

# ADVISOR

The magazine of LeadingAge New York | Fall 2012

## Making a difference

*The power of collaboration*



**Then, now and thank you!**  
At Monroe Community Hospital

**Win-win-win**  
Reducing hospitalizations

# Table of Contents



## Cover Story

	<i>Making a difference</i>
15	<i>Then, now and thank you!</i>
19	<i>A partnership for learning: Changing lives</i>
19	<i>A win-win-win: Reducing hospitalizations</i>
22	<i>A program with heart</i>
21	<i>The SeniorLife Challenge</i>

## Features

6	<i>Another choice for unemployment insurance</i>
23	<i>Focus on vision for better health</i>



### Mission Statement

*To create the future of aging and continuing care services in New York State.*

Our national partner, LeadingAge, is an association of 6,000 not for profit organizations dedicated to expanding the world of possibilities for aging. Together, we advance policies, promote practices and conduct research that supports, enables and empowers people to live fully as they age.

## Departments

- 3** *Greetings*  
Playing nice in the sandbox
- 7** *Palate*  
Blended foods a dining challenge  
The simple joy of a birthday party
- 9** *Spotlight*  
Meet Loren Ranaletta
- 11** *One Voice*  
Insiders peek at the 2012 elections
- 27** *Noteworthy*  
News from members, LeadingAge  
and LeadingAge New York

**On the cover:** During the Korean War **Laura Tedrow** was Assistant Chief of Staff Operations at the Ships Movement Desk, MSTs, US NAVY in Seattle. She was one of the people keeping track of the shipment of men and equipment to Korea.

## LeadingAge New York Executive Committee

**Loren Ranaletta, Chair**  
Episcopal SeniorLife Communities

**Todd Spring, Secretary**  
Monroe Community Hospital

**Matt Anderson, Treasurer**  
The Osborn

**Michael Fassler**  
**Immediate Past Chair**  
CenterLight Health System

**Stuart Kaplan**  
**Member at Large**  
Selfhelp Community Services, Inc.

**Jane Shukitis**  
**Member at Large**  
Unity Health System

**Adviser** is published quarterly by  
**LeadingAge New York**

13 British American Blvd., Suite 2  
Latham, NY 12110-1431  
leadingageny.org  
P 518.867.8383 F 518.867.8384

**Kristen Myers**, editor  
kmyers@leadingageny.org

**Kathie Kane**, designer

**Noreen Hiltsley Mosher**,  
sponsorship and advertising  
nhiltsley@leadingageny.org

The acceptance of a product, service or company as an advertiser or manuscript for publication does not imply endorsement or approval of the product, service, company or opinion.

Founded in 1961, LeadingAge New York represents more than 500 not-for-profit, public and mission-driven senior care providers, including nursing homes, senior housing, adult care facilities, continuing care retirement communities, assisted living, home care and community services providers which serve approximately 500,000 people across New York each year.

MEMBER



## Advertise with LeadingAge New York...here's what our partners say!

*“HealthPRO Rehab is proud to support LeadingAge New York. The opportunity to partner with this amazing association to meet the needs of the extraordinary membership has been invaluable. Working closely with LeadingAge New York has opened the doors to meet several new potential business partners, while also enabling us to serve our existing clients in unique ways as well. HealthPRO Rehab and LeadingAge NY share the common goal of always looking for innovative ways to support LTC membership and the communities they serve. We are grateful for the opportunity.”*

– Michele Saunders, RPT  
Vice President, Business Development  
(Northeast Region)



## Playing nice in the sandbox isn't just for kids.

Mission-driven providers of care, service and housing for seniors understand the value of cooperation and collaboration. Historically, non-profits have been the linchpin for providing social service, even in times of deep economic trouble - and today it is no different. Through cooperation comes increased efficiency, better quality of life and more accessible services for New York's seniors and disabled.

This issue of LeadingAge New York *Adviser* is filled with stories about the value that comes from working together. With incentives and penalties aimed at avoiding hospital readmissions, in *Win-Win-Win: Reducing Hospitalization*, see how partnerships in different areas of the state have been developed to avoid unnecessary hospitalizations and protect older and disabled New Yorkers. These are great examples of how cooperation can protect both the bottom-line and the mission.

Creating interest in and sensitivity toward older Americans among the emerging workforce will be critical as the number of older New Yorkers continues to grow exponentially. In the story, *A Partnership for Learning: Changing Lives*, a unique service-learning partnership in the Westchester County area combines local higher educational entities, social services agencies and senior providers to create a unique program that educates and empowers college students AND seniors.

Keeping seniors healthy and in their homes as long as possible is the focus of two stories, *Home is Where the Heart Is* and *The SeniorLife Challenge*. Outreach can have more impact by partnering efforts with other local service providers and also going to the places where seniors gather and not expecting them to come to you.

*“Through cooperation there comes increased efficiency, better quality of life and more accessible services to New York's seniors and disabled.” – Jim Clyne*

Poor or low vision can cause a host of issues affecting a senior's ability to remain independent. In the story, *Focus on Vision for Better Health and Well-Being*, ideas and strategies are outlined to help care givers, physicians and others better serve those affected.

In honor of veterans as we approach Veterans Day, *Then, Now and Thank You!* graphically illustrates

a special partnership between a gifted photographer in Rochester and Monroe Community Hospital to pay special tribute to their resident veterans.

Also in this issue, meet LeadingAge New York's new Chairman of the Board, Loren Ranaletta in *Spotlight*. Get a handle on key issues and races during the upcoming elections in the *One Voice* section. Find new ideas for providing a top-notch dining experience for those you serve in the *Palate* section and discover another option for unemployment insurance. Learn about the latest happening among peers, LeadingAge New York and LeadingAge in the *Noteworthy* section.

All of these stories remind us that together anything is possible.

A handwritten signature in black ink, appearing to read 'James W. Clyne Jr.' with a stylized flourish at the end.

James W. Clyne Jr.  
President and CEO

**Sharpen** your business model in an evolving world of home care in New York State featuring:

FASTracker – benchmark your organization's key figures against your peers

CHHA Episodic Payment Modeler  
a revenue forecasting tool

**FREE to members**

**LeadingAge™**  
New York

*Join today and see how your organization measures up!*

**Contact Kristen Myers at (518) 867-8383 or, [kmyers@leadingagency.org](mailto:kmyers@leadingagency.org)**

Advertorial

**What if they looked at your current compliance, identified areas of concern, told you how you could fix them and strengthened your teams' confidence and knowledge around survey issues?**

*Well, that won't be the case. But LeadingAge New York ProCare offers something even better.*

LeadingAge New York has contracted with a former DOH surveyor/team leader who is certified as a Quality Indicator Survey (QIS) surveyor and able to provide your facility with the training and expertise gained through many years with the Department of Health. The QIS process has been used in more than 50 percent of New York state facilities and will be fully integrated statewide, replacing the traditional survey within two years. Our LeadingAge New York ProCare consultant will provide you with a two-day review including:

- Facility tour
- Resident, family and staff interviews
- Meal observation
- Environmental observations
- Staff training overview of the QIS process
- Analysis of data/responses that might suggest areas of vulnerability
- Selected review of Stage II care areas
- Preparation in responding to surveyor questions
- Insight into how to interpret what is happening during the survey

Now is the time to improve the quality of life and care at your nursing home. Avoid fines and become fully prepared for your next DOH survey.

Contact Elliott Frost, director of ProCare, [efrost@leadingagency.org](mailto:efrost@leadingagency.org), 518.867.8832, for additional information and to discuss this significant consulting opportunity.

**LeadingAge™**  
New York **PROCARE™**  
*Providing the solutions you need...for the results you want.*

# COOL SeniorCARE INSURANCE PROGRAM

## INSURANCE MADE SIMPLE

*784 Troy Schenectady Road, Latham, NY 12110*

*(518) 783-2665*

*[www.coolins.com](http://www.coolins.com)*



## LeadingAge New York ProCare<sup>SM</sup>

A trained pair of expert eyes can detect problems that might be overlooked by staff. While no one can guarantee you a deficiency-free survey, our findings allow clients to take the lead in addressing issues proactively. As a result, their chances of being cited in those areas are significantly minimized.

*Professional. Proficient. Proactive. ProCare.*

*Providing the solutions you need...for the results you want.*

**Elliott Frost, Director of ProCare**  
[efrost@leadingageny.org](mailto:efrost@leadingageny.org)  
D 518.867-8383 / D 518.867-8832  
F 518.867-8384 / C 518.441-8761

# Feature

## Another choice for unemployment insurance

New York tells employers they'll have lower unemployment insurance (UI) interest assessment surcharge...leaves out the part where employers are still paying for the state's insolvent UI trust fund.

