her “entire work life” working in the medical field in one capacity or another. During those 18 years, Kim has worked as a medical transcriptionist, a pharmacy technician, indigent services coordinator and a secretary.

“I came to the PACE Program because I admire the services that are provided and I desire to be a part of such a beneficial program and to work with the outstanding PACE Team,” Kim said. “I am very excited to have this opportunity and I look forward to learning the different aspects of my position and attempting to become a valuable part of the PACE Team.”

Marianna Higgins has witnessed first-hand the struggles that families face when seeking long-term healthcare for their loved ones.

“I think that PACE fills in the gaps that the other options leave out,” she said. Marianna recently joined the Mountain Empire PACE staff as a Licensed Clinical Social Worker. She brings with her a wealth of experience working with patients and families.

For the last 11 years, Marianna has worked as a Renal Social Worker with Fresenius Medical Care serving hemodialysis patients. Prior to that position, she worked in various settings for Frontier Health for 7 years. During that time, Marianna worked as a Day Treatment Clinician and a Child and Family Therapist. She holds a Masters of Social Work degree from Virginia Commonwealth University and a Bachelors of Social Work degree from Virginia Intermont College.

“I am excited to be working in the PACE program and feel my knowledge and job skills will be well applied to meeting the demands of the PACE population. I strongly support the need for this service in our community,” Marianna said.
Meet Mountain Empire PACE Activities Center Staff

The Adult Day Health Center of Mountain Empire PACE is a very busy place! On any given day, you could come to the center and see a roomful of PACE participants interacting with each other, doing crafts, receiving occupational or physical therapy, enjoying a meal, playing a game, exercising or a host of other options.

The activities center is a lively place with areas for group and one-on-one activities. A visitor to the center would also find a caring group of individuals who enjoy helping others and working together as a team.

Donna Mahan of Big Stone Gap serves as the Director of the Activity Center. Donna has a history of working with large groups of people and coordinating events, both big and small. She previously served as the Director of Parks and Recreation for the town of Big Stone Gap. Donna says she enjoys being able to coordinate special events, as well as the daily activities for the participants of Mountain Empire PACE.

Donna began working with MEOC in 2003 as part of a physical activity project for the WIN (Wellness Is Now) Centers the agency operates throughout Lee, Scott and Wise Counties and the city of Norton. MEOC long ago realized that physical activity is important for older adults in Southwest Virginia because of the high level of chronic disease compared to other parts of the state and elected to pursue this project.

Donna was able to develop a physical activity project that was implemented at eight congregate nutrition sites. During the project period of April 1, 2004 – January 31, 2005, 145 registered participants logged a total of 4001 hours and 20 minutes of exercise.

The exercise participants noted that they felt much stronger and healthier after participating in the program.

Amy Mooneyhan of Appalachia has worked in the healthcare profession for 20 years and says she enjoys providing care for elderly individuals. She is one of several personal care aides that work in the Activities Center.

“To me, it is a blessing knowing that I am making a difference in someone’s everyday life,” she said.

Amy said is brings her great satisfaction knowing that she is able to bring a smile to someone’s face or help lift them up when they are feeling down or lonely.

Amy’s experience in the healthcare field ranges from working in nursing facilities to also doing in-home personal care.

Sharon Foster

Sharon Foster of St. Charles has worked as a personal care aide at MEOC for the last two years. She began working with MEOC in the transportation department. At that time she was responsible for delivering meals and Ensure. Sharon says she was able to visit with some of the people she delivered to regularly and it really made an impression on her how many of those people did not have a lot of visitors or people to talk to on a regular basis.

She made the transition to the MEOC homemaker program and was able to provide housework assistance to several clients in need. She followed that up by taking the personal care aide class to better serve her clients.

“I absolutely love being able to help someone at PACE. We all work together as a whole team to improve the quality of life for our participants,” she said.

Sharon said in the time that she has been working at the PACE Center, she has seen a positive change in many of the participants.
PACE Helps Seniors Remain Independent

Frail, older citizens wishing to live safely and securely in their own homes now have a local program to help them remain independent and offer peace of mind to their families. Mountain Empire Older Citizens, Inc. has established one of the nation’s first rural Programs of All Inclusive Care for the Elderly (PACE) at its Big Stone Gap location.

Leigh Ann Bolinskey, Intake and Enrollment Coordinator for the local PACE program, which opened its doors in April 2008, recently spoke with MEOC care coordinators about how PACE could benefit many of the clients they serve.

“Often times you see an elderly person whose family doctor has sent them to a specialist for some sort of test or procedure and the communication that needs to occur between the two physicians never occurs and the individual suffers,” she said.

That type of situation does not happen for individuals involved in PACE.

“An inter-disciplinary team (IDT) provides and coordinates See SENIORS, on page 7B

Staff

continued from page 4B

Nancy Trent of Big Stone Gap has worked as a certified nursing assistant for more than 30 years. The participants that she helps every day make her job worthwhile.

“I really enjoy working with the participants. They are becoming more like family,” Nancy Said.

Working with the PACE participants is personal for Miranda Caldwell of Appalachia. Miranda has worked in this field for almost two years.

“I took care of my dad for two years until he passed away,” she said. “Caring for him made me want to help other people with needs.”

Miranda said it feels good to know that the job she is doing is making a differ-

Leola Witt of Pennington Gap also feels personally connected to her job as a personal care aide. Leola has been working in this field for almost four years.

“I wanted to get involved because I saw the care my grandmother received while she was very sick and I knew that I could help someone just like her,” she said.

For some participants their friends at the Activities Center are the only people they talk to and for Leola, she knows that means she’s making a difference in their lives.

“I just really enjoy helping people,” she said.

Joyce Rutherford of Big Stone Gap has worked in the nursing field for more than 45 years. She has been an employee of MEOC for eight years. For Joyce the decision to work in the PACE Center was simple.

“I love people. I am old now and when I was younger I loved old people. I think they have so much history to tell,” Joyce said.
during an exit interview with the staff before leaving Big Stone Gap on June 18th.

The Audit Team came to Big Stone Gap with limited expectations. In fact, Dr. Goldenberg said because Mountain Empire PACE was “new, small and rural,” he and his colleagues came with a “sack-full of get-out-of-jail-free cards.” The team expected to find many, many problems and intended to cut the program some slack.

Instead, Goldenberg reported that the auditors threw away their “get-out-of-jail-free” cards before lunch on the first day because they found Mountain Empire PACE to be a strong, competent program that did not require coddling.

“As a new program, we were nervous about our first compliance audit by CMS,” said PACE Director Tony Lawson. “We love our program participants, we work hard for them, but we weren’t sure how we would stack up against other programs across America. It was gratifying to learn that we compare favorably with older, more established PACE organizations.”

Just how favorably does Mountain Empire PACE compare with other programs?

According to Dr. Goldenberg, the performance of Mountain Empire PACE “outstrips PACE organizations that have been in business for many, many years.” He said, “It is phenomenal that you reached this point in such a short period of time.”

Yvonne Goodman, a nursing consultant, said she wants to move to Big Stone Gap so she can work with Mountain Empire PACE now and be a program participant later.

Stephanie Bell, also a nursing consultant, said: “After the first day, the team consensus was ‘this program is too new to be this good.’ After the second day, we realized that the program really IS that good. Wow! Pat yourselves on the back! Be proud. You’ve done a great job.”

Pharmacy Analyst Carol Kileen said “I’m just so impressed with the staff. You have something truly special to offer. Nice job.”

Lisa Purcell, the Audit Team Leader, said: “Kudos! You should be proud of yourselves for instituting such a strong system to fight fraud, waste, and abuse. Yours is one of the best programs we’ve seen.”

