

# The Golden Years

FALL 2018

PUBLICATION OF EAST CENTRAL KANSAS AREA AGENCY ON AGING

SERVING ANDERSON, COFFEY, FRANKLIN, LINN, MIAMI, & OSAGE COUNTIES

## Depression, Anxiety, and Aging



By Ginger Acker

Depression and anxiety are the most common mental health related concerns for older adults. Symptoms of depression and anxiety can mistakenly be considered normal and as a result, be overlooked. It would seem whatever medical conditions or life changes they are experiencing can account for changes in their behaviors and attitudes however, this is not always the case. Though some attitudes and

behaviors may indeed be brought on by the challenges or transitions being faced, it's important to pay attention to how long and how significantly those behaviors and/or attitudes are impacting you or your loved one's quality of life.

### Symptoms of Depression

- An "empty" feeling, ongoing sadness
- Tiredness, lack of energy
- Loss of interest/pleasure in everyday activities including sex
- Sleep problems: trouble getting to sleep, early waking, sleeping too much
- Changes in food intake/choices
- Crying more excessively than usual
- Chronic pain that is not managed well by medications
- Difficulty focusing, remembering, or making decisions
- Feeling guilty, regretful, helpless, hopeless, or worthless
- Irritability or chronic anxiety
- Thoughts of death, suicide, or suicide attempt

### Symptoms of Anxiety

- Nervousness, constant worry, unexplained or irrational fear
- Racing thoughts that interfere with concentration
- Irritability
- Disturbed sleep
- Muscle tension/pain, headaches
- Stomach ache, indigestion, diarrhea
- Chills, hot flashes
- Loss of energy
- Restlessness, fidgeting, wringing hands
- Pounding or racing heartbeat, chest pain
- Rapid breathing, feeling unable to breathe, lightheadedness

You will notice that some of the symptoms of depression and anxiety overlap, while some are very different. Sometimes depression and anxiety exist together. It may be helpful for you or your loved one to keep a journal and record just a few thoughts about each day as a tool for monitoring if thoughts are more consistent with depression, anxiety, or both. A visit with your primary care physician is a good first line of defense for addressing mental health concerns. Most primary care physicians can assist with ruling out medical conditions that may be contributing to mental health symptoms and have screening tools to further clarify if there are mental health concerns present that need to be addressed. In addition, your doctor can provide access to medications and any professional referrals needed to assist with supporting and lessening the impact your mental health needs are having on your quality of life.

Depression and anxiety, if left untreated, can contribute to worsening any current medical conditions you may be dealing with and be detrimental to your overall health. Please don't let it go unaddressed.



### From The Director

By Elizabeth Maxwell  
Executive Director

The East Central Kansas Area Agency on Aging will be the new provider for the senior congregate and home-delivered nutrition program as of October 1, 2018 in Anderson, Coffey, Franklin, Linn, Miami and Osage Counties. All senior meals will now be prepared and served through the East Central Kansas Area Agency on Aging Nutrition Program. The area agency on aging was excited to be able to continue to serve meals out of the central kitchen in Ottawa. ECKAAA was able to purchase the central kitchen in Ottawa with the help of a generous donation by the Goppert Foundation of \$100,000. Their generosity was vital to the purchase of the building which helps keep the program intact for food preparation and delivery.

Two new staff were hired to oversee the program. Pat Watson, Lane, has been hired as Food Service Coordinator and will oversee the kitchen and delivery personnel. Jodi Smith, Ottawa, has been hired as the Nutrition Site Coordinator and will oversee the 24 congregate sites that package and serve the 750 meals each day in the six counties.

The area agency on aging feels very lucky to have these two women on board to manage the new program as they have extensive knowledge and a passion for the program. Watson was the Food Service Coordinator for almost 20 years with Mid-America Nutrition Program and Smith interned with Mid-America Nutrition Program in college and was a case manager for ECKAAA for over 10 years. ECKAAA feels very fortunate that these two key staff people have a history with the program and a familiarity with the people in the area served. In addition, the kitchen, food van delivery drivers and congregate site managers employed by the former program will now be employees of ECKAAANP and are key to helping ensure meals will continue to be served at congregate sites and through home-delivered meals without interruption.