In December 2007 when the Great Recession officially began, it's doubtful that anyone could have predicted how quickly New York's unemployment insurance (UI) trust fund would become insolvent. But, a mere 24 months later, in January 2009, the state began borrowing heavily from the federal government to cover the increasingly high cost of unemployment benefits being paid throughout the state.

Now, more than \$4 billion in debt is being leveraged on employers as interest payments once again come due.


As required by law, all employers within the state UI system will be required to pay a portion of the interest by way of an "Interest Assessment Surcharge" (IAS) that New York began charging last year. And, although the principal balance won't come due for some time still, employers who remain within the state UI system will have to pay the surcharge- based on their total taxable wages of Oct.1, 2010 to Sept. 30, 2011 multiplied by the IAS rate of 0.015 percent- no later than 30 days after the date of their bill.

While the surcharge will be capped at \$12.75 per employee, the increase will result in higher overall unemployment costs.

For nonprofit agencies still in the state system, there are other options, such as leaving the state to join a Trust, like LeadingAge NY Services' endorsed vendor, the [Unemployment Services Trust](#) (UST), that can help save more money and gain greater predictive control over yearly budgeting.

In fact, New York nonprofits that leave the state system and join UST have saved an average of \$12,465 a year.

To learn more about your opt out alternatives, visit <http://www.chooseUST.org/501c3-unemployment-alternatives/> or listen to the UST webinar at <http://www.chooseUST.org/webinars>.

For all questions about how the surcharge will affect your nonprofit if it remains in the state UI system, call the Employer Accounts Adjustment Section of the UI Division at (888) 899-8810. 

We do the  
**work,**  
you get the  
**benefits...**

That's our  
**business.**

*LeadingAge*  
New York *Services Inc.*



- ✓ **Insurance Products**
- ✓ **Energy Consulting Services**
- ✓ **Therapy Management Services**
- ✓ **Workers' Compensation**
- ✓ **Pension Plans and 401k**

At LeadingAge New York Services Inc., we research and compare products and services the way you would yourself if you had the time, and then we pass the savings on to you. We specialize in providing high-quality, low-cost insurance and consulting services to long term care organizations.

Call today and see how we can save you money and make your job easier: 518.867.8383.

*LeadingAge*  
New York *Services Inc.*

13 British American Blvd., Suite 2, Latham, NY 12110-1431  
P 518.867.8383 • F 518.867.8384 • [www.leadingageny.org](http://www.leadingageny.org)

## Blended foods a dining challenge At Our Lady of Consolation

By Arthur Bretton

A new set of eyes from outside nursing rehabilitation and a clear sense of “this is what I would want” are two important factors that can lead to positive changes in dining culture.

“My first concern was with the amount of blended food that is needed each day and the way it is typically presented,” said Arthur Bretton, director of culinary

services, new to Our Lady of Consolation in West Islip. “Being new to the field, out of curiosity, I asked our chefs if they had tasted the blended meal and they looked at me like I had two heads. Then I asked them if their grandparents or parents were here would they expect their loved ones to eat the meal the way it is prepared and presented? Again they just stood there in amazement as though I was speaking in a foreign language. When blended foods become necessary, it is often viewed as a medical need and not part of the dining experience.

“These simple questions and a new vision prompted staff to start looking at how to make the blended meals look more presentable and, consequently, palatable. We examined how we were holding the foods and realized that the foods were losing their nutritional value because we were holding them in the steamer. We changed that and then started to look at new more flavorful recipes. I looked for products that we

could use in place of those currently being used, keeping in mind the cost in order to maintain the bottom line. We all know that in lean economic times cost is a huge driver for decision-making,” Bretton said.

“Next, we looked at the utensils we were using to serve to see if there were options to make the plate more appetizing to the residents. In the end we purchased triangular, rectangular and diamond shaped scoops that help give the plate some dimension and substance,” he added.

“We set up a cooking demo with one of the vendors of these products and had our cooks, dietitians and speech language pathologists attend so we could have more participation as a unit and everyone would know what the culinary services department was looking to do

(See Blended foods on page 9)



*“After making it a more pleasant dining experience for those requiring blended foods, we looked for other things that we could do to make dining as home-like and interactive as possible.”*

Arthur Bretton  
Director of Culinary Services  
Our Lady of Consolation

## Blended foods

(continued from page 7)

with these types of meals.

“After making it a more pleasant dining experience for those requiring blended foods, we looked for other things that we could do to make dining as home-like and interactive as possible. In October we will be introducing an ‘induction system’ for the communities so that the meals will be sent up to each community and one employee, called a culinary ambassador, will serve the meal while the certified nursing assistants will serve the residents their beverages, deserts, etc.

“This new system will give also give us the opportunity to actually do some breakfast specials to order on the units, providing the residents a wider variety of foods. We are hoping that this will encourage the residents to eat their meals so we can look at decreasing the amounts of supplements we are now using. I also plan on featuring a chef for the day giving a new dimension the whole dining experience.

“In the meantime we are meeting with the resident counsel team to get them involved in picking their own dinnerware, utensils, etc. We have begun to change our menu selections to give variety and stimulate appetites. We have also been able to hire a few new chefs that are certified in culinary and pastry cuisine to really enhance the quality and variety of the meals.

“We make rounds to the communities and ask the residents how their meals are and listen to them and try to immediately apply their suggestions to show them that they are at the center of what we do here at Our Lady of Consolation. We are determined to make our residents stay here as enjoyable as we can – and better meals and a better dining experience are definitely a key part of it.” 🌱



## The simple joy of a birthday party At Park Ridge Living Center

The joy and excitement of your birthday as your special day never fades. Last year the Wegman Family Cottages of Park Ridge Living Center began celebrating each elder's birthday. Their birthday is truly their special day. Each elder is given the opportunity to choose their favorite meal, even if it's not on the menu. Some of their favorites are shrimp scampi, steak, and chicken Caesar salad, to name a few. During the birthday party, elders and staff take part in this very special meal and celebration.

Each cottage adds its own flare to the occasion by decorating and playing music to create the ambiance of a special birthday party. Elders really enjoy having their special day recognized by their cottage family.

Some of the reactions from elders indicate they have a great time, love the decorations, love the food and think it is a nice event because many don't have family in the area. It is an idea that brings simple joy to elders and the staff as evidenced by the smiles and happiness radiating from all. 🌱



## Meet Loren J. Ranaletta

President and CEO, Episcopal SeniorLife Communities,  
and new Chairman of the LeadingAge New York  
Board of Directors



*I feel strongly that neighborhood-based services and housing are key parts of the long-term solution for our industry.*

### Why are you in this field? What is your motivation?

Growing up I loved math and science and was a Biochemistry/Pre-Med Major in college. I “fell” into hospital administration/long term care right out of college when I got my first job and I never looked back. After grad school (in 1981), I focused on aging services and have had a great career ever since. I marvel at the wisdom our senior citizens are so eager and willing to share.

### Did you have a role model or mentor in your life? If so, who was it and how did that relationship help shape you and your career?

I never had a mentor, but learned readily from other professionals, i.e. Dr. T. Franklin Williams, former Medical Director at Monroe Community Hospital and Director of The National Institute of Aging, and became good friends with Rockwood Jenkins, retired administrator of The Episcopal Church Home, my immediate predecessor.

### What do you think may be the greatest opportunity for your business over the next five years?

Developing neighborhood-based housing for the middle class and establishing outreach centers with community partners focusing on fitness, nutrition and socialization.

### If you had the ability, what key element(s) of the long term care system would you change?

Long term care in New York State is structured as a medical model. Services are prescriptive, over-regulated, and not consumer oriented. The wealthy have the Continuing Care

Retirement Community - CCRC model and can “buy” what they need and want.

The middle class often spend down to qualify for Medicaid services and should have

affordable services. I feel strongly that neighborhood-based services and housing are key parts of the long-term solution for our industry.

*...I can help bring my colleagues from divergent parts of our industry together to work for our common objectives.*

### What do you think is the greatest strength you bring to your new role as Chairman of the Board of LeadingAge New York?

I am organized, diligent and enjoy helping people and systems develop ways to improve. I think practically and strategically and attempt to identify clear achievable next steps. I am motivated to learn and have a strong desire to shape public policy for aging services in New York State. Additionally, I think I can help bring my colleagues from divergent parts of our industry together to work for our common objectives.