Finally, Dr. Goldenberg said “There’s always a concern in the wake of a very positive de-briefing that the other shoe will drop. But here, there is no other shoe! Everyone has been warm, welcoming, candid, and hospitable. You have set the bar very high. Your challenge will be to maintain this standard as you grow and move into the new facility. Congratulations.”

Mountain Empire Older Citizens celebrated the positive audit findings with pizza, cake and soda on June 19th. MEOC Executive Director Marilyn Maxwell proposed a toast for the party: “To our friends at CMS: ‘You ain’t seen nothin’ yet!’” She called the preliminary audit report a “wonderful tribute to the entire staff of Mountain Empire Older Citizens, Inc.” She added, “To see this long dream not only become reality, but to succeed this well in such a relatively short period of time is proof positive that MEOC chose to pioneer the PACE Program in a rural area for all the right reasons”.

Mountain Empire PACE serves people in Lee, Scott, and Wise Counties and the City of Norton. To enroll in PACE, an individual must be aged 55 or more, able to live safely at home, and be deemed eligible for nursing facility level of care. Most people who enroll in PACE have Medicare and/or Medicaid. To learn more about the program, call Leigh Ann Bolinski at 276-523-0599.
all of the health care services that our participants need. They are in constant communication with one another so everyone knows if there is something going on with a particular participant that affects their health and well-being," Bolinskey explained.

The IDT includes, not only a primary care physician and registered nurse, but also a social worker, a dietitian, an activities director, a personal care aide and a transportation director. Additionally, therapists in both the field of physical and occupational therapy and a home care coordinator make up the IDT.

"The IDT develops individualized plans of care based on a detailed assessment of a participant’s health needs. No two care plans are the same, just as no two individuals are the same," Bolinskey said. "Another advantage of PACE is that it is not a ‘cookie-cutter' type system. We realize that what works for one person may not work for another."

The Mountain Empire PACE Program currently has 48 participants, with more being enrolled each month.

To be eligible for enrollment in the Mountain Empire PACE program, Bolinskey explained, individuals must meet the following four qualifications. They must:

• Be age 55 or older;
• Live in Norton, or Lee, Scott or Wise Counties
• Have been certified as eligible for nursing facility level of care, and
• Be able to live safely in the community at the time of enrollment.

PACE offers many services to its participants, Bolinskey said. Locally, Mountain Empire PACE approves, provides or coordinates these services:

• Physician visits
• Hospital stays and emergency care
• Prescriptions
• Physical, speech and occupational therapies

One of the most popular components of Mountain Empire PACE is the Adult Day Health Center. Participants come to the Center throughout the week to not only see the doctor, but also to socialize and participate in a number of activities.

"Donna Mahan is our Activities Director and she really keeps our participants moving with lots of activities and fun things for them to do," Bolinskey said.

On any given day, you could come to the Activities Center and see a few participants playing a game of Rook, others doing crossword puzzles or crafts and still more participating in exercises with the physical or occupational therapist.

"There really is something for everyone in the Activities Center and Donna does a great job of keeping everything moving," Bolinskey explained.

Participants in the PACE program are not required to come to the Activities Center, but most do.

"We do have some folks who only come to the Center on days that they need to see the doctor and that’s perfectly acceptable as well, but we do encourage folks to at least give us a try in the Activities Center," Bolinskey noted.

Another good component of PACE is that if an individual decides to enroll they are not “locked-in” to the program. An individual can dis-enroll from the program at any time if they decide it is not right for them.

"We even have social workers who can help the individual get re-established back into the Medicaid, Medicare or other fee-for-service benefit plans," Bolinskey explained.

For more information about how you can enroll in this exciting new program, please contact Leigh Ann Bolinskey, Intake and Enrollment Coordinator for Mountain Empire PACE at 276-523-0599 or toll-free 1-866-793-7223.
Equipment

continued from page 6B

U.S. Department of Agriculture through its Rural Development Agency.

The current PACE Center, which began enrolling participants last April in space set aside in the agency’s building, “enables MEOC to be the single source for all care that is needed for senior citizens including primary health care, occupational therapy and social services,” Boucher noted in the release.

Currently, 55 participants receive services, and by September, 60 enrollees are expected.

The new PACE facility, when completed, will house a medical clinic, rehabilitation clinic, personal care facilities, activity and dining areas, a caterer’s kitchen and staff offices. By late 2010, it is expected to serve more than 100 participants from Wise, Lee and Scott counties and the City of Norton.

Previously, Boucher announced $4 million in federal funding for construction of the PACE facility.

“One of my highest priorities is ensuring that senior citizens in the Ninth District have access to the best possible health care service. Mountain Empire Older Citizens provides excellent assistance to Southwest Virginia’s senior citizens, and I am pleased that the Rural Development Agency will assist MEOC in providing care to the seniors in the region,” Boucher noted in the release.

THE GRANT

As soon as the opportunity for the federal money came open, Rural Development, at the urging of Boucher’s staff, made MEOC aware of the opportunity to apply, Lawson noted.

“We followed through as soon as possible, and are very grateful to Congressman Boucher and his staff for keeping us in mind for this funding. They stood solidly behind us and obtained this new benefit for the PACE Center,” he said.

Lawson said the staff is currently pulling together the final list of equipment for the facility. “The specs are ready but the bids are not in,” he noted.

Since the center now operates in space set aside at MEOC, part of the equipment being used is shared with the other MEOC services, and part will be going to the new building, he noted.

It’s going to take about $150,000 to fully equip the center, he said. Loan money has already been used to meet a third of that cost.

“We spent about $50,000 to outfit the medical clinic we set up temporarily at MEOC,” he said.

“We need more specialized equipment for physical and occupational therapy when we move into the new building, to help people exercise in a wider variety of ways to increase their mobility,” he said.

PACE will also need several specialized “modified recliner” chairs so that participants can sit while eating, then recline or lie completely flat while resting.

Equipment to heat, cool and store food will be needed because meals served to participants will be prepared in MEOC’s central kitchen and delivered to the site.

The center will also need commercial laundry machines, ice machines, office equipment and tables and chairs.

A telemedicine conference room will be equipped and linked with the medical school at the University of Virginia.

MEOC PACE is licensed as both an Adult Day Health Center and as a medical clinic, he noted.

MOUNTAIN EMPIRE PACE SUCCESS STORIES

A balanced diet, social interaction and motivation, consistent medical monitoring and exercise — those are the factors that are changing lives for PACE participants.

“It’s been incredible. People enroll and we see the improvement begin,” Lawson said.

“One participant has COPD (chronic obstructive pulmonary disease), and when she came, could not handle even minor parts of a daily routine. She’s in better shape now than she’s been in years. She recently went to the laundromat — with assistance — for the first time in two years. And she sang in church on Easter Sunday.”

“We’ve had several people go to the nursing home temporarily when they had setbacks, but they’ve been able to come back home and through PACE services, recover their strength to a substantial degree.”

One participant has lost 70 pounds, and gained a lot of medical and mobility benefits from the weight change.

Others have reported having “a new purpose to live,” Lawson said. “We have people who came to us in a wheelchair, with very little ability to walk, and are gradually working their way back to mobility. The distance they can walk is increasing every week.”

PACE is licensed as an Adult Day Health Center and as a medical clinic.

“PACE is on target and doing exactly what it’s supposed to be doing. We’re taking care of our elderly and improving their quality of life to the greatest level possible,” Lawson said.
Don’t Leave Hometown, Family and Friends For Rehab
Come to Heritage Hall in Big Stone Gap

Ms. Dezarn recently broke her left leg and had surgery at Wellmont Lonesome Pine Hospital. She then chose Heritage Hall-Big Stone Gap for inpatient rehabilitation.