For information or questions please call ECKAAA at 785-242-7200 or 1-800-633-5621, Monday-Friday, 8:00-5:00PM.



Meal Site Managers

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Masthead photo was designed by Jasmine Anderson, ECKAAA Marketing and Outreach and Editor of Golden Years.

# New Faces at the ECKAAA

## Evonna James

Hello! My name is Evonna James and I am the new Intake and Information Representative. I have been married to my husband Ron James for 37 years. Together, we have two children and three grandchildren. I love to read, play with our grandchildren, and meet new people. I have lived in Kansas my whole life and love it! We moved to Pomona, KS in 2002 and enjoy residing in Franklin County and being a part of the community. I am excited to be part of the ECKAAA team and look forward to meeting so many of you in the community.



## Jodi Smith

It is great to be back at ECKAAA! I am the new Nutrition Site Coordinator. I was a case manager here for 11 years, leaving in 2005 for other endeavors. For the last 10 years I have been the Director at Vintage Park at Osage City. I semi-retired in August and knew that I wanted to find something where I could make a difference in the lives of seniors and this position seemed like a perfect fit. When I went back to college later in life, I did my internship with the Meals on Wheels program in Ottawa and I have been working with seniors ever since. The people I have met that benefited from the meal program were the reason I wanted to continue to help. I am a grandmother now of two beautiful granddaughters and they make my life very full. I look forward to meeting all of you!



## Pat Watson

Hello! I'm Pat Watson and I live on a farm north of Lane, KS. My late husband Merle and I bought the farm in 1976 when we moved from WHERE. We have three daughters, 8 grandchildren, and 15 great grandchildren.

I have over 60 years of experience in food service. I started working in restaurants, then started with meals on wheels in April 1979 as the food service manager. Elizabeth came as the nutrition director in August 1979. We worked



together for 14 years before Elizabeth became the Area Agency on Aging director and I continued to work for meals on wheels for 5 additional years. After my time with the meals on wheels program, I went to Ransom Memorial Hospital for 4 years and then went to the Ursuline Convent in Paola for 7 years as a cook.

I've been retired for 9 years, but am excited to be back part time for the meals program. My best memories are all the nice people I've met over the years and the days we used to serve over 1800 meals. I'm active in the Pottawatomie Ruritans and Ruhamah Church.

## Jessica Slocum

My name is Jessica Slocum and I am the new CDDO Quality Assurance Liaison. I am a single mother of a 17 year old daughter. I obtained my Bachelor's Degree from Ottawa University, worked in an ER trauma center for 3 years, and then started working in mental health which I did for 6 years in different positions including case manager, residential staff, and SOAR coordinator. I have worked in various positions within the I/DD population for the last 7 years



including as a TCM, HUD Service Coordinator, BASIS Assessor and Service Coordinator with a MCO. I look forward to my future here at the agency!

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Owned and operated by the City of Garnett

# Caregiver's Corner



**Shannon Ocsody,  
Caregiver Coordinator**

## 5 Calming Techniques for Caregivers

**When it begins to feel like too much, follow these simple tips**

By Paula Spencer Scott, August 17, 2018

*(Editor's note: This article originally appeared in Caring.com.)*



*Credit: Adobe Stock*

While being a caregiver for an elderly loved one can be deeply rewarding, it can also be extremely stressful. During those moments when your nerves are frayed and your patience is wearing thin, there are some helpful techniques you can use to remove yourself from the situation and calm down. Sidestep letting strong feelings get the best of you by remembering to “give yourself five” when you’re steaming. What’s great about this little mantra is that it can take so many different forms:

1. You could take five (literal) steps back from the situation if your loved one with dementia has become belligerent.
2. Count to five before you answer if you’re stuck in a cycle of repeated questions or comments.
3. Take five whole minutes to yourself (set a timer!) if you’re just worn out. While you relax, put on a sure re calming television program or hand the person with dementia a favorite snack and leave the room (if you’re sure he or she will be safe).
4. When you can’t escape physically, imagine five nice things you’d do for yourself if you could. Sometimes just picturing a spa day or a chocolate cake in vivid detail is a tiny bit like experiencing the real thing.
5. Take five deep breaths: Inhale deeply through the nose, hold it for a count of five, then let it out slowly through the mouth. Repeat five times. Nobody will notice you’re stepping back from the edge of a cliff as you breathe.