(See Loren Ranaletta on page 10)

# Loren Ranaletta

(continued from page 9)

## What do you think will be different, if anything, about your role going into the future?

Our organization will move our services from a medical model (nursing home based) to a social model (neighborhood-based services). My personal time will be spent coaching, mentoring and developing the next generation of aging services leaders.

## On a more personal note, what makes life fun?


I am an avid golfer, enjoy sporting events and traveling. I have three children, ages 36, 32 and 27) as well as three young grandchildren, ages one, four and six who live in North Carolina. I have been married for 38 years to my high school sweetheart, Janet.

## Is there anything that you wish you could do with your life but haven't yet done? Will it happen?

I work hard, play frequently and enjoy my family, my work and my community activities. "Life is good." "Adventures" happen all the time, nothing personally or professional has been put off to the future.

## Is there anything else you would like to share?

Only make new mistakes.

*Founded in 1868 through the generosity of the local Episcopal community, the original Episcopal Church Home has grown to provide a full range of highly regarded, not-for-profit, residential service for seniors known as Episcopal SeniorLife Communities. Communities include The Episcopal Church Home, The Center for Rehabilitation, River Edge Manor, Brentland Woods, and Seabury Woods.* 



Loren Ranaletta at Episcopal SeniorLife Communities



**HealthPRO<sup>®</sup>**  
REHABILITATION

- Creates a guaranteed positive impact to the bottom line
- Delivers exceptional customer service & clinical outcomes
- Offers flexible in house therapy partnership and outsourced models
- Enhances reimbursement and compliance
- Includes value-added MDS/Nurse Consulting
- Has 10+ years experience in NYS with a proven track record:
  - Average 25% increase in rehab revenue
  - Average 20% decrease in per unit therapy costs

[www.healthpro-rehab.com](http://www.healthpro-rehab.com)  
860.480.5369



*It's critical that all legislators who will serve in next Legislature understand the issues of importance to your members' institutions and to LeadingAge New York, and recognize the huge contributions your organizations make to your local communities and to the quality of life for the frail elderly and disabled. – Bob/Steve*

## Insiders peek at the 2012 elections

A conversation with political insiders Steve Greenberg and Bob Bellafore

*Ami Schnauber, director of government relations, LeadingAge New York*

As you read this, we are just over a month away from Election Day, a fact that's hard to miss with all the campaign ads on TV and the signs adorning lawns and roadways. The election season leads some to feel jaded about the process but others are energized about Democracy in action.

But however you feel about it, much is at stake for long term care providers and it's critically important that we are attentive and engaged during the campaign season. Given the state's fiscal situation, we all know 2013 will be another wild year in Albany. All 213 seats in the state Senate and Assembly are up for grabs in November and 22 veteran legislators are retiring. There is the potential that we could lose some of our strongest advocates and gain legislators that are intent on making historic cuts to Medicaid and Medicare, devastating care and services for our frail elderly and disabled.

I sat down with YNN's political insiders Bob Bellafore and Steve Greenberg to get their insights and predictions on this year's election season and learn how you can get engaged and why it's important that you do.

*Ami: How does a presidential election change elections, both in terms of issues as well as turnout?*

**Bob/Steve:** Turnout is always highest in a presidential election year. Historically in New York, presidential election turnout benefits Democrats more than Republicans. And in legislative elections, particularly those for Congressional seats, the issues being debated nationally in a presidential election will often become key issues in those races.

*Ami: Two years ago, Republicans won more House seats in New York than in any other state, as the GOP retook the House majority. What's the outlook for Congressional races in New York in 2012?*

**Bob/Steve:** It's important to remember that two years ago, Republicans actually won back several New York seats that had traditionally been held by Republicans but were picked up by Democrats in Obama's 2008 landslide victory. Nine of the House seats in New York are among Roll Call's top 75 most competitive House races nationally.

If the Democrats are to have any chance of taking back the House majority, they will need to win a few of these New York seats. That's why both parties' congressional campaign committees are very active in New York this fall. Interestingly, three of those nine races are rematches of the 2010 election.

With more than a month to go until Election Day, we expect most of those nine races to be tightly contested. If you live in those districts, don't watch TV or get your mail if you don't like political propaganda.

*Ami: In May 2011 in Western New York, Rep. Kathy Hochul won a special election, largely on her opposition to the Ryan budget plan. What is the impact of the selection of Paul Ryan as the Republican Vice Presidential candidate on New York Congressional races?*

**Bob/Steve:** That's very much a developing issue in many of these campaigns and one we'll be watching very closely. There's no question that the Medicare debate will be

(See insiders peek on page 12)

## Insiders peek (continued from page 11)

prominent in many, if not all, of the contested New York Congressional campaigns. The Ryan plan would have been an issue anyway, but it's only gotten elevated with Ryan's position on the GOP ticket. Both parties will be trying to convince seniors that they are the ones who are right on Medicare and that the other side is wrong.

*Ami: Legislators are campaigning in newly drawn districts this year. How do you see this affecting this year's election and the make-up of the Assembly, Senate, and the New York Congressional delegation?*

**Bob/Steve:** The first one is easy. Outside of a political cataclysm never before seen in American politics, it's safe to say that the Democrats will retain control of the 150-seat Assembly after this election. The only question is whether Democrats will continue to have more than 100 seats for a veto-proof majority or whether the Republicans will pick up a handful of seats.

The Senate is more complicated. Republicans now hold a 33-29 majority. They have out-fundraised the Democrats. And they drew the district lines. Both of these factors give them an advantage.

On the other hand, Democrats generally benefit from higher turnout in a presidential year. And New York has twice as many registered Democrats as Republicans.

There are 5-10 key races across the state that will determine which party has more seats in the Senate.

But there's a wrinkle. There are currently four "independent" Democrats who have not yet declared whether they would vote with the Republicans or with Democrats next year. It's quite possible that their decision could swing the balance of power in the Senate – having a drastic impact on the direction of state government.

On the Congressional side, the current makeup of the New York delegation is 21 Democrats and eight Republicans. As a result of reapportionment, New York will have 27 seats moving forward. The new lines eliminated one Democratic seat and one Republican seat. Of those nine competitive seats, five currently are held by Republicans and four by Democrats.

It is impossible to predict this far from Election Day – with so much more campaigning still to come – how they will turn out. So like good pundits we will say: anything can happen! It's entirely possible the Democrats pick up a few seats, the Republicans pick up a few seats, or they just sort of trade seats and the balance of power remains basically unchanged.

*Ami: How can people get beyond the rhetoric of campaigns and effectively engage in the political elections?*

**Bob/Steve:** We feel very strongly that voters should be as informed as possible. If you have an interest in a particular issue, we feel you should drill down as much as

(See insiders peek on page 13)



"Steve & Bob on the set of YNN's Capital Tonight Insiders, where they appear regularly, with Capital Tonight host Liz Benjamin."

## Insiders peek (continued from page 12)

possible into a candidate's record on that issue. Your members have resources at their disposal, including the opportunity to interact directly with candidates as well as lean on LeadingAge NY for insightful information. We'd encourage your members to take advantage of those resources and be unafraid to ask their candidates the hard questions and expect real answers and not just press talking points.

*Ami: Why does citizen participation in elections matter?*


**Bob/Steve:** The old cliché that every vote counts is true. Just ask President Al Gore. But seriously, two New York Congressional races in 2010 were decided by less than half a percentage point of the votes cast. Roughly speaking, if just one more person per election district in those races had come out and voted for the loser, that loser would have become the winner.

*Ami: Even though the balance of power in the Assembly is unlikely to change, what is the importance of engaging with Assembly candidates during the campaign season?*

**Bob/Steve:** It's critical that all legislators who will serve in next Legislature understand the issues of importance to your members' institutions and to LeadingAge New York, and recognize the huge contributions your organizations make to your local communities and to the quality of life for the frail elderly and disabled. Your members provide needed jobs and critical caring services in their communities. But it's up to your members and you to make sure legislators know it.

*Ami: Any parting thoughts on this year's elections?*

**Bob/Steve:** We have two. In the words of the great Yogi Berra, it ain't over 'till it's over. And two, be sure to vote.