“Everyone is good to me here. Our goal is for me to walk out of here and be able to live in my home with little or no help. I know it will happen soon.”

— Ruth Dezarn

Heritage Hall
Managed by American Health Care, LLC
Patty Akers - Administrator
2045 Valley View Drive • Big Stone Gap, Virginia 24219
276-523-3000 Fax 276-523-0531
Southwest Virginia Cancer Control Forum Held

The Southwest Virginia Cancer Control Forum, presented by the Virginia Cancer Plan Action Coalition (CPAC), took place in late April at Mountain Empire Community College. The aim of CPAC is to strengthen alliances and provide education and outreach activities among cancer stakeholders in the Commonwealth. The forum supported that objective by bringing together forty participants from diverse backgrounds with the same goal of lessening the effect of cancer in our community.

Representatives were in attendance from the American Cancer Society, East Tennessee State University, Johnston Memorial Cancer Center, LENOWISCO Health District, Mountain Empire Older Citizens, Inc., Norton Community Hospital, the University of Kentucky, the University of Virginia and Virginia Tech, along with other community members and a number of CPAC leaders from Richmond and Charlottesville. Trina McFarland Kern, Director of the Mountain Laurel Cancer Support and Resource Center, was inspired by the forum’s strong attendance. “It was remarkable to me,” Kern said, “to be in a room where nearly every seat was filled and to

Remarks from Delegate Bud Phillips (center) were a highlight of the forum. Pictured with Delegate Phillips are CPAC Co-Chair Nila Saliba (left) and Mountain Laurel Center Director Trina McFarland Kern (right).

Several LENOWISCO Health District staff members were present, including Shirley Miller, Michelle McPherson, and Carys Jones. Shirley Miller, Health Educator, (far left) gave an informative presentation on “The Tobacco-Cancer Connection.”
Preventing Cancer

The Virginia Cancer Plan Action Coalition (CPAC) seeks to gather information about any public or private organizations, businesses or managed care groups that offer cancer prevention programs in rural Virginia. Examples include but are not limited to tobacco cessation classes, nutrition programs or fitness programs. The information will help CPAC inform community agencies of potential resources and plan new programs and activities in the community. CPAC requests that those who offer such programs contact Lucie Ferguson at Lucie_Ferguson@bshsi.org or 804-545-1930. Please provide the name of the organization responsible for the program, the type and frequency of the program, any associated costs and contact information for the program coordinator. For more information about CPAC and/or to view the new State Cancer Plan, visit www.virginiacpac.org.

LENOWISCO Health District staff member Erra Sutherland (right) thanks Ben Mays for his performance in “Life’s Circle,” a moving play that tells the cancer stories, using their own words, of local residents and their families.

The Mountain Laurel Cancer Support & Resource Center
Mountain Empire Older Citizens, Inc.

Hope. It’s straight ahead, and we’ll guide you there.

At the Mountain Laurel Cancer Support & Resource Center of Mountain Empire Older Citizens, Inc. our mission is to expand community awareness of and education about cancer issues and to enhance the quality of life of cancer patients, their family members, and caregivers by addressing their psychological, social, emotional, spiritual, and physical needs related to the impact of a diagnosis of cancer.

We seek to fulfill our mission by providing direct service through travel assistance for medical appointments, liquid nutrition, pharmacy assistance, Miracle Mouthwash to help with sores caused by chemotherapy and radiation therapy, comfort baskets, care coordination, and Radia-Guard Radiation Treatment Lotion.

We also offer CancerHelp, a database which contains the most up-to-date information about all different types of cancer, cancer prevention, cancer screenings, cancer treatments, and cancer research.

Above all, we are here to listen, to discover your needs, and to help you meet them, whatever they may be. Whether it is transportation, emotional support, financial assistance, or information, if we don't offer a service, we'll search for someone who does. Please contact us. Hope is straight ahead.

Contact Us:
Mountain Laurel Cancer Support and Resource Center
A Program of Mountain Empire Older Citizens, Inc.
Trina McFarland Kern, Director
P.O. Box 888 • 1501 3rd Avenue East • Big Stone Gap, VA 24219
t Kern@meoc.org • 800-252-6362 • 276-523-4202
Forum

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recognize that each person there had been touched in some manner by cancer and was working in his or her own way to diminish its impact. It was encouraging to realize that although the battle is great, those fighting the hardest, the survivors and their families, are not standing alone. They are surrounded by an entire community of love and support.”

The program included remarks from Delegate Bud Phillips, a performance of cancer stories, told in their own words, of local residents and their families, cancer data specific to Southwest Virginia, a presentation concerning “What Makes the Cancer Experience Different in Appalachia,” a panel discussion regarding best practices, and a roundtable discussion on the subject of Virginia’s Cancer Plan. “The day was great. I truly enjoyed it, and it was very informative,” said American Cancer Society Community Manager Bonnie Jones. Beyond the information she gained, Jones came away from the day anticipating the positive outcome of a community committed to fighting cancer. “By working together,” Jones said, “the progress is evident that we are succeeding in the battle against cancer.”

According to Nila Saliba, CPAC Co-Chair, the forum effectively achieved its purpose. “We hoped to build awareness of the Virginia Cancer Plan, to provide regional specific data and information, and to link community partners and activities to the plan’s goals and objectives,” said Saliba. “According to the evaluations, we were very successful.” Saliba also shared that the forum in Big Stone Gap will serve as a blueprint for future programs across the state. “What we learned in Big Stone Gap will be used in similar forums scheduled for August 19 in Danville and in early September in Buckingham County. I hope that what was started in Big Stone Gap will have positive consequences throughout the Commonwealth.”

Two UVa Cancer Center staff members visited MEOC while in the area. Christi Sheffield, Medical Center Manager for the Breast Care Program, and Alison Gaucher, Health Educator for the Breast Care Program (pictured above) toured MEOC and visited with staff. Gaucher also played a BINGO game she designed for cancer education with MEOC’s PACE (Program of All-Inclusive Care for the Elderly) participants.

Representatives of Mountain States Health Alliance (MSHA) recently came to MEOC offices to discuss ways in which MSHA and MEOC can enhance cooperation. Pictured left to right: Lori Crisp, Norton Community Hospital’s Director of Marketing and Public Relations, Dana Bailey, Mountain States Health Alliance Outreach Manager, Marilyn Pace Maxwell, Executive Director of Mountain Empire Older Citizens, and Tammy Maye, Senior Director of Business Development for Mountain States Health Alliance.
Lee Nursing and Rehabilitation Center

A Proud Community Sponsor of MEOC’s 2009 Walkathon

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Pennington Gap, VA 24277
(276) 546-4566       FAX (276) 546-6818

Selina Light,
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Director of Nursing

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Dedicated to the Needs of Our Residents and Families
Pharmacy Connect of Southwest Virginia Tops $11 Million Mark In Free Medications in 2009: Information on How to Benefit From Pharmacy Connect

Are you struggling to pay for your prescription medications? You may be someone who has no health insurance coverage or someone who has Medicare prescription coverage. Either way, if you are struggling to pay for medicines prescribed by a doctor, the Pharmacy Connect of Southwest Virginia program could most likely help you.

Pharmaceutical companies give away free medicines. Last year the Pharmacy Connect program got over $11,000,000.00 wholesale valued medications free for people in our area.

