Transforming Lives



## BRIDGES

GERIATRIC / ADULT SPECIALTY TEAM
Bimonthly Newsletter

Connecting caregivers with training and consultation for the mental health needs of older adults

January/February

2018

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FIND COMMUNITY RESOURCES

QUICKLY

# NC211.org

There are hundreds of health, human service and other helpful organizations listed for nearly any kind of need. Simply dial 2-1-1 any time of day or visit www.NC211.org to find the help you need.

### **JOIN OUR MAILING LIST**

Stay up to date on events, news and information about Trillium Health Resources and how we work to Transform Lives!

### **TECHNOLOGY SAVVY**



by Kimberly Williams, MSW, LCSW

I will be the first to admit that I am technology challenged. I have been fighting, kicking, and screaming technology in my life. I still prefer to pick up a book from the library versus reading it on kindle. However, I finally broke down and now have "Alexa" at

home who helps me with when to take the cookies out of the oven, give me the weather, and play songs. Although there is a multitude of applications with Alexa, I have yet to find or understand how to use them. How in the world do I connect Alexa with my TV or IPhone? I do not even understand all the buttons on the television remote.

Technology is advancing at lightning speed and if I do not accept and learn some of the new technology, I will be left behind. Ahhhh, there is the rub. For me, I have decided I want to age gracefully and stay in my home as long as possible. Technology here I come.

Besides allowing individuals to stay in their own homes longer, the use of technology directly effects the financial costs of chronic disease as well as the demands placed on the workforce. By 2020, the overall demand for direct care workers is projected to increase by 34%. In addition, as we know 10,000 baby boomers are turning 65 every day in the US and we are living longer, creating an increase in the need for caregivers. According to the Center for Technology and Aging, "Many technologies have the potential to simultaneously help older adults remain in their homes as long as possible and mitigate the workforce shortages and financial burdens that are inherent to long term care." The technology focus areas identified by the Center for Technology and Aging are medication optimization, remote patient monitoring, assistive technologies, disease management, cognitive Fitness and assessment, and social networking.

Let us begin with medication optimization. These technologies range from the very simple stand alone to highly sophisticated.



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The chart below provides information about stand-alone, integrated, and future technologies.

Stand Alone Technologies

A Basic pill box
Locked Dispensers
Reminder watches
Vibrating Pill Box

★ Talking Pill Bottle

APPS - many APPS are offered. To the right are just a held MedCoach Pill Monitor few. held MedCoach Pill Monitor iPharmacy Round Health

Cell Phone Alerts and reminders

Home Devices Alexa, Google Home

Ingestions sensors

✓ Drug Metabolism Checks
 Integrated/future Technologies- Advanced technology
 ✓ Logging clinician feedback

Automatic Adjustments by Clinician

Examples would be MagneTrace, SMARTTM, Health Hero, and Network's Health Buddy.

\*\*Please note the above is for information only. Trillium does not recommend or endorse any of these products.

The next newsletter will review patient monitoring. Resource: Center for Technology and Aging

that may still be in development





Join us in welcoming our newest GAST Coordinator to our team

Andrew Dickmeyer BA, QP, BHRS



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## NEW YEAR RESOLUTIONS FOR OLDER ADULTS

by Frankie Glance, Administrative Assistant

With the dawning of a new year, we all start to think about making our New Year's Resolutions. Sometimes, that is as far as it gets. Other times, we are serious about making positive

changes and resolve to do so. Seniors do not need to think that they are too old to make resolutions. Making positive changes is a good idea for all ages!

#### These **5** Resolutions are ones Seniors can benefit from:

- Make new friends and/or reconnect with old friends. Isolation and loneliness can cause multiple health problems. Talking with friends can help keep these health issues at bay. Where to meet people? The local senior center, houses of worship, clubs, continuing education courses, volunteering, and community events are all examples.
- Eat better, eat more frequently, and/or eat less. Whether you need to lose weight or gain weight, eating healthier is not difficult. Fill your diet with fresh fruits and vegetables, protein, grains, and dairy.
- Keep and/or make regular doctor appointments. Staying healthy is very important, so keeping those
  important checkups or other physical exams is key. Not feeling well? Do not delay getting a diagnosis.
  A cough could lead to pneumonia quickly, for example. Prevention is the best medicine, as they say.
- Get exercise regularly. We hear this repeatedly, right. Exercising does not necessarily mean going to
  a gym, lifting weights, and getting sweaty. There are many fun ways to get your activity levels up:
  walking with friends, shopping, swimming, riding a bike, traveling, hiking, etc. There are also many
  low-impact exercising products that can be used while you are sitting and watching your favorite TV
  program or listening to music.
- Enjoy yourself! Allow yourself to have some fun on a regular basis. Do whatever you enjoy doing: go to the movies, go on a cruise, spend time with your grandkids, get together with friends, take a walk in the park, visit museums, travel, take a train somewhere, check out the boardwalk & casinos at Atlantic City, see a Broadway show...the options are endless! The main thing is that you spend time laughing and feeling good.