*Steve Greenberg spent more than 20 years working in government and politics in New York and for the last seven years has been political pollster for Siena College. Bob Bellafore is a former political reporter who served as Gov. George Pataki's press secretary and deputy chief of staff. Together they serve as communications consultants for LeadingAge New York.* 



# NEW YORK NIGHT OUT!

Join LeadingAge New York for drinks and refreshments on  
**October 23 from 5:30-7pm at**  
**Katie Mullen's Irish Restaurant and Bar**  
**15th Street Mall at 1150 Court Place**  
**Denver, CO**  
*(located in the Sheraton Hotel)*

*Do you have the luck of the Irish?  
Drop off your business card for a chance  
to win a wee bit of gold!*

**LeadingAge™**  
**New York**

# VALUE FIRST

## Making it all add up

CHOICES → SOLUTIONS → SAVINGS

### A practical approach to purchasing:

- Nationally negotiated pricing
- Expansive portfolio of supply vendors
- Free benefit to our members
- Free cost analysis
- Increased owner strength by earning ownership benefits that help keep your state association working for you.



Contact Jared Schei at 651.603.3505  
jschei@valuefirstonline.com  
or visit [www.valuefirstonline.com](http://www.valuefirstonline.com)

## When you succeed, we succeed.

*LeadingAge*<sup>™</sup>  
New York



**Michael Carroll** at Monroe Community Hospital, 7 July 2011 and right: Standing on an Armored Personnel Carrier in Vietnam about 1967 (copied from Michael's collection). He served in the US Military Assistant's Command, Vietnam (MACV) under command of General Creighton Abrams. He received the Army Commendation Medal for Heroism under Fire.

Although Monroe Community Hospital (MCH) is not directly affiliated with the Department of Veterans Affairs or any veteran service agency, more than 70 veterans, representing all military branches, live there. Resident veterans have served in both wartime and peacetime, ranging from World War II through Desert Storm. "Given that we're not formally affiliated with the VA, we were somewhat surprised to learn that nearly 15 percent of our residents served in the armed forces at one time or another," said Todd Spring, MCH executive director.

For the past several years, MCH has been honoring all the veterans living on premises with an annual recognition event. All of the veterans and their families are invited to these special programs, which feature speakers, entertainment and a special tribute video that features photographs from residents' military service. This year, the veteran's recognition event was a special outdoor concert in the amphitheater in Central Park at MCH held on August 15th and featured the Prime Time Brass Band.

John Retallack, a retired professor of photography at the Rochester Institute of Technology, has been volunteering at MCH for the past decade and has been taking portraits of

residents at MCH. He takes professional portraits of our residents that are displayed in our facility, and copies are donated to the residents' families. As a military veteran, John was inspired by the veteran recognition programs at MCH and began taking photos of some residents who served in the military. He would take their photo and ask them to hold a photograph or other item from their time in the Armed Forces. This evolved into an ongoing project over the past two years, and John has now created dozens of portraits of MCH resident veterans. The photos have been displayed in the art gallery at MCH, and exhibits are updated as new photos are added.

The portraits are visually stunning and reveal the true personalities of the residents pictured. The photographs of the resident veterans, many with disabilities, show deep respect for the individuals and for their contributions to our country. The photos are a source of pride for the residents and help other residents, staff and visitors learn about the lives of these individuals. Some residents have

(See then, now and thank you on page 18)

# Then, now and thank you!

*A special veteran recognition program at Monroe Community Hospital*



Sergeant **Gilbert Herrick** served during WWII in North Africa with the 443rd Antiaircraft Artillery Automatic Weapons Battalion. He is a resident of Monroe Community Hospital and recently celebrated his 100th birthday. The medals are Purple Heart, Good Conduct, Marksmen Weapons Qualification, North African Campaign and WWII Victory Medal.



**Mary Jane Garner-Marton:** While serving as a dietician in the US Army Medical Corps aboard the hospital ship Emily H.M. Weder she participated in the evacuation of the wounded from Northern France after D-Day.


## The veterans of Monroe Community Hospital

Essay by John W. Retallack

*The little photos tell the story. They were taken years ago when the subjects were young, when they were in service. These are veterans. By their service they had a small part in securing our way of life. None of them were generals. They were people who got their hands dirty, they did their duty. At that time there was no real choice; if you didn't volunteer you were drafted. Later they were mothers and fathers, aunts and uncles. Now near the end of their lives they are residents of Monroe Community Hospital and are cared for by the system they helped preserve.*

*Each photograph shown here (and many more on the walls at MCH) was taken at some location around the hospital and was chosen for expression and attitude. I photograph in a typically commercial way with a digital camera and electronic flash. I have help from hospital staff members in locating the veterans and getting photo permission. They or their family provide the medals and/or snapshots from their service.*

*Photography of people is my specialty; it is what I do that I can be proud of. My first career was in New York City making photographs for advertising. Later I taught commercial photography at Rochester Institute of Technology. Now retired, I still freelance doing photography for businesses and individuals and exhibit in galleries. This is my volunteer work at Monroe Community Hospital, my contribution. The veteran's exhibit is my latest project.*

*Why photograph veterans? They are significant. My dad was a veteran. I am a veteran. Most importantly, it is a worthwhile activity. I have exhibited these images in galleries in and around Monroe County, including the MCH in a gallery off the first floor main hallway and at the Miner Gallery in the University of Rochester Medical Center.* 



**Robert Koski**  
served in the US  
Army Military  
Police during the  
Vietnam War.

**Thaddeus Obark**  
at Monroe Community  
Hospital, April 9<sup>th</sup>,  
2011 and, in the small  
photo taken in 1942,  
second from the  
right, bottom row.  
He and his US Army  
Air Force Crewmates  
flew out of Torretto  
Airfield, Italy in a B-24  
Liberator Bomber  
named Umbriago.  
They attacked enemy  
of oil refineries,  
storage plants, aircraft factories, heavy industry and targets  
of opportunity in France, Germany, Austria Czechoslovakia,  
Hungary, Romania and Yugoslavia.



**Rose DeRosa:**  
Joined the Navy  
as a nurse and was  
stationed at St. Albans  
Hospital in New York  
City during WWII.

## Then, now and thank you! (continued from page 15)

earned the Purple Heart; some liberated concentration camps and participated in the crucial invasions that liberated Europe during World War II.

The photos provide a unique insight into the lives and community contributions of our residents. "These photos have not only proved to be a wonderful way for our organization to say 'thank you' to our resident veterans, they have helped many regain a sense of pride and accomplishment in their lives and from an organizational standpoint, the photos serve as a very visual reaffirmation of the importance of our mission to treat all those we serve with dignity and respect," Spring said.

The popularity of John's portraits along with the annual veteran's

recognition events led MCH to establish a Veterans Tribute Room. Located near the Hope Building entrance lobby to the facility, this room includes custom displays recognizing all the residents and staff who have served in the U.S. Armed Forces. "We've had a lot of different exhibits on display in our gallery, but none has generated more interest, discussion and comments than our veterans display," Spring said.

The project was funded by the local VFW Council. A ribbon-cutting



ceremony was held in May and was attended by elected officials, VFW leaders from throughout the state, as well as MCH resident veterans. The room includes a custom mural, furniture painted in patriotic colors, medallions representing the various branches of the military, and a television monitor featuring photos of all the veterans at MCH. In addition there is a display case and a large collage featuring military items donated by the families and friends of veterans from MCH. 🇺🇸



Do you need a **JOB?**  
Are you looking to fill a **JOB?**  
**JOB MART** is your tool!

For more information about jobs and job postings, go to [leadingagency.org](http://leadingagency.org), click on **Products and Services**, select JobMart and it will take you right to the listings.

# A partnership for learning: Changing lives

The desire to learn new things doesn't end with retirement and it certainly shouldn't end in a long term care setting. Seniors want to learn, they want to be able to have relevant conversations with younger family members and keep in touch - even if it means learning new technologies. The key is providing technology and software that will work for each individual's physical and cognitive ability level and also providing the necessary mentoring and support to lessen fear of the unknown and promote success.

The Gerontechnology Program, established in 2005, seeks to support life-long learning and successful adaptation to technology among seniors, while fostering an understanding of gerontechnology among future leaders. Students enrolled in classes at PACE University and other local educational institutions are provided with training through a service-learning component and on theory behind adaptive technology. Students experience aging by performing tasks with their senses, dexterity and mobility impaired. After undergoing additional specialized training to prepare them to teach technology to seniors, they are paired with residents living in area skilled nursing, assisted living and senior housing settings. Students

typically teach seniors to use cognitive enhancement applications and assistive technologies.