The people who got the $11 million in free medicines last year were 18 years of age and older. Many were working people who had part-time or full-time jobs, but who had no health insurance coverage from their employers. Many were senior citizens on Medicare who had reached the “doughnut hole”—a time when Medicare stops paying and the patient must pay 100% for medicine. Many were people between 60 and 64 years of age who were not working and not eligible for Medicare.

There is an application process to get the free medicines from the pharmaceutical companies. The people who work in Pharmacy Connect can do the application for you and help you with other information that is required. Once you are approved, you may need to reapply in 3 months, 6 months or a year later to continue to get the medicine. Pharmacy Connect staff can keep up with the reapplication process to remind you when it is time to apply again.

Pharmacy Connect: Free Medication for Adults of ALL Ages

The Pharmacy Connect of Southwest Virginia program can help uninsured people of all ages to access free medications from pharmaceutical companies. Adults of all ages who live in the City of Norton or the counties of Wise, Lee, Scott, Dickenson, Russell, Tazewell and Buchanan should apply for this valuable resource. There is no fee for this service.

Pharmacy Connect of Southwest Virginia is a partnership of agencies and health clinics throughout the region

See FREE, on page 30B

MEOC’s Pharmacy Connect Access Worker, Pat McCracken, retired on May 15, 2009. Pat devoted nearly eight years to helping people of all ages access the free medications from pharmaceutical companies through the Pharmacy Connect of Southwest Virginia program. We miss Pat and wish her a fruitful, happy retirement.
MOUNTAIN EMPIRE NEWS

Mountain Empire Transit Takes Top Honors In State Competition

MEOC participated in the 2009 State Driving Roadeo in Fredericksburg, Virginia on April 18, 2009. The event, sponsored by the Community Transportation Association of Virginia (CTAV) and the Department of Rail and Public Transportation (DRPT), offers an opportunity for transit drivers from across the state to showcase their driving skills and knowledge of “rules of the road.” The competition includes a written test, a wheelchair securement exercise, and a driving obstacle course.

MEOC employees attending the event (pictured above) were: Ken Barnard, driver; Michael Wampler, Transit Director; Sylvia Sexton, driver; Mitch Elliott, Operations Director; Danny Stallard, driver; Wayne Watson, driver; Jerome Wright, Truck Driver.


SEE MORE TRANSIT NEWS ON PAGE 16B & 17B
In his first year competing in the Roadeo, Wayne Watson won first place in the van division. On May 31, 2009, he competed in the National Community Transportation Roadeo Expo in Providence, Rhode Island tying for 10th place overall. The event was hosted by the Community Transportation Association of America (CTAA).

MEOC also received more awards on individual obstacles than any other agency competing in the event. Individual obstacle awards went to:
- Driver Johnny Woodward-Serpentine Award
- Driver Ken Barnard-Right Turn Award and Off Set Street Award
- Driver Jerome Wright-Right Reverse Turn
- Driver Wayne Watson-Wheelchair Securement and Left Reverse Turn

“As always, we are very proud of our drivers and their accomplishments. The drivers take great pride in the competition, but perhaps the greatest reward comes from serving our passengers and the community” said MEOC Transit Director, Michael Wampler.

Lincoln Memorial University (LMU) and Remote Area Medical (RAM) joined together on May 30-31, 2009, to hold the 4th Annual RAM Health Expedition at LMU. The expedition provided free medical, dental and optical care to 818 individuals in just two days. These individuals accounted for 1,443 patient contacts, as patients were able to receive services in three clinic areas if desired. These 1,443 patient contacts equaled $197,905.00 in free medical services rendered. MEOC Transit provided transportation services to 2,161 RAM participants at no cost. MEOC is pleased to assist LMU, RAM and the local community in providing services to individuals in need.

Glen Jenkins, Operations Manager for Fredericksburg Regional Transit, presents Wayne Watson, Driver for Mountain Empire Older Citizens, with the first place trophy in the van division in state roadeo competition held in April. Congratulations to MEOC’s state champion driver Wayne Watson.

Driver Ken Barnard takes a break from his transit duties for a quick photo with Regional Area Medical Volunteer Corps founder, Stan Brock during RAM at Lincoln Memorial University.

State

continued from page 15B

driver and Johnny Woodward, driver.

In his first year competing in the Roadeo, Wayne Watson won first place in the van division. On May 31, 2009, he competed in the National Community Transportation Roadeo Expo in Providence, Rhode Island tying for 10th place overall. The event was hosted by the Community Transportation Association of America (CTAA).

MEOC also received more awards on individual obstacles than any other agency competing in the event. Individual obstacle awards went to:
- Driver Johnny Woodward-Serpentine Award
- Driver Ken Barnard-Right Turn Award and Off Set Street Award
- Driver Jerome Wright-Right Reverse Turn
- Driver Wayne Watson-Wheelchair Securement and Left Reverse Turn

“As always, we are very proud of our drivers and their accomplishments. The drivers take great pride in the competition, but perhaps the greatest reward comes from serving our passengers and the community” said MEOC Transit Director, Michael Wampler.
Mountain Empire Transit is pleased to welcome new employee, David Britter, of Dryden to MEOC's national award-winning Transit Team.

Benjamin Lawson of Dryden began work at MEOC on March 23, 2009 as a driver in the transit department. We welcome Ben to MEOC.

**Operation Lifesaver**

Quincy Adams and Shannon Huff of Norfolk Southern gave an informative presentation on Operation Lifesaver to MEOC Transit staff on June 13, 2009. Operation Lifesaver is a program designed to educate the public about highway-rail grade crossing safety. Pictured here (left to right) are: Michael Wampler, MEOC Transit Director; Quincy Adams, Conductor; Shannon Huff, Conductor and Mitch Elliot, MEOC Operations Director.

**MEOC Recruiting for Volunteer Driver Program**

MEOC’s Volunteer Driver Program is now recruiting volunteers to provide transportation services to consumers in Lee, Scott and Wise Counties and the City of Norton. Volunteers will be utilized for transportation requests when specialized trips are necessary and will enhance MEOC’s ability to serve more people, said Nicky Fleenor, Mobility Manager.

MEOC will accommodate volunteer drivers by providing them with a flexible schedule, use of an agency vehicle and training. “There is tremendous joy in helping others,” said Fleenor.

If you are interested in volunteering with the Volunteer Driver Program, please call Nicky Fleenor, Mobility Manager at (276) 523-7433 for more information.
2009 Foster Grandparent Program Recognition Well Attended

The Foster Grandparent Recognition was held Thursday, May 7, with 50 people in attendance. The event was held at Heritage Church of God in Big Stone Gap. Pictured back row (L to R)- Nelda Dennison, Appalachia; Rena Ashworth, Norton; Marie Smith, Hiltons; Sheila Miller, Castlewood; Carol Bright, Wise; Ruth Shawver, Hiltons; Phyllis Coldiron, Pennington Gap; Edith Moore, Ewing. Pictured front row (L to R)-Shirley Gardner, Hiltons; Thelma Welch, Jonesville; Betty Stewart, Pennington Gap; Margie Beach, Pennington Gap; Patsy King, Big Stone Gap; Daris Neal, Rose Hill.

Deborah Adams and Marie Smith have worked together several years at Hiltons Elementary School. Deborah is retiring after many years of dedicated service. Good luck and best wishes from MEOC’s Foster Grandparent Program.

Patricia Rogers (left), Head Start teacher at Dryden, and Margie Beach of Pennington Gap. Margie celebrated her 11th year with the Foster Grandparent Program. “Margie is a very caring individual and the children simply love her. They spend so much time with her, even free play time. She is known as Granny Beach to most of the children. There was one little girl who formed such a bond with Mrs. Beach. The little girl cried for weeks because she missed her mother. Mrs. Beach helped her through this time and now she no longer cries,” said Mrs. Rogers.