Adopting the right attitude can convert a negative stress into a positive one."

- Hans Selye



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### LOSING A BEST FRIEND

by Ruthie Fredrick, BSW, QP

On December 21, 2017, my best friend of 51 years passed away. It was a catastrophic shock to me, her daughter and family. Friendship is deep and powerful and amazing, but it is hard to explain why. If you have a close friend you just know what I mean.

Sometimes society does not recognize what a big deal friendship is. Society may value family relationships over friendships. There is a weight given to your relationship with your parents or siblings or grandparents or spouse that comes from the title alone. Somehow talking about your bestie often doesn't carry the same weight, despite the fact that your relationship with that friend may have been as, if not more, important. It feels crappy when a friend dies and those around don't give you the same support and validation as if it was a family member.

When I think of my best friend I think of my go to person when life gets tough. So when that person is gone you may feel especially alone.

### SO WHAT CAN YOU DO?

First of all and most importantly, you have the right to grieve the loss of a friend in the way or time you need and deserve the space to grieve.

Secondly, try to connect with others who have lost a best friend. This may be tough because often

support groups are for the loss of family members. Try to find a support group geared toward the loss of a friend or talk to a local grief center or hospice and find out if they may offer a group to benefit you.

#### Lastly, Teresa Plane wrote:

"As people who have been blessed with the capacity to give and receive love, we are forever changed by the experience of grief in our lives. We, as human beings, do not "get over" our grief but work to reconcile ourselves to living with it. We hope eventually to find some meaning for the sad happenings to our lives, to heal and grow."

Life is not fair. Life is a series of tragic losses but we cannot lose something unless we have first had it so the magnitude of each loss becomes the measure of life's gifts.

Memories made in love can never be taken away from you. If your memories bring you laughter, let yourself smile, if your memories bring sadness let yourself cry. If your faith is important to you, express it, and remember to love yourself.





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Dear Geri,

For the past six months, I have experienced pain in my lower back and right knee. I have taken Aleve on a daily basis, but my back and knee still seem stiff and painful. I have noticed that I am staying home more because of the pain. My friends encourage me to get out, but I just do not feel like going anywhere. I am sitting a lot more, due to my knee pain. Geri do you have any suggestions for me?

Sincerely,

Painfully In Need

Dear Painfully in Need,

Pain is a friend to no man especially chronic pain. Knee and back pain bother us for various reasons, such as injuries, arthritis, and gout, to name a few. Chronic pain usually lasts for 6 months or more. When we experience chronic pain, it can cause us to be inactive, which can cause decreased strength and isolation. For some folks fighting pain is a lifelong and uphill battle. Due to you staying in more, which can fuel depression, I did some research and came up with a few suggestions.

First, I would make an appointment with my primary physician for a physical. Usually your primary doctor can help you decide which path to take, medication, physical therapy, or a referral to an orthopedic doctor.

Next, there are non-pharmacologic pain management interventions that I could suggest also. These include cognitive behavioral therapy. This therapy uses structured systemic approach to teach a person coping skills with their pain. It requires a therapist and usually takes 6 to 10 sessions. Another effective non-pharmacologic intervention is caregiver and patient education. This knowledge can enlighten the caregiver on various interventions to take, such as medications, physical therapy, or non-pharmacologic pain management.

Lastly, I would make an effort to get out at least 2 to 3 times a week. Perhaps you could let your friends know about your pain and they could visit you instead of getting out each time. There are lots of fun games, movies, and puzzles to do right in the home.

I hope this helps you and I look forward to hearing from you. Take care!

Sincerely,

Geri



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### **EFFECTIVE COMMUNICATION WITH OLDER ADULTS**

By Tamisha Vaughan, MS, QP

Caring for and having successful relationships with older adults often requires unique communication skills and strategies. Having great communication with an older adult can ensure their needs are met, concerns are noted and they can live healthy and safe. *Psychology Today* has provided five tips for successful communication with seniors.