This program is different because it is more than a mentoring or computer skills training program. "The difference is the research behind it," said founding member Jean Coppola, PhD. The older adults and students are both given pre and post tests to measure change as a result of the training and interaction. Not only do students teach seniors how to use the technology, they create or adapt where possible, the applications to help give seniors better access and experience with the technology. Every participant has a different preference, some prefer a touch-screen experience and others a keyboard and mouse. Students find that being able to cater to user preferences is a primary factor in creating comfort along with ease of use. A partnership established with a touch screen computer manufacturer has provided access to more touch screen computers for the program and sites can purchase them at a reduced rate following the training program.

The first program site was at United Hebrew of New Rochelle, one of the partners in this endeavor. Students in two

sections of Intergenerational Computing taught Internet technology to seniors.

The program then received a Thinkfinity grant from Verizon for \$10,000 and was able to buy iPads, marking a pivotal point. According to Dr. Coppola, "the program exploded from that point." While the first grant was important in launching the project, the connection with the local DSS was essential in spreading the word. Staff is constantly out in the community meeting people and talking about the program. "It grew tentacles from that point," said Professor Barbara Thomas.

Since inception, educational partnerships have been established at more than a dozen sites around Westchester including: The Wartburg, Cerebral Palsy of Westchester, My Second Home, Tarrytown Senior Center, The Osborn, Andrus on the Hudson, as well as in New York City, Queens, and Brooklyn.

The program is a labor of love for a dedicated group of volunteer researchers representing area educational, senior service and economic development organizations. The research team includes, Jean Coppola, PACE University; Barbara Thomas, Westchester Community College; Janna Heyman, Fordham University; Linda

(continued on page 20)




## A partnership

(continued from page 19)

Forman, United Hebrew and Collette Phipps, Westchester Department of Senior Programs and Services. According to team members, it's really a team effort, very collaborative and supportive. Everyone volunteers their time above and beyond their "real" jobs and the overwhelming support of the collaboration fuels it.

In the best case scenario a really good idea leads to replication and sustainability. Outreach has increased to spread the word and develop support. Team members have conducted webinars and lunch and learn events and have given presentations at a many conferences resulting in, among other accolades, a feature on an upcoming senior television network and a national award from Met Life.

As word of this concept has spread, donations of computer equipment have increased, particularly through the families and friends of student and senior participants. As a result of participation, some students have even developed award winning apps designed to provide seniors with limited motor skills better access to technology.

Most of the seniors participating are 80 and older and as a result of the partnership have learned to love Skype, photo sharing and searching the Internet. They have found new ground for conversation and have taken a big step across the generation gap with their children, grandchildren and great-grandchildren. One senior commented, "This has changed my life. I didn't think I could learn this but once I did, I can't live without it!" 

## A win-win-win: Reducing hospitalizations

By Alyssa Lovelace, policy analyst in cooperation with Dan Heim, vice president for public policy, *LeadingAge New York*

As advocates and providers for aging and disabled New Yorkers, LeadingAge New York and its members strive to keep those we serve healthy, safe and comfortable. Avoiding unnecessary hospitalizations is a great example of an opportunity for providers to implement innovative programs and collaborate with other organizations to enhance the quality of life of residents and patients, while saving money.

Preventing avoidable hospitalizations is a growing focus of payers, providers and regulators, with Medicare and Medicaid payment policies moving towards incentives and penalties aimed at addressing the issue. According to New York's Medicaid Redesign Team's multi-year action report, *A Plan to Transform the Empire State's Medicaid Program*, New York ranks 50<sup>th</sup> among all states in avoidable hospital use and costs. Avoiding unnecessary hospitalizations is also a quality of care and quality of life issue for consumers and their families. Transitions between long term care settings and hospitals can create significant disruption and risk to the consumer.

To avoid unnecessary hospitalizations and protect older and disabled New Yorkers, we must ask ourselves: what is it that we do best as advocates and providers to ensure that those we serve are not hospitalized when they don't need to be? LeadingAge New York members are asking themselves this very question, and have come up with ways to keep seniors out of the hospital and in their homes through collaboration and innovative programming.

One great example is **Broadlawn Manor Nursing and Rehabilitation Center** in Amityville, NY. Broadlawn Manor is working to keep consumers safe, healthy and out of the hospital by partnering with the North Shore Long Island Jewish (North Shore-LIJ) Health System. Through this partnership, more subacute care nursing home beds were brought to Suffolk County – providing greater access to members of the community and reducing the likelihood of hospitalizations.

Broadlawn Manor also created the Purple Heart Program, which allows members of the community with heart conditions to rehabilitate and improve their abilities to live normally, and also "decreases hospitalization rates for patients who were admitted to the organization's subacute programs with a diagnosis of heart failure," according to Gerard Kaiser, vice president of senior services/administrator of Broadlawn Manor.

By partnering and creating an innovative program, Broadlawn Manor expects to see the number of hospitalizations decrease now that subacute care and rehabilitation services are more widely available to residents of Suffolk County and surrounding areas. Referring to the partnership with North Shore-LIJ, Kaiser added that Broadlawn Manor "also foresees implementing many of the clinical pathway tools that North Shore-LIJ Health System has developed into the organization's own operations, and would expect that hospitalization rates would decrease with increased clinical support from the System."

Significantly affected by changes to Medicaid reimbursement over the past three years, Broadlawn Manor looked to "increase Medicare services to offset the losses from Medicaid," Kaiser added. "North Shore-LIJ Health System had a need for additional subacute beds in our region, and we were looking to partner with more hospitals for referrals, so it was a win/win for both of us."

Broadlawn Manor's partnership with North Shore-LIJ Health System took effect on July 1, 2012, and is expected to help the hospitals in the system reduce lengths of stay. As for the Purple Heart Program, Kaiser said "the hospitalization rate for heart failure has dropped significantly since the start of the program. Prior to implementation, the organization had a hospitalization rate of approximately 6% for these patients. That rate has now been reduced to 1%, a dramatic decrease."

(continued on page 21)

## A win-win-win: (continued from page 19)

When asked if he would recommend that other long term care organizations develop programs like the Purple Heart Program, Kaisersaid, “I would certainly recommend developing a similar type program in any facility. Like any new process it takes work. It is not easy. We formed a task force and worked for three months before rolling it out to the staff and patients. You need to have buy-in from all areas to make this work. Nursing, medical, rehabilitation, social work, dietary and admissions all have a stake in the success of this program.”

**MJHS (Metropolitan Jewish Health System)**, located in the New York City area, has also established multiple partnerships with hospitals throughout the area, including one with the Maimonides Medical Center; all in an effort to bring services to patients requiring home care and to help reduce hospital readmissions.

Len Parisi, MJHS’s vice president of quality management discussed with LeadingAge New York, the organization’s recent innovation, the Heart Failure Disease Management Program. “MJHS Home Care earned disease-specific certification for its home care-based heart failure disease management program in 2011. We were the first agency in the country to be awarded this unprecedented distinction by The Joint Commission—the nation’s oldest and largest standards-setting and accrediting body in health care. With a diverse patient population that spans the Greater New York area, including Nassau and Westchester counties, MJHS Home Care earned this unique honor after an extensive on-site assessment of the program, its processes to evaluate and improve care, as well as patient outcomes,” said Parisi.

It took 18 months prior to achieving certification, for the program to be developed. Throughout the development phase, the process included researching evidence to develop a standard of care and implementing a quality management approach to evaluating the care provided. “We really appreciated that the evaluation phase provided opportunities to enhance our standard of care to improve patient

care quality and safety,” said Parisi, “home care is truly unique. It’s an honor to be invited into someone’s home and then provide them with compassionate care and an extended support network, including family and local community groups.”

The program is just one more developed by a LeadingAge New York member that has readmission rates trending downwards, and according to Parisi, is “equally important in that patients have demonstrated improved understanding of their symptom management, and medication management.”

Meanwhile, in western New York, the University of Rochester Schools of Nursing and Medicine are working with six nursing homes to reduce 30-day hospital readmissions from the 2010 level of 28% to between 10% and 20%, according to a briefing given earlier this year to LeadingAge New York’s nursing home cabinet members by **Wayne County Nursing Home and Rehabilitation Center, M.M. Ewing Continuing Care Center/Thompson Health, and the University.**

The readmission project is one initiative being undertaken by a larger quality improvement learning collaborative, known as the Greater Rochester Nursing Home Quality Consortium, which is working to improve care, particularly in rural and underserved areas of the region. By using Quality Improvement (QI) Lean Six Sigma principles and techniques to train interdisciplinary teams in nursing homes, the consortium is actively working to reduce readmission rates by implementing best practices.