Foster Grandparents receiving five years pins were, (left) Shirley Gardner of Hiltons and Edith Moore of Ewing. Not pictured Tina Cleusman of Wise.
ATTENTION!

IF YOU ARE 55 or OLDER...

...WILLING TO SHARE YOUR SKILLS and ABILITIES...

...AND LOOKING FOR VOLUNTEER OPPORTUNITIES...

THE MEOC RETIRED AND SENIOR VOLUNTEER PROGRAM NEEDS YOU!

TO FIND OUT MORE, CALL LYNETTE AT MOUNTAIN EMPIRE OLDER CITIZENS, INC. 276-523-4202 (800) 252-6362
Alzheimer’s Disease and Travel

By Jeanne Reeder, L.M.S.W.,
Patient and Family Services Specialist Heart of America Chapter, Alzheimer’s Association

‘Tis the season to hit the highway, to get away and relax. It is no great surprise to me, then, that the most often repeated concern at this time of year is “how do you think ‘Sam’ will do if we go back to Ohio to visit his brother and sister?”

This isn’t a simple matter. Traveling with a person with Alzheimer’s disease can be rewarding for the whole family or the trip can be full of frustrations for everyone. Change is difficult for persons with dementia. And change is what traveling is about. Traveling is novelty, the unpredictable, the very definition of all kinds of change. It brings changes in pace, the people we see everyday, our environment, activities, eating habits and daily schedule. These changes in the daily routine can lead to fear, increased confusion and anxiety, even among people who do not have the disease. An interruption in routine is felt most keenly, however, by the person with Alzheimer’s.

MEOC Hosts Educational Forums For Family Caregivers

MEOC caregivers participated in educational events on April 27 and June 11.

On April 27, Jennifer Hill, Case Manager with Frontier Health, spoke with a group of 22 caregivers on the topic of stress management. She also provided free stress relievers for everyone in attendance. Dr. Gary Williams, PACE physician and medical director shared information with the group on Swine Flu and answered questions. The evening concluded with everyone helping themselves to a delicious supper.

On June 11, 32 individuals viewed “The Memory Loss Tapes” which is part of “The Alzheimer’s Project”, an HBO documentary series. This segment featured an up-close and personal look at seven individuals living with Alzheimer’s disease, each in an advancing state of dementia across the full spectrum of the progression of the disease. Immediately following the showing, the group enjoyed a wonderful home cooked meal.

(L to R) Alberta Mitchell (Big Stone Gap), Peggy Dutton (Castlewood) and Pamela Wade (Big Stone Gap) enjoyed viewing “The Memory Loss Tapes”.

DISEASE, on page 21B
Some traveling plans almost guarantee too much change, but yes, it can be “too much” even when your plan is only to spend a few days down on the family farm.

Idea that Travel. Don’t cross traveling off your list. Many great traveling stories have been shared by people with Alzheimer’s and their families. Whether you are planning a short trip to visit a special place or a ten day excursion to your faraway ancestral home, or even an exotic cruise, the key to having a good time is thinking ahead and planning. Here are some things you can do early to have a successful trip.

Have a plan in mind. While planning for your next great adventure is not a money-back guarantee for a great trip, it should be considered a must. Begin by considering your family member with Alzheimer’s. Does he or she have special needs? Can they go to a public restroom without assistance? What kind of traveler were they before Alzheimer’s disease? Did they enjoy traveling then? Were long or short trips the best? What types of trips did they enjoy? Consider the stage of the disease he or she has reached, and incorporate the changes you see in their activity. For example: do they need more rest, more frequent bathroom breaks, less stimuli? Is this a trip for them or is it really for other family members?

Consider the Purpose of the trip. Are you going for fun, relaxation and enjoyment? Or do you hope to fulfill a dream, evoke past memories, or reconnect with family members? Why are you going? What can you do before you leave home to achieve your purpose? Before you travel, let family and friends know how “Sam” has changed, behaviorally, cognitively and perhaps physically. Your family may be able to help you evoke those memories and enjoy your stay.

Consider your mode of transportation. Commercial plane, train, bus, ship or private car. Again, assess your family member’s special needs. Can they follow directions, for example, for getting in and out of the rest room on a plane? And can they cope with the confinement that comes with commercial traveling? If you use commercial transportation, alert all staff to your special circumstances and take advantage of their ability and willingness to accommodate special needs. Most airlines, for example, have first-to-be seated rules for people with special needs. When using a private car you may need to make more frequent stops, and a previous one day trip may require an extra day of travel. You will need patience for the oft repeated question, “Are we there yet?” You might need to use the child locks on car doors to prevent accidental opening.

Consider the length of your trip. Around the world in 80 days is probably not the best idea for a trip at this time. Short trips may be more feasible. Day trips can be ideal; they can even be bore-
**Travel**

continued from page 21B

dom-busters for the whole family. Be open to extend or shorten the trip depending on how things are going.

**Consider your accommodations.** Where will you stay: in a motel or hotel, at a bed and breakfast inn, at the home of relatives or a friend? Or do you plan to camp out? Again consider special needs. How secure and restful will this place be for your family member with Alzheimer’s? Will it be comfortable? Does the place have what you will require for ease and comfort? Be aware of any hidden costs if you need to make special requests or add amenities. If staying with family or friends, tell them about what you need, for example, a room close to the bathroom.

**Consider daily activities.** Again consider what “Sam” likes or enjoys. Limit the activities in scope and duration. Don’t over stimulate your loved one. Provide extra down time. When interest wanes, move on to another activity or stop for a meal or a snack. Always remember to do a reality check: is your family member’s attention span the issue, or has something else intervened, for example, some physical discomfort (tired, achy feet), or hunger or thirst, or too many strange people around.

**And Add a Dollop of Prevention.** Of course, the best laid plans often go astray, so here are some things to take or do on the trip that will also help keep your traveling plans on target. Take along basic medical records, doctor’s phone number, list of all prescriptions, refills for medications, if you will need them. Check out emergency facilities available at the location where you will be. Check with the doctor about medication that might alleviate troublesome agitation.

Be sure your family member wears identification. You might also wear your ID in case you are separated or to help maintain dignity.

Do whatever you can to minimize the changes in the environment. Take along a favorite blanket or pillow. Take along familiar pictures to place on the night stand or a favorite figurine or your alarm clock. Anything that will remind your loved one of home will comfort and help anchor your loved one. Be ready to provide lots of reassurance, and normalize your routine as much as possible. Planning may seem like a lot of work, yet when you come home from a successful getaway, you will be glad you took the risk. I encourage you to go and to go with courage. Roy Rogers said it

Doris Lewis, R.N. (Rose Hill), Harold Sargent (Appalachia), Lisa Whisman, R.N. (Keokee) and Presley Legg (Gate City) spent a few minutes discussing the agency’s Personal Care Services following the meeting.
The media’s widespread attention to Alzheimer’s disease in recent years has led some in the public to use the word incorrectly in describing a loved one’s condition. For many, Alzheimer’s has become a synonym for any form of forgetfulness. The fact is not all forgetfulness stems from a disease. Furthermore, the loss of mental functions is not necessarily the consequence of Alzheimer’s disease. Memory loss can result from such things as depression, poor diet, vitamin deficiencies, medication interactions, and excessive use of alcohol. Alzheimer’s is actually one of several types of dementia. Dementia itself is not a disease, but rather a group of symptoms caused by different diseases, resulting in physical changes in the brain.