By Paula Spencer Scott

*Paula Spencer Scott is the content chief at Kinstantly.com. A former contributing editor of Caring.com, she is the author of Surviving Alzheimer's: Practical Tips and Soul-Saving Wisdom for Caregivers. Scott has specialized in women's life-stage concerns (baby care, family care, self-care, elder care) from her first job as an editor at 50 Plus Magazine through stints as a Woman's Day columnist and coauthor of health books with doctors at Harvard, UCLA, Duke, and Arizona State.*

### Protect Yourself and Your Loved Ones

**Needing information on how to protect yourself or your loved one from financial abuse, identity theft, or physical abuse and neglect?**

**The East Central Kansas Area Agency on Aging**

**has brochures, bookmarks, and tip sheets to help promote prevention strategies and to provide information on reporting measures.**

**We would be happy to present to your group or to provide you with some literature to use.**

**Call Leslea at 785-242-7200 or 1-800-633-5621.**

## Caregiver Support Group Opportunities

If you are 60 and over, and a caregiver; or if you are caring for someone 60 and over—join others who are caregivers at one of these locations!

### Anderson County Support Group

4th Monday of each month, 1-2PM

Park Plaza North Club House - 105 Park Place North, Garnett, KS

Facilitators: SEKMH & ECKAAA

### Franklin County Support Group

2nd Tuesday of each month, 1-2:30PM

East Central Kansas Agency on Aging - 117 South Main, Ottawa, KS

Facilitators: Diane Sadowski & ECKAAA

### Miami County Support Group

3rd Tuesday of each month, 6-7PM

Elizabeth Layton Center - 2595 SW 327th St, Paola, KS

Facilitators: Barbara Cordts & ECKAAA

### Osage County Support Group

4th Thursday of each month, 1-2PM

Osage City Library - 515 Main, Osage, KS

Facilitators: Crosswinds & ECKAAA

### Linn County Cup of Necessity with Shannon Ocsody

3rd Monday of Each Month, 11am-Noon

Mound City Library - 630 W. Main Street, Mound City, KS

### Coffey County Cup of Necessity with Shannon Ocsody

2nd Thursday of each month. 12:30-1:30pm

Burlington Public Library - 410 Juniatta Street, Burlington, KS

If you have questions about any of our caregiver activities - please call **Shannon** at 1-800-633-5621 OR 1-785-242-7200

## Transportation Services by County

### Anderson County

Anderson County Public Transportation

785-448-6480

Contact: Patty Ramsey

### Osage County

Osage County Public Transportation

785-528-4906

Contact: Stephanie or Nancy

### Franklin County

Franklin County Public Transportation

785-242-7440

Contact: RaJeanna Barnhart

### Coffey County

Coffey County Public Transportation

620-364-1935

Contact: Kara Reynolds

### Miami County

Louisburg Senior Center

913-837-5113

Paola Senior Center

913-294-4630

Osawatomie Senior Center

913-755-4786

The JO Bus

(913) 715-8267 OR (816) 221-0660

### Linn County

Linn County Public Transportation

913-795-2279

Contact: Mell Bowling or Jess

Mercy Hospital Transportation

800-642-0073

Locations: Mound City, Prescott, Pleasanton

\*For medical procedures at Ft. Scott

SEK-CAP Transportation

620-724-3294 - Frank

620-223-9391 - Maryann Post



## HOW TO DRINK MORE WATER?

- ◆ Start your day by drinking **one or two glasses** of water.
- ◆ Every time you pass a water cooler stop and **take a sip**.
- ◆ **Take a bottle** of water with you on your walks.
- ◆ Spice up plain water by adding **fresh mint leaves**.
- ◆ Make your water more interesting by adding a **squeeze of lemon**.
- ◆ **Keep a bottle** of water with you in your car, at your desk & in your bag.
- ◆ Replace your coffee or tea with a cup of hot water and a **drop of honey**.
- ◆ Get a **water mug** you like.
- ◆ Eat water-rich foods like **fruits and vegetables**.