To accomplish this goal of reducing hospitalizations, a project team identified common problems among the nursing homes involved in the project, and developed a transitional care bundle of interventions to address identified problems in medication reconciliation, clinical decision-making and transitional care communication.

After establishing work groups to assess each element of the transitional care

bundle, participating nursing homes are piloting the interventions and working towards more effective collaborations with hospitals. Systems of care are being redesigned and a regional database to trace residents’ trajectory of transitions was put into place.

In a recent conversation with Dr. Tobie Olsan, PhD, RN Project Director for the Greater Rochester Nursing Home Quality Consortium, Olsan informed LeadingAge New York that funding for the consortium’s work has been extended by the Health Resources and Services Administration’s Comprehensive Geriatric Assessment Program for three years (2012-2015). The funding provides resources to expand the Lean Six Sigma team training to additional nursing homes and to support nursing homes in the development of their Quality Assurance and Performance Improvement Programs (QAPI).

The Affordable Care Act requires nursing homes nationwide to advance their quality efforts by 2013 to include performance improvement. The Centers for Medicare and Medicaid Services (CMS) has developed a 5-element QAPI program framework and is developing resources and technical assistance that will help nursing homes develop their QAPI programs. Olsan also said that “LeadingAge New York member homes participating in the Consortium are already doing the kind of cutting edge work that is a priority in the Affordable Care Act. Our nursing homes are leading the national transformation to performance improvement including systems thinking, evidence-based practice, data collection and analysis to continuously monitor and redesign care processes.”

So now, after all of these facts, figures and testimonies, ask yourself: what is it that your organization does best and what could it improve upon to help keep those you serve out of the hospital and in their own homes and communities? As more LeadingAge New York members ask this question, more collaborations and innovations will emerge. Reducing avoidable hospitalizations is a true example of a win-win-win for people, payers and providers. 



## A program with heart




Home is where the heart is. Yet for some people, help is needed to remain healthy and safe in their beloved home. The Home Care Center at St. Camillus and Christopher Community partnered in 2011 to present an ongoing health education series called, Home is Where Your Heart Is, designed to help residents of Christopher Community properties remain healthy and safe in their homes.

For many in the Syracuse area community, help really is needed to remain at home. The Home Care Center at St. Camillus is dedicated to enhancing health and maximizing independence at home. The Home Is Where Your Heart Is team, comprised of nurses, physical therapists, occupational therapists, speech language pathologists, social workers, and nutritionists from The Home Care Center at St. Camillus began visiting Christopher Community apartment buildings and complexes. The team shares free prevention services, such as falls risk prevention and home safety, blood pressure screenings, and caregiver seminars.

A variety of informative educational presentations have been conducted. Topics have included balance and falls prevention, diabetes and nutrition, and anxiety and depression. Other planned topics include smoking cessation, stroke prevention, managing dementia and handling emergency events. Cindy Davies, social worker with Christopher Community, had this to say about St. Camillus staff running the program: "Your staff is great with our residents – it's evident that they have a real passion for sharing their knowledge and helping others!"

The Home Care Center at St. Camillus offers nursing services, therapies such as speech language, physical and occupational rehabilitation, nutritional counseling, and medical social services. Christopher Communities is a non-profit development and management company specializing in housing for seniors, families, and the disabled in Upstate New.

The Home is Where Your Heart Is team has a wealth of knowledge and experience to share during these programs.

"We are very excited about this opportunity. It gives us a chance to expand the community's awareness of homecare services and to assist individuals continue their independence and wellbeing at home," said Heather Kemmis, OTR/L, Vice President, St. Camillus and Integrity Home Care Agencies. 

## The SeniorLife Challenge

A partnership of Episcopal SeniorLife Communities

Always seeking new ways to improve our efforts to keep seniors engaged and healthy, Episcopal SeniorLife Communities (ESLC) recently launched The SeniorLife Challenge, a new health and wellness initiative for those in and around the Rochester suburb of Henrietta.

Program participants can take advantage of a variety of activities such as exercise classes, walking groups, health and nutrition classes, and cooking demonstrations. Monthly incentives are offered to participants who track progress and steps with a pedometer, as well as record fruit and vegetable consumption.

"This neighborhood outreach effort is a one of a kind and the first of many that ESLC plans to offer," said Teresa Galbier, VP of community outreach at ESLC. The program is generously supported by a grant from the Daisy Marquis Jones Foundation, and is supported by community partners St. Peter's Church and the Henrietta Senior Center.

This program uses the incredible expertise of the existing staff at ESLC to create a robust program for participants. For example, a dietician travels to sites and is available for consultation and to help seniors with preparation of menus and food choices.

According to Courtney McGinness, director of marketing and program director of *The SeniorLife Challenge* at ESLC, "The purpose of the program is to promote health and wellness but our increased presence in the community has also served as a terrific public relations tool."

Another benefit of the program for seniors is access to an exercise program called Maintaining Independence Through Exercise (MITE). This is the same exercise program used by residents at ESLC. Participants begin with a self-directed pre-test to rate their current status in such key areas as endurance, balance and strength, and then follow up with assessments




(continued on page 23)

## The SeniorLife Challenge (continued from page 22)



every 10 weeks. In addition to the core modules, there are modules available specifically to improve participant's balance and promote relaxation. Jean Zeller, age 87, had never exercised on a regular basis before living at ESLC. "I like the MITE class because it keeps me going and there is someone there to push me," said Jean. "It has also helped me with my balance when walking." The beauty of this program is that it is

not locked to a specific site. It is designed to travel to seniors and utilizes natural gathering places, such as senior centers, all around Rochester for programming. Schedules are placed on the ESLC website, partner sites, the Town of Henrietta web site, on senior center calendars and a direct mailer is sent each month to a database of people in the area who have signed up to receive the mailings. Fellowship, activities and refreshments have been a big draw to seniors with 200 overall and an average of 19 participants in each class.

This program represents an opportunity for involved senior service, housing and advocate groups to work toward the common goal of healthier and happier seniors. It utilizes, for the most part, already available resources and efforts in a cohesive manner bringing tools to seniors where they gather. 

*Our sponsor programs  
are as unique as our  
members....We are able to  
customize any package  
to meet your goals and  
needs. Contact Noreen at  
518.867.8383 to have a  
package created for you!*



Maximizing occupancy  
for senior communities  
across New York.

(716) 652-4788  
WirthweinMarketing.com



**With EQUIP 3.0, you don't need a crystal ball.**



### **What is EQUIP?**

**EQUIP 3.0 is an online suite of tools for nursing homes that analyzes MDS 3.0 data to:**

- Improve quality and outcomes
  - Manage risk
  - Increase efficiency
- Maximize coding accuracy and reimbursement
  - Point out potential problems
- Assist direct care staff with developing effective and individualized care plans

**EQUIP 3.0 is your future.**

***Call for more information:***

**518.867.8390 • [www.equipforquality.com](http://www.equipforquality.com)**

**13 British American Blvd., Suite 2, Latham, NY 12110-1431**

## Focus on vision for better health and well-being

*Submitted by Jewish Guild Healthcare (formerly The Jewish Guild for the Blind)*

**M**rs. A lives alone in senior housing. In recent months, she has activated the smoke alarms many times while cooking, has been noticeably losing weight and has fallen several times.

Mr. B made several mistakes recently dosing his own medications, and can't see well enough to read or pay bills anymore. His eye doctor says he cannot give him stronger glasses. He is depressed over his increasing dependency on his wife.

These are just two of many common scenarios of older adults experiencing loss of vision. Vision impairment (also referred to as low vision or vision loss) is a leading cause of disability in the United States. The CDC estimates that between five and sixteen percent of all adults 65 years or older currently have moderate

to extreme vision loss, and the numbers increase dramatically among those over age 75.

These numbers are expected to nearly double in upcoming years as the population ages. Vision loss in older adults is most commonly

caused by cataracts, glaucoma, macular degeneration, eye changes resulting from diabetes and head trauma.

Adults with vision loss report poorer overall health than those without vision loss, and they have higher incidence of diabetes, heart disease, stroke and depression. They are more than twice as likely to fall, and also more likely to sustain an injury, such as hip fracture, as a result of that fall. Vision loss interferes with the ability to perform daily activities. It impacts overall function, socialization, and the ability to live independently.