### ❖ Tip #1: Exercise Patience and Compassion

Individuals caring for and communicating with older adults will need to exercise patience. Older adults have physical challenges, slow movements and many have forgetfulness. Caregivers can easily lose patience and become frustrated, but during these moments, try to put yourself in the senior's shoes and have empathy for the older adult. If despite your best efforts, your patience still runs thin, take a time out

from the individual if possible and return when you're in a calmer state of mind.

### Tip # 2: Ask instead of order

Seniors like to feel relevant and respected and these feelings can be validated by frequently asking questions instead of ordering when communicating. When possible offer options to promote a sense of control of the immediate environment and to demonstrate respect.

Example: Instead of: "You're wearing a sweat suit today."

Say: "Would you like to wear a sweat suit or choose your outfit?"



Ask question instead of making assumptions when it comes to your actions in relations to the older adult. For example, instead of turning on the television in the senior's room without asking, say "I'm going to turn on the television for you, okay?" If the senior protests, let them have their way if it's harmless, or explain why it's important for you to do what you need to do (in most cases for the sake of senior's health and well-being).

### Tip #4: Use "I" instead of "you" language

Older adults generally do not respond well when they feel that they are being ordered to do a task. Examples are as follows: "You have to take your medicine! You need to finish your soup!" According to *Psychology Today*, when people feel like they're being bossed around on a regular basis, they're more likely to respond with what psychologists call the "Three F's - Fight, Flight, and Freeze", leading to behavioral problems such as argument, avoidance, or stonewalling. When communicating consider using statements that begin with "I, It, We, Let's and This" statements. These statements encourage the older adult to be open to what is being asked and reduce resistance. Examples are as follows: "I will help you with your exercise. It's important to take your medicine."

### ❖ Tip #5: Offer choices whenever possible

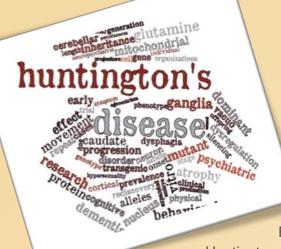
Whenever possible and appropriate, offer an older adult choices when interacting with her or him to promote a sense of independence. According to *Psychology Today*, having the ability to exercise choice can provide the older adult with a greater sense of confidence, esteem, and security, as the senior feels the power to be proactive in life.

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### **MEDICATION CORNER**

By Linda Klund, RN, BSN

Huntington's disease is a debilitating disease that causes the cell's RNA to send out a deadly protein. This protein has an effect on both the brain and the entire neuro system. The onset of this disease can happen from age 30 to 50. Because it follows family lines, genetics were researched for the cause of this awful disease.

First described in 1872 by an American Physician George
Huntington there has been very little more known until 1993 when Nancy
Wexler discovered there was a mutate gene that caused other genes in the body to
produce the deadly protein. But there is hope on the horizon. The Washington Post on 12/12/2017 carried
an article written by Amy Ellis Nutt announcing a major break-through in the treatment of Huntington's
disease.

Ionis Pharmaceuticals in Carlsbad, California funded research that was conducted by scientists at more than half a dozen locations in Europe and Canada. This team was able to develop a medication, IONIS-HTTRx. "The new drug works by delivering a small piece of genetic material that sticks to the RNA and prevents it from building proteins." The group ran three small trials and the results were very promising. It showed a reduction of the amount of deadly protein being produced and there were no side effects.

"On Monday, Ionis was awarded a \$45 million license fee from its commercial partner, Roche, which will now manage all future studies".

Therefore, what does that mean, well in 3 to 5 years we may be able to end this disease before it develops. If a person is a part of a family, where someone has died of this disease they could be tested for the gene and if they have it this medication can keep the cells from producing this deadly poison.

All this research could mean a medication that to halt the development of Alzheimer's disease and other brain disorders. It could also confirm the cause and lead to the end of other mental health illness such as schizophrenia and bipolar disorder. What changes we will be seeing in treatment of mental illness and brain diseases remain to be seen but now there is hope.



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### **ANXIETY**

By Andrew Dickmeyer BA, QP, BHRS

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Generalized Anxiety Disorder (GAD) is an Anxiety Disorder characterized by excessive, uncontrollable and often irrational worry, that is, apprehensive expectation about events or activities. This excessive worry often interferes with daily functioning of individuals. That is the textbook

definition for GAD according to Wikipedia. Let us look at the textbook definition and see if we can simplify it to understand it better.