Dementia affects one or more of the following:

1. Recent memory (the ability to learn and recall new information)
2. Language (the ability to write or speak or understand written or spoken words)
3. Visual (the ability to understand and use symbols, maps, etc.)
4. Executive Function (the ability to plan, reason, solve problems and focus on a task.)

The most common form of dementia is Alzheimer’s. It accounts for 60 to 70 percent of all dementia cases. Symptoms can vary from person to person. The most common symptom is forgetfulness severe enough to affect a person’s work and/or personal life. The second most common form of dementia is thought to be vascular dementia. This impairment is caused by reduced blood flow to the brain. One type may develop from a single major stroke, while another type formerly called “multi-infarct dementia” can occur when a series of very small strokes clog tiny arteries. It’s not uncommon for some to develop a combination of Alzheimer’s disease and vascular dementia.

Other forms of dementia are:

- Parkinson's disease — Affects control of movement, resulting in tremors, stiffness and impaired speech. Dementia sometimes occurs later in the disease.
- Dementia with Lewy Bodies — Starts with wide variations in attention. People often experience visual hallucinations, as well as muscle rigidity and tremors.
- Physical Injury to the brain
- Huntington’s disease — An inherited disorder that causes irregular movements of the arms, legs and facial muscles and a decline in the ability to think clearly.
- Creutzfeldt-Jakob disease — A rare, rapidly fatal disorder that impairs memory and coordination, and causes behavior changes.

James and Charlotte Hubbard (Appalachia) have been caregivers for several family members over the years.
Meeting the Emotional Needs of People with Alzheimer’s

Alzheimer’s Association,
Great Plains Chapter (Kansas, Nebraska)

- People with Alzheimer’s may feel joy and serenity and “live in the moment.” At other times, they may be angry, anxious, depressed, fearful and lonely, emotions often expressed through behavioral changes, aggression and wandering.
- Instead of forcing people with Alzheimer’s to deal with reality, empathize with them, suggests the Harvard Health Letter, Alzheimer advocates provide these tips for making emotional connections and treating people humanely.
- Put yourself in their place. If someone mistakenly believes his wallet has been stolen, acknowledge his feelings. Say, “You must feel terrible. Let’s see if we can find it.” If someone talks about her dead father as being alive, instead of denying it, you might say, “He sounds wonderful. Tell me more about him.”
- Preserve self-esteem. Allow the person to continue performing easy tasks and making simple decisions. That may mean asking questions to help decision-making. Instead of asking, “What would you like to drink?” ask “Would you like coffee?”

Overview

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- Normal Pressure Hydrocephalus – Caused by a build-up of fluid in the brain.
- Front temporal dementia or Pick’s disease – Another rare disorder. Similar to Alzheimer’s, personality changes and disorientation often occur before memory loss.

The Alzheimer’s Association has identified the following 10 warning signs of Alzheimer’s disease:

1. Memory Loss – A person begins to forget more often, and is unable to recall the information later.
2. Difficulty Performing Familiar Tasks - People often find it hard to plan or complete everyday tasks, like preparing a meal or placing a phone call.
3. Problems with Language – People often forget simple words or substitute unusual words, making their speech or writing hard to understand.
4. Disorientation to Time and Place – People can get lost in their own neighborhoods. They forget where they are and how they got there.
5. Poor or Decreased Judgment – They may dress inappropriately for the weather, or they may show poor judgment in financial matters.
6. Problems with Abstract Thinking – Someone with Alzheimer’s may have trouble performing complex mental tasks.
7. Misplacing Things – Someone with Alzheimer’s may put things in unusual places, like an iron in the refrigerator.
8. Changes in Mood or Behavior – Someone with Alzheimer’s may show rapid mood swings for no apparent reason.
9. Changes in Personality – Personality can quickly change from one that is extremely confused to one that is suspicious or fearful.
10. Loss of Initiative – A person with Alzheimer’s may become very passive, sitting in front of the TV for hours or sleeping more than usual.
Mood Swings: How to Maintain Order

Instability can unnerve caregivers. Alzheimer’s is a disease process marked by change, stable plateaus of uncertain length, then, more change. “Mood swings” is shortened for sudden, unpredictable changes in emotion and behavior that can occur for no apparent reason. These cannot be avoided entirely, but they can be minimized and managed.

Reasons why people are so changeable:
Alzheimer’s disease and small strokes damage the brain’s ability to regulate emotion, resulting in unprovoked anger, sadness or anxiety.

1. It lowers tolerance for stress. Pain, drug side-effects, illness and changes in routine can trigger emotional outbursts.
2. People overact because they cannot perform a simple task; express pain, fear or loneliness in words.

Prepare yourself mentally
• Mood swings” are caused by the disease, not by ill will. It is a little easier if you don’t take it personally, and if you are prepared for it.
• Know that your family member is also struggling to keep things in control.

Practice prevention
• Make a note of whatever triggers emotional turmoil.
• Avoid stressful situations such as noise; too many people or activities.
• Schedule stressful activities when he/she is more rested (ex. Bathing, doctor appointments).
• Keep routines as much as possible. The same faces, places and regular ties provide calm.
• Deal with behavioral problems as soon as they arise.

Manage the upset
• Don’t argue. Reasoning things out with an upset person with dementia does not work.
• Back off if you are triggering the outburst, calm yourself and come back later.
• Have an exit strategy if he/she becomes upset at a social gathering.
• Hand over the situation to somebody who has a calming influence on him/her.
• Utilize distractions that have worked before (A walk, soft music, a snack, the dog).

• Slow your speech and movements, lower your voice, provide reassuring touch.
• Give prescribed medications for paranoia, hallucinations, delusions or depression.

Take care of yourself
• Protect yourself if your family member becomes aggressive.
• Get information and support, join a support group. Call MEOC for information on support groups available in southwest Virginia—276-523-4202.
Sex- Specific Gene Linked to Alzheimer’s

Researchers at the Mayo Clinic have discovered the first gender-linked susceptibility gene for the late-onset Alzheimer’s. The research showed that women who inherited two copies of a variant in a gene found on the X chromosome are at considerably greater risk of developing the disease.

Investigators say more study is needed before assigning the degree of risk the gene seems to carry, but they say it appears to be one of the stronger risk factors found to date.

“This is a very common genetic variant, and many women who had two copies of it did not have the disease. But, overall, the odds were substantially greater that female patients with the disease did have two copies,” said the study’s senior investigator, Steven Younkin, MD, PhD, a consultant-researcher at Mayo Clinic’s campus in Florida and Georgia M. Eisenberg, Professor of Neuroscience in the College of Medicine. “The results obtained do not imply that women are generally at increased risk for developing the disease than men.”

Tips for Giving Medication……..

Alzheimer’s Association,
Greater East Ohio Area Chapter

Administering medication to someone with Alzheimer’s can be a daunting responsibility. Preventing missed pills or giving the wrong dosage are valid concerns.

Here are some suggestions:

- Learn about each medication before administering. Make sure you know exactly what each pill is for and the possible side effects.
- Clearly explain exactly what each pill is for. Tell the person with Alzheimer’s why and how they need to take it.
- Keep good records of each medication.
- Make note of dosage and frequency.
- Organize medications. Store them safely out of reach in a locked cabinet or drawer.
- Develop a routine. Giving medications in a specific way at specific times can help reduce conflicts. But if the person doesn’t want to take it at a particular moment, try again later.
- Make the task as easy as possible. Ask your pharmacist for liquid, which may be easier to give than a pill, or ask if you can crush the pill and put it in food. (No pill or tablet should be crushed without first consulting your physician or pharmacist.)