Those of us who provide health care, support services and education to millions of aging adults and their families will be evaluating, treating, and caring for more and more people with varying degrees and causes of vision loss in the future. Proactively improving our ability to recognize and address vision problems and their impact on patient health and well-being will help us to provide better and more effective care.

Following are some basic tips for recognizing a vision problem, improving interactions, facilitating independence, and referring patients to low vision care.

### Recognizing vision problems

The causes and types of vision loss, and the resulting impact on function can vary from person to person, but here are a few basic clues that a problem may exist.

Signs of a vision problem:

- Tilts head to the side or squints to get things in focus
- Holds items very close to see or read
- Doesn't recognize faces
- Stumbles or bumps into things or knocks items over
- Stops doing favorite activities that require vision

### Some questions you can ask: ("yes" indicates possible problem)

- Do you have trouble doing the things you want to because of your vision?
- Has your vision changed since your last eye exam?
- Has a doctor ever told you "nothing else can be done" to help you see any better?
- Do you ever see double?



(continued on page 14)

### Improving personal interactions

- Introduce yourself by name, don't assume the person will remember your voice.
- Tell the person when you're walking away. It's embarrassing to be left talking to yourself!
- Avoid hand gestures when talking. Use descriptive language instead.
- Offer your arm to assist the person. Never push or grab the person without warning.
- Always warn before touching the person and provide verbal cues about what you are doing.
- Speak directly to the visually impaired person. You can use words like "see" and "look," and it's okay to ask the person how well they can see.

### Facilitating independence (and safety)

Adaptive techniques and devices, and simple environmental modifications can help people with vision loss accomplish daily tasks more successfully and safely. A few examples include:

- Ensure proper light in the room, and aim an adjustable lamp at the task being performed.
- Control glare from sunlight with adjustable blinds, and from inside lighting by covering glare sources with tablecloths or floor rugs.
- Remove (or tape to the floor) mats, rugs, electrical cords, etc., to avoid tripping.
- Use bold lined paper, and print in block letters using a felt-tipped black pen.
- Identify the food on the plate when a meal is presented, and use a clock face to describe the location of each food item ("chicken is at 6 o'clock").

### Referring to low vision services

Once vision has been lost or is declining, vision rehabilitation services are important to increase independence, safety and productivity, and improve quality of life. Services include:

- Low vision exam to identify the person's degree of usable vision, and introduce low vision devices and techniques that enable the person to continue doing favorite activities.
- Rehabilitation to learn new strategies for accomplishing everyday tasks from brushing teeth, to cooking, paying bills, organizing medication, etc.
- Mobility training to be able to safely navigate familiar and unfamiliar routes, sometimes while using a mobility device such as a guide cane.

- Support, including individual and group counseling for the person and family members, to help deal with the range of emotional, behavioral and social impacts associated with losing vision.

Jewish Guild Healthcare offers programs to train health care professionals in all settings on how to better identify and address vision problems. This includes in-person workshops, on-line programs, and self-study educational materials to develop strategies for improving the quality and effectiveness of care to people with vision loss. For more information, contact us at 800-539-4845, or go to [www.guildhealth.org](http://www.guildhealth.org).

### DO YOU KNOW HOW TO PROVIDE EFFECTIVE CARE TO PEOPLE WITH VISION LOSS?



### Caring for People with Vision Loss, a 90-minute online recorded webinar.

Discusses the impact of vision loss and shares innovative strategies for nurses to improve interactions and care for people with vision loss. The program includes lecture using photographs, graphics and video clips, and provides a question and answer period from the live presentation.

*Developed and offered in partnership with NYS Nurses Association, an accredited provider of continuing nursing credit by the American Nurses Credentialing Center's Commission on Accreditation. This program has been awarded 2 contact hours.*

JEWISH  
GUILD  
HEALTHCARE  
Vision + Health

800-539-4845  
[www.guildhealth.org](http://www.guildhealth.org)

New York State  
Nurses  
ASSOCIATION

## Member News

---

### Awards & Achievements

---

#### **Schervier Nursing Care Center receives two grants**

##### **Virtual care program**

Bon Secours New York Health System's Schervier Nursing Care Center announced it has received a \$5,250 grant from the Verizon Foundation to launch its Virtual Care Program this fall to improve patient care for seniors and disabled adults within underserved or high capacity areas who are homebound or reside in senior facilities. Schervier will use the grant to partner with VitaLink, Inc. to leverage broadband technology to deliver healthcare information to at risk populations, making it more accessible and expanding its reach and services beyond its Riverdale campus.

The grant enables Schervier to provide seniors and disabled adults in need with a new technology system allowing patients to access health care content and exercise instruction via computers and mobile devices, including tablets. The new program will conveniently provide links for seniors to take advantage of programs provided by New York City agencies, including Riverdale Senior Services, Bedford Park Senior Services and the Allen Pavilion.

##### **Transitional care program**

Bon Secours New York Health System's Schervier Nursing Care Center has announced it has received a \$103,000 grant from the Fan Fox & Leslie R. Samuels Foundation to launch a Transitional Care Program for palliative care patients who are transitioning from the hospital to its facility in Riverdale, N.Y.

Schervier will use the grant to employ a full-time social worker as a Transition Coach, who will help enhance the quality of care that Schervier provides its patients. The Transition Coach will be responsible for ensuring that patients' values and wishes are faithfully honored and respected from the hospital setting to the nursing home, and in supporting the patient and family through this potentially stressful transition. Overall goals of this new position are to increase patient and family satisfaction, reduce patient readmissions to the hospital, along with reducing overall health care costs.

The Transition Coach will work closely with hospital staff, palliative care patients, their families and Schervier staff to address patients' needs prior to, during and immediately following the transition from the hospital to Schervier's care facility. The Transition Coach will work to maximize the involvement of interdisciplinary expertise, ensuring that critical issues are addressed, appropriate professionals are involved, treatment goals are understood and the care plan is executed correctly.

---

#### **Arthur F. Brings and Deborah T. Hauser elected to St. Johnland Nursing Home board**

St. Johnland Nursing Center in Kings Park announced the election of Arthur F. Brings and Deborah T. Hauser to its board of directors.

Mr. Brings has been the chief facilities officer at Cold Spring Harbor Laboratory since 1994 and manages the operation, maintenance and construction of all Laboratory facilities. From 1982 to 1994 he served as director of environmental health & safety. Mr. Brings is the president of the board of the Cold Spring Harbor Whaling Museum.

Ms. Hauser is the director of business development at Daniel Gale Sotheby's International Realty and has been a licensed salesperson and a member of the Gold Circle of

(See Noteworthy on page 28)

Excellence. She has been involved with many local organizations including East Woods School, Heckscher Museum of Art, Cold Spring Harbor Laboratory and the Cold Spring Harbor Whaling Museum.

### **Dorothea Bell appointed to Westchester Public/Private Partnership for Aging Services' board**

Dorothea Ferguson Bell, vice president of human resources of The Wartburg Adult Care Community, has joined the board of directors of the Westchester Public/Private Partnership for Aging Services as a voting member.

### **Dana Nolan named director of Adult Day Programs at The Wartburg**

The Wartburg Adult Care Community proudly announced that Dana Nolan has been appointed Wartburg's director of adult day programs. In this role, she will manage the medical and social adult day programs which serve approximately 100 families in the community.

Ms. Nolan earned her MA degree in aging studies from the University of North Texas, and a BS in psychology from Marywood College. She is a licensed New York State nursing home administrator, a certified retirement housing professional (RHP) and housing administrator.

She has also served on the LeadingAge NY housing and assisted living committees.

### **Wartburg's John Schuster receives nursing home administrator's license**

When John Schuster set out to obtain his nursing home administrator's license, he knew that his decision on where to train would make all the difference in the world. He chose The Wartburg and his preceptor was Paula Ress, administrator of Wartburg's skilled nursing facility, rehabilitation and adult day services.

As John explained, "The decision was a natural one. I've been at The Wartburg for almost ten years, starting as an admissions coordinator, then manager, then as an administrator in training. I know Wartburg, I understand and cherish its mission, and feel right at home as I prepare to fulfill my new role as a nursing home administrator."

John, who resides in Danbury, CT with his wife, Denise, and their son, Ryan, received both his BA and MPA from Pace University.