Let us start with the anxiety by imagining riding a roller coaster, the ride begins with you being strapped in, then it starts to move, you begin your climb up to the top of a giant hill and with every few feet you hear the clank, clank of the track. Remember the feeling building up inside you, the more intense it got as you got closer to the top. As it builds up to its peak and you start on the downhill slide. The first few feet of the drop was almost unbearable as your stomach floats and you don't know if you should scream, hold on or flail your arms. Then you go down the track and finish the ride with a giant smile (most of the time). Well let us imagine that feeling that you had all the way to the top of the hill and the first few feet down the other side with no release. This is a simple example of the feeling of anxiety.

Now let us move on to the excessive part of this definition. Excessive is simple; way too much! How does every day for most of the day sound for excessive? Uncontrollable? How about trying to get out of that roller coaster as it was heading up the hill? Not going to happen once you are all strapped in, there is no going back. Moving on to the irrational worry. For no good reason on a sunny day, as your riding your roller coaster, you are worried that it will be so cold you might get hypothermia (even in the middle of the summer). Irrational means that there is no logical reason for it. Worry we have all worried about something before in our lives; money, family, career, etc... Worry is a normal part of life, but when we combine it with excessive and irrational, it becomes a problem.



Apprehensive expectation...Sounds technical but it is not. It is a fancy way of saying that someone always thinks the worst is going to happen. Remember Eeyore from Winnie the Pooh? That donkey always thought that the worst was going to happen no matter how much Pooh and Piglet tried to reassure him. Finally interfering with daily functioning. If you had a broken leg it would probably interfere with running a marathon. Daily functioning is one's ability to do what they need to do to survive on a daily basis, i.e. showering, eating, shopping for food, going to work, just to name a few.

Now we know a little bit more about GAD and what that fancy textbook definition means and how it could possibly feel. Now walk a mile in those shoes and see how you do. No amount of "calm down" or "it's going to be OK" will make a difference to those battling with GAD. So now, we have a little more understanding about GAD, and with understanding comes empathy and compassion for those that battle with mental illness.



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### SLOW COOKER SWEET POTATO SOUP

Wake up your tastebuds with this Indian-spiced soup featuring a warming mix of ginger, curry powder and cinnamon. Topped with toasted almonds and creamy nonfat Greek yogurt, it's fresh, smooth and surprisingly low in fat...



#### **INGREDIENTS**

- <sup>▲</sup> 2 onions
- ∠ 2 medium carrots
- ≜ 2 lb. sweet potatoes (about 3)
- ▲ 1 tbsp. grated fresh ginger
- ↓ 1 tbsp. mild curry powder
- <sup>★</sup> ½ Cinnamon Stick
- Kosher salt and pepper
- <sup>1</sup>/<sub>4</sub> c. Sliced almonds
- Nonfat Greek yogurt, for serving

#### PREPARATION:

- In a 5- to 6-qt slow cooker, combine the onions, carrots, potatoes, ginger, curry, cinnamon, ½ tsp salt, ¼ tsp pepper and 6 cups water.
- Cook, covered, until the vegetables are very tender, on low for 7 to 8 hours or on high for 4 to 5 hours. Using an immersion blender (or a standard blender, working in batches), purée the soup.
- Top with the almonds and dollop with the yogurt, if desired.

### **TIPS & TECHNIQUES**

Freeze the soup for up to 3 months. T haw in the refrigerator overnight. Reheat in a large saucepan, covered, over medium heat for about 15 minutes.



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### **COMMUNITY HAPPENINGS**

### **JANUARY**

### **National Holidays**

- Jan 1 New Year's Day
- → Jan 15 MLK Birthday

### **Community Events**

Jan 18 - New Year, New You Health Fair 10am-1pm; Location: Old Bertie High School Gym; For more information call 252-482-6242



### THE MANY FACES OF DEMENTIA

(Support Group Hosted by Courtyards at Berne Village )
12:30pm - 1:30pm at Courtyards at Berne Village
2701 Amhurst Blvd New Bern
Monthly on the Third Thursday
RSVP to 252-633-1779 or

aschneider@courtyardsbemevillage.com

### **FEBRUARY**

### **National Holidays**

Feb 14 - Valentines Day

#### **Observances**

→ Feb 17 - National Caregivers Day

### **Community Events**

Feb 23 - 2018 Healthy Aging Conference 9am-3pm; Location: Eastern 4-H Center 100 N. Clover Way Columbia, NC

Pre-registration is required
For more information contact Mid-East Commission



### "SENIOR CENTER WITHOUT WALLS"

Is an award-winning program of Episcopal Senior Communities offering activities, education, friendly conversation, and an assortment of classes, support groups, and presentations to seniors. Each week, seniors can access over 70 groups by phone or online, all from the comfort of home.