Many families ask that friends and associates contribute to a memorial fund in lieu of floral tributes. Some families wish to recognize the living at the time of a birthday, a wedding anniversary, or other special occasion. We appreciate receiving all kinds of gifts. All such gifts are acknowledged to both the donor and to the family of the deceased or of the person being honored.

If you have questions about making a donation in memory of a loved one, please call Mountain Empire Older Citizens, Inc. at (276) 523-4202.
ALZHEIMER’S SUPPORT SERVICES

Educational materials available for caregivers at MEOC Library

PAMPHLETS

Adapting to Aging
Alzheimer’s Disease - A Guide for Families
Alzheimer’s Disease and Related Disorders: A Description of the Dementias
Alzheimer’s Disease: An Overview
Alzheimer’s Disease: Especially for Teenagers
Alzheimer’s Disease: Services You May Need
Care for Advanced Alzheimer’s Disease
Caregiving at Home
Caring for an Alzheimer’s Patient At Home
Choosing a Nursing Home for the Person with Intellectual Loss
Communicating with the Alzheimer’s Patient Especially for the Alzheimer’s Caregiver
If You Have Alzheimer’s Disease: What you Should Know, What You Can Do
If You Think Someone You Know has Alzheimer’s Disease
Is It Alzheimer’s? Warning Signs You Should Know
Legal Considerations for Alzheimer’s Patients
Memory and Aging
Newsweek: All About Alzheimer’s
Practical Considerations in the Management and Treatment of Alzheimer’s Disease
Standing By You: Family Support Groups
Steps to Selecting Activities for the Person with Alzheimer’s Disease
The Alzheimer’s Association Autopsy Assisting Network
The Younger Alzheimer’s Patient
Understanding and Living with Alzheimer’s Disease
You Are One of Us - Successful Clergy/Church Connections to Alzheimer’s Families

BOOKS

Aging - Special Issue on Family Caregiving
Alzheimer’s Disease - A Guide to Families
Alzheimer’s Disease Handbook
Caregiving at a Glance: Finger Tip Help for Families
Taking Care of People with Alzheimer’s Type Illness
Caring - A Family Guide to Managing the Alzheimer’s Patient at Home
Caring for the Caregiver: A Guide to Living with Alzheimer’s Disease
Coping and Caring: Living with Alzheimer’s Disease
Facing Alzheimer’s Failure Free Activities for the Alzheimer’s Patient: A Guidebook for Caregivers
Generations-in-Depth Views of Issues in Aging: Update on Alzheimer’s Disease Gone Without a Trace
Grandpa Doesn’t Know It’s Me
Guidelines for Dignity
Helping Grandma
Homes that Help
Living in the Labyrinth
Looking Beyond the Illness
Losing a Million Minds
Miles Away and Still Caring
My Journey into Alzheimer’s Disease
Over the River and Through the Woods - Project Handbook for Impaired Adults
Surviving Alzheimer’s
The 36-Hour Day
The Validation Breakthrough
The Vanishing Mind: A Practical Guide to Alzheimer’s Disease and other Dementias
Treatment for the Alzheimer’s Patient
Understanding Alzheimer’s Disease
Understanding Difficult Behaviors
Validation

VIDEOS

A Part of Daily Life - Alzheimer’s Caregivers
Simplify
Activities and the Home
After the Going Gets Rough
Alzheimer’s Disease ... Let’s Talk about it
Alzheimer’s What You Need to Know
Alzheimer’s: A Personal Story of Social Work
Another Home for Mom
At Home with Home Care: Part I, II, III
Before the Going Gets Rough
Caring
Dealing with Alzheimer’s: Facing Difficult Decisions
Do You Remember Love
“Grace” Videos
1. Living with Grace
2. Caregiving with Grace
3. Glens Perspective on Grace
In This Very Room
Just For The Summer
Living A Nightmare
Losing It All
Managing with Alzheimer’s Disease
Medication and Dementia
Not Alone Anymore: Caring for Someone with Alzheimer’s Disease
Phil Donahue Show
Someone I Love has Alzheimer’s Disease
Someone I Once Knew
Special Caring: Managing the Person with Alzheimer’s Disease
The Care Giver Series:
1. Meeting Daily Challenges
2. Communicating
3. Safety First
4. Managing Difficult
5. Caring for the Caregiver
What is Dementia

CASSETTE TAPES

Alzheimer’s What You Need to know
Caring for the Caregiver - Caregiving at Home, Especially for the AD Caregivers
A healthy diet and adequate exercise are ways to help ensure a long, productive life. However, the aging process can cause some normal physical changes that may have an effect on dietary intake.

According to Jan Johnston, Oklahoma State University Cooperative Extension Service gerontology specialist, “Some older individuals may see few physical changes as they age, while others may be affected greatly. While most people are in good nutritional health in their later years, some factors such as taste, smell, vision, muscle condition and teeth can have a major impact on food intake later on.”

The sense of taste and smell tend to decline in later years. As a person ages, the number of taste buds decrease. Therefore, foods may take on a different taste than when the person was younger.

Food may smell different as one grows older because the number of olfactory cells, the functional unit in smelling, decrease with age. Medication also may affect how foods taste.

These changes in taste and smell may decrease a person’s appetite for foods to such an extent that the diet becomes unbalanced.

The quality of one’s vision may also have an effect on appetite. Eyesight generally declines with age. As a result, shopping, cooking and eating may become more difficult. Problems reading the small print of recipes or the oven controls can result in decreased meal preparation.

Some older people may have difficulty swallowing food because of decreased saliva production. Saliva moistens foods and makes swallowing easier.

Tooth loss is another factor older people face. The loss of teeth makes it difficult to eat and chew foods properly. Many older adults do not adjust well to dentures, or they have dentures that don’t fit properly. This often leads to eating softer foods, which can restrict food intake and lead to an unbalanced diet.

Muscular tone and coordination, which can decrease with age, also have an effect on eating. This can cause chewing to be difficult, as well as cause food to move more slowly through the intestine.

Along with vision, one’s strength and energy also affect food intake. Food buying, carrying heavy groceries, choosing from a wide variety of available products and preparing meals may become difficult. Because getting to the store on a regular basis can be more difficult for older adults, especially if the weather is bad, it is important to keep a well-stocked pantry.

Foods to keep on hand include tuna in water, canned meats, dried beans, peanut butter, canned or frozen fruits and vegetables, dried fruits, nonfat dried milk, cheese, ready-to-eat cereals, hot cooked cereals, crackers, rice and pasta. Also keep a supply of convenience foods such as macaroni and cheese, low-sodium canned soup, pudding mixes, dry soup mixes and jelly.

Other physical factors that can lead to less food consumption include a decrease in the amount of intestinal digestive enzymes. This can result in the decreased tolerance of milk or foods that are high in fat. Also, a decreased production of stomach acid can cause

See INTAKE, on page 29B
Intake

continued from page 28B  

decreased digestion and a feeling of indigestion.

It is not always a physical problem that causes decreased food intake for the older generation. Loneliness can be a major problem for many older persons, especially for those who live and eat alone. There may be little incentive to prepare and eat a well-balanced meal. Eating is more than a source of essential vitamins and minerals. Meals also have emotional and social meaning as well.

Income plays a role in food consumption. Many older adults have to cope with less income, which often means less money available for food. This can lead to a poor, unbalanced diet. Also, some older people may downsize their living space. The new home may have inadequate space for storing and preparing foods. Money may be tight enough that it is a hardship to afford transportation to the grocery store.