### **United Hebrew of New Rochelle names Maria Hood – formerly of White Plains Hospital – director of admissions**

United Hebrew of New Rochelle Skilled Nursing and Short-Term Rehabilitation Center, a leading Westchester nursing home and short-term rehabilitation center, has named Maria Hood director of admissions. From acute care hospital discharges to skilled nursing facility & Burke sub-acute rehabilitation admissions, Maria brings twenty years of experience in the medical social work field. She is a New York State licensed clinical social worker and received her Masters in Social Work from Fordham University Graduate School of Social Service. She was formerly director of social work and discharge planning for White Plains Hospital Center. In her current position at United Hebrew, she is responsible for coordinating and managing the admissions of all patients to the skilled nursing home and Burke short-term rehabilitation pavilion. Hood has lived in Westchester County for more than thirty years. She lives in White Plains, with her husband, musician and teacher Michael Hood, and their two children.



(See Noteworthy on page 29)

---

**The Friendly Home Wins Excellence in Action Award**

The Friendly Home recently received the My InnerView Excellence in Action award from National Research Corporation. This honor recognizes skilled nursing homes that achieve the highest levels of satisfaction excellence, as demonstrated by overall resident satisfaction scores that fall within the top 10% of the My InnerView product database, which includes customer satisfaction surveys. The Friendly Home was the only nursing home in Monroe County to receive this recognition, and one of just three winners out of 191 eligible facilities in New York State. "We are very honored by this award. The Friendly Home has a long-standing dedication to serving those in need in our community, and it is gratifying to know that our emphasis on delivering outstanding care and services has been validated by our residents and their families," said John Gagnon, The Friendly Home's Administrator.

The Excellence in Action awards are presented exclusively to National Research clients who use My InnerView products. Qualifying nursing homes (over 5,000 nationally) must have completed a customer satisfaction survey in 2011. Winners must have also achieved a minimum of 10 responses with a minimum 30% response rate and scored in the top 10% of qualifying facilities on the question: "What is your recommendation of this facility to others?" in terms of the percentage of respondents rating the facility as "excellent."

---

**Selfhelp Community Services, Inc. Wins First Ever Consumer Electronics Foundation Grant for Virtual Senior Center**

The CEA Foundation announced that Selfhelp Community Services, Inc. (Selfhelp), an eldercare service organization based in New York City, is its first grantee. Selfhelp's Virtual Senior Center (VSC) enhances the lives of homebound seniors by using computer, video and Internet technology in seniors' homes and at local senior centers to create an interactive experience that reduces social isolation, promotes wellness and provides better access to community services.

"The goal of the CEA Foundation is to use our considerable resources and access to technology to bring that technology to people who would otherwise never get to use it," said John Shalam, founder of Audiovox Corporation (now VOXX International Corporation) and chairman of the board. "This first grant to Selfhelp's Virtual Senior Center will offer the homebound visual contact with the outside world without ever having to leave their homes, which many of them can't. Anyone who has ever cared for a shut-in knows the single worst aspect of age or disability is often the loneliness it causes – and I can attest to that from personal experience.

"Selfhelp is an important first program for us as it allows an innovative use of consumer electronics to support seniors through social interaction while allowing them to remain in their homes," Shalam continued. The CEA Foundation and Selfhelp plan to identify two locations in New York City to expand activities currently run at the Benjamin Rosenthal-Prince Street Senior Center. During the implementation of these two additional locations, a replication guide will be created in order to bring the Virtual Senior Center project to scale in multiple cities across the country.

The CEA Foundation is a charitable supporting organization of the Consumer Electronics Association (CEA). It was established with the mission to link seniors and people with disabilities with technologies to enhance their lives. The Foundation is launching its first series of grants to support its mission in 2012. For more information on the CEA Foundation please visit [www.ceafoundation.org](http://www.ceafoundation.org).

(See Noteworthy on page 30)

## Happenings

### From Mount Vernon to Mount Kilimanjaro: Wartburg's Rev. Carol E. A. Fryer Climbs Africa's Tallest Peak to Help Conquer Malaria

At the break of dawn on July 20, Rev. Carol E. A. Fryer, Senior Pastor, Director of Church Relations at The Wartburg Adult Care Community, and Pastor of United Lutheran Church on The Wartburg campus, was amazed as she gazed out at the rising sun having just reached the summit of Uhuru Peak atop Mt. Kilimanjaro. She successfully climbed the tallest snowcapped mountain in Africa at 19,340 feet above sea level, participating in the Evangelical Lutheran Church in America (ELCA) Malaria Campaign to support African companion churches in their malaria prevention and treatment programs. This ELCA campaign is in conjunction with the United Nations Millennium Development Goal, with a long-range objective to raise \$15 million and contain malaria by 2015.

Making this historic climb with Rev. Fryer were Rev. Jack Horner, the Assistant to the Bishop for Evangelical Mission at the Metropolitan New York Synod of the ELCA, and Rev. Wvyetta Bullock, Executive for Administration in the Office of the Presiding Bishop of the ELCA. Together, under the care of their three local guides – Seraphine, August & Anicet – a cook and 16 porters, the group began their journey on July 14 filled with anticipation and determination. Along the way, they climbed through five different climate zones, learned a Swahili folk song and never lost sight of their mission – to conquer malaria. The climb took seven days to summit and one day to descend.

The ELCA Malaria Campaign slogan is “A Penny a Foot!” Since Mount Kilimanjaro is 19,340 feet high, the suggested contribution is \$193.40 – a penny a foot. However, any amount is welcomed and gratefully received. Wartburg Cares! reported that the “penny a foot” slogan enabled everyone on The Wartburg campus – residents, registrants, family members, staff, volunteers and visitors – to participate in raising funds to eradicate Malaria in Africa. Residents of The Wartburg's skilled nursing facility donated over 100 individual “Wartburg bingo bucks” in support of Rev. Fryer's climb. “I was inspired by Rev. Fryer's unselfish act of climbing Mt. Kilimanjaro that I just had to donate my bingo bucks to support her.” noted a resident.

Wartburg Cares! continues to accept donations in support of the ELCA Malaria Campaign. For more information about how to donate, please contact:

Rev. Carol E. A. Fryer: 914-513-5163, cfryer@thewartburg.org.

JoAnn G. McGraw: 914-513- 5128, jmcgraw@thewartburg.org.

Metro New York Synod ELCA Malaria Campaign: www.mnys.org



## LeadingAge New York News

### Welcome Susan Bartholomew

Susan Bartholomew joined LeadingAge New York staff on Sept. 4 as a Policy Analyst/Consultant, replacing Michelle Synakowski. Susan comes to LeadingAge New York with more than 25 years of experience in long term care including nursing clinical consultant for a multi-state nursing home operation. She has served as a director of nursing at various long term care facilities and has strong nursing management, regulatory, and organizational experience.

(See Noteworthy on page 31)

---

## 2013 Call for Presentations

LeadingAge New York/FLTC seeks dynamic, highly innovative educational sessions that enable professionals from diverse backgrounds to share practical ideas, cutting-edge concepts and best practices. The theme, "Expanding the Possibilities," will resonate throughout our educational programming in 2013 and will focus on the dynamic, innovative approaches the senior living and services sector can adopt to increase access, improve quality and significantly reduce costs of long term care services. We welcome rich, engaging educational sessions that are applicable across the continuum of aging services for in-person meetings and conferences, distance education such as audio conferences and articles for publications such as newsletters and posting on our website.

Our annual conference & exposition will be held in May 2013. We convene several hundred CEOs, administrators, executive team members and their staff for this unparalleled three-day opportunity to learn, network and grow. This is an opportunity to share effective models, policies, research and information and provide your colleagues with insights and best practices addressing many of the issues confronting continuing care providers. The annual conference proposal submission deadline is Oct. 1, 2012.

[Click here](#) for more information and to submit a proposal for our 2013 educational programs.

Contact: Kathy Gormley, [kgormley@leadingageny.org](mailto:kgormley@leadingageny.org), 518-867-8385, ext. 114

---

## Welcome New Members

Lott Community Home Health Care, Inc.

---

## Welcome New Associate Members:

Robert A. Maltzman, Rainbow Care & Consultants, Inc.

Diane Mertz-Hart, Mertz-Hart & Associates LLC

---


## Upcoming Conferences

### Directors of Nursing Services Conference

November 13-15, 2012 at the Sagamore, Bolton Landing

### Directors of Social Work Conference

November 13-15, 2012 at the Sagamore, Bolton Landing

Click on this [link](#) to go to our educational trainings and programs page at [leadingageny.org](http://leadingageny.org). There you can access all of our training programs and many other educational opportunities by clicking on "education." 

*With every two paid ads, receive a complimentary 800 word advertorial. Be the center of attention with a feature story in the Adviser.*