“Many of the physical, emotional and social changes that occur with aging can negatively affect the appetite of older adults. While not all problems may be corrected, maintaining an interest in eating a well-balanced nutritious diet is vital,” Johnston said. “Nutritional needs don’t decrease with age, with the exception of the amount of calories needed. A healthy, well-balanced diet is the best defense an individual has for staying healthy and preventing illness.”


RECIPES

Tomato Cucumber Salad
4 Roma or vine rip toma-
toes
1 medium cucumber
2 tablespoons balsamic vinegar
1 teaspoon extra-virgin olive oil
1/4 teaspoon sugar
2 teaspoons chopped fresh basil
Freshly ground black pepper to taste
Slice tomatoes and cu-
cumber thinly and place in a medium bowl. Combine vinegar, oil and sugar. Drizzle over sliced tomatoes and cucumber. Toss; then sprinkle with chopped basil. Refrigerate until ready to serve. Serves 4. Per Serving: Calories 58, Calories from Fat 14, Total Fat 1.6 g, Cholesterol 0 mg, Sodium 12 mg, Carbohydrate 9.4 g, Fiber 1.9 g, Protein 1.6 g

Mixed Squash Casserole
1 cup carrots sliced 1/8-
in thick
4 cups yellow squash slices, 1/4 inch thick
4 cups zucchini squash slices, 1/4 inch thick
1/2 cup chopped onion
1 can (10 1/2 oz.) condensed cream of chicken soup
1/2 cup sour cream
1 teaspoon salt
1/2 teaspoon pepper
2/3 cup crumbled corn bread
2/3 cup torn or chopped dry white bread in 1/4-inch pieces

As-You-Like-It Pasta Sauté
8 oz. pasta
1/2 small red onion, chopped
1/4 cup low-fat dressing
Choose 3 of the following vegetables:
1 medium tomato, chopped
1 small zucchini, sliced
1/4 cup celery, chopped
1/4 cup carrots, sliced
1 medium pepper, chopped
1/4 cup green beans
1/2 cup broccoli, chopped
Prepare pasta according to package directions. Add chopped onion and fresh vegetables. (If preferred, steam or stir-fry vegetables for 3-5 minutes before adding to pasta.) Add salad dressing. Mix well. Serves 4.

Source: Massachusetts Department of Agricultural Resources

Cabbage and Potato Sauté
1 small bell pepper, chopped
1/2 small onion, chopped
1-2 cloves garlic, finely chopped
1 tablespoon vegetable oil
1/2 small head cabbage, green or purple, sliced thin or shredded
2 medium potatoes, cooked and chopped
Dash cayenne pepper (optional)

See RECIPES, on page 30B
seven-county area. We have employees dedicated to the goal of helping access the **free medicines** from the free programs of over 100 pharmaceutical companies. The sites for help are located at Stone Mountain Health Services, Inc., Clinch River Health Services, Inc., Junction Center for Independent Living, The Health Wagon, LENOWISCO Health District, Cumberland Plateau Health District, Southwest Virginia Community Health System at the Tazewell Community Health Clinic and at Mountain Empire Older Citizens, Inc.

If you or someone you know is struggling to pay for medications, give us a call at 1-800-252-6362. The phone call is free and it won’t cost you anything to apply. We want to hear from you soon.

**Virginia Department for the Aging’s No Wrong Door Project**
Manager Patty Samuels and MEOC Information Technology Director Mike Henson take a break from reviewing client database screens on a recent visit to MEOC by Ms. Samuels.

### Benefit

reapply. We can do all the paperwork for you.

There are seventeen (17) Pharmacy Connect sites throughout the area where you may apply for help with free medicines. Most likely, there is one in your town. For more information about the free medicines, call Mountain Empire Older Citizens at 1-800-252-6362. We are here to help you.

### Recipes

**continued from page 29B**

Pinch of salt
1 tablespoon fresh parsley, chopped or 2 teaspoons dried parsley
Sauté bell pepper, onion and garlic in oil in a skillet. Add cabbage to skillet and cook, stirring occasionally, about 3 minutes. Add pre-cooked potatoes and seasonings, stir to combine all ingredients. Cover and cook 2 more minutes. Serve hot.

Yield: 4 servings. Per serving:
- Calories 117, Total Fat 4 g, Cholesterol 0 mg, Sodium 60 mg, Total Carbohydrate 19 g, Dietary fiber 4g, Protein 3 g
  
  Options: Add grated carrots for color and flavor. Use your favorite fresh or dried herb in place of parsley like oregano, basil, thyme, or rosemary. Leftovers can be made into soup by adding chicken and vegetable broth.

**Source:** Washington Farmers’ Market Nutrition Program

**Blueberry Coffeecake**

1 cup lemon low-fat yogurt
3 tablespoons vegetable oil
2 egg whites
1/2 cup sugar
1 1/2 cups flour
1 tablespoon grated lemon peel
2 teaspoons baking powder
1/2 teaspoon baking soda
1/4 teaspoon salt
1 1/2 cups fresh or frozen blueberries (Thaw and drain frozen fruit before adding to recipe.)

Heat oven to 375 F. Spray a 9x9x2” square pan with nonfat cooking spray. Beat yogurt, oil, egg whites and sugar in a large bowl. Stir in remaining ingredients except blueberries. Carefully fold in blueberries. Spread all ingredients in pan. Bake about 35-40 minutes or until cake springs back when touched lightly in center. Cool 10 minutes. Serve warm or cool.

Options: Instead of blueberries, use raspberries or blackberries. Drizzle lemon glaze over top after baking: Mix together until smooth 2/3 cup powdered sugar and 3 to 4 teaspoons fresh lemon juice. Drizzle on cake. Yield 8 servings. Per serving: Does not include lemon glaze.Calories 227, Total Fat 6 g, Cholesterol 1 mg, Sodium 192 mg, Total Carbohydrate 38 g, Dietary Fiber 2 g, Protein 6g

**Source:** Washington Farm-
(At Left) Minnie Humphrey from the Norton Nutrition Center waits on friends at the entrance to the Grand Stand and the main stage at the Virginia/Kentucky District Fair. Pictured in the background is 2009 Fair committee chairman, Jim Manicure. When entering this area, each senior citizen received a ticket for a free lunch and one for the door prize giveaway. Even though there was no Senior Beauty Pageant this year, those in attendance were well entertained by the well-known King’s Messengers as well as several other gospel and country music groups. Right after lunch, to add to the festivities, the Merry-Go-Round was opened for all who wanted to ride.

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(At Left) Carolina Turner (L) and Margaret McAfee (R), MEOC Older Worker Program Administrative Assistant, enjoy the opportunity for a visit at the Norton Best Friend Festival. Carolina is now employed as a Respite Aide at the Appalachia WIN Center. She began work for MEOC after being enrolled in the Title V Program. After a brief training period, Carolina was hired by Family Support Services to work at the center and has now been there for two years.

(Below) Nancy Hall, longtime member of the Appalachia/Big Stone Gap Nutrition Center, enjoys Senior Citizens Day at the Norton Best Friend Festival with her sisters. Pictured Left to Right are: Nancy Hall, Faye Bush and Linda Stidham, all of Appalachia.
Coeburn WIN Center participants enjoyed the music at the fair. Pictured left to right are: Virginia Browning from Wise; Alberta Buchanan (sister of site manager Dine Mullins) Wise, Dine Mullins, Coeburn, Barb Taylor, Norton, and Peter Roberson, Coeburn. All participate at the Coeburn Center and enjoy spending time together at the center or out and about, whenever they get the chance.

Ellie Osborne and Betty King of Norton ride the carousel during Senior Day at the Virginia-Kentucky District Fair. Photo by Erica Yoon courtesy of The Kingsport Times-News.