## ANGELS CARE HOME HEALTH PROVIDES **Stay Healthy During Cold and Flu Season**

Winter is almost here, which means for many people, getting a cold or the flu can be a real inconvenience, but for seniors, getting sick – especially with the flu – may result in severe illness. Every year, more than 200,000 people are hospitalized and 36,000 people die from flu-related complications, according to the Centers for Disease Control and Prevention. Seniors account for nine out of 10 flu-related deaths and 60 percent of flu-related hospitalizations. Angels Care Home Health, a leading provider of home health care services for seniors, recommends a few easy prevention strategies to stay healthy during the season.

- **Scrub hands clean with warm soap and water.** This is one of the simplest - yet most effective - actions to ward off germs.
- **Avoid touching the eyes, nose and mouth,** which is where germs enter the body.
- Another simple tip: **stay away from anyone who is sick** especially in the first few days of their illness when they are most contagious.
- **Disinfect common areas such as tabletops and counters.**

One of the surest ways to help guard against the flu is to get the flu vaccine every year. The flu vaccine is already available, so seniors should plan to take action now since the cold and flu season is upon us.

In the event a cold or flu strikes, know what the symptoms are and how best to take action. Cold symptoms start typically with a sore throat, runny nose and congestion. By the third or fourth day, a typical cold sufferer will have a cough. Symptoms of a cold are usually felt above the neck. Flu symptoms come on quickly, and are

usually more severe than a cold. Symptoms of the flu include a fever, headache, sore throat, muscle aches, cough and congestion.

To treat a cold or flu, get plenty of rest, drink lots of fluids, and avoid alcohol and tobacco.

People who are 65 and older and who have an underlying medical condition should consult their health care provider as a precautionary measure if symptoms cause concern. Angels Care Home Health recommends seniors seek medical attention if they experience sinus pressure or pain, a persistent or worsening sore throat, a deep cough that produces yellow or green phlegm, and ear pain. Practicing the preventative measures listed above, in addition to making positive lifestyle choices all year long, can go a long way in preventing sickness, or at least minimizing the impact on the body if infection occurs. Eat healthy foods including those that nourish the immune system, such as salmon, yogurt, and dark green, red, and yellow vegetables and fruits. Get plenty of sleep, exercise regularly, and reduce stress.

Angels Care Home Health specializes in serving the health care needs of the senior population in East Central Kansas, including Chanute, Pittsburg, Winfield, Ottawa and the surrounding areas. The health care provider offers skilled nursing care and restorative therapy services in the home that emphasizes disease management and education for a healthier and more independent patient.



**ADULT PROTECTIVE SERVICES  
ABUSE, NEGLECT, EXPLOITATION**  
**1. In the Community - 800-922-5330**  
**2. In Adult Care Home - 800-842-0078**  
**3. In S.R.S. Facility - 800-221-7973**

### **Miami County Council on Aging** Proudly Supports our Senior Centers

**Louisburg Senior Center**  
5th & Metcalf  
Louisburg, KS 66053  
(913) 837-5113

**Osawatomie Senior Center**  
815 6th Street  
Osawatomie, KS 66064  
(913) 755-4786

**Paola Senior Center**  
121 W. Wea  
Paola, KS 66071  
(913) 294-4630

**Beagle Senior Citizens**  
(913) 755-4309

**Osage Township Seniors - Fontana**  
(913) 849-3115



## JOIN US FOR THE 2018 **INTERGENERATIONAL DAY**

FEATURING STUFF-A-BEAR



Rex the T-Rex



Bennie the Tiger



Furry the Teddy



Forest the Bunny

1. Reserve your spot at the Ottawa Library
2. Choose your animal
3. Join us on December 28th from 10AM-11AM at the First Baptist Church (Elliot Hall).  
410 S Hickory

Open to kids of all ages!

## **East Central Kansas Aging and Disability Resource Center**

*Serving - Anderson - Coffey - Franklin - Linn - Miami - Osage*

*...helping older Kansans and their families*

117 S. Main • Ottawa, KS 66067  
800-633-5621 or 785-242-7200  
www.eckaaa.org



**24-Hour Phone Service • (785) 242-7200**  
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 Funded Under The Older Americans Act  
 Through The Kansas Department On Aging.



## Money Matter\$

Ryan Henningsen  
Financial Advisor  
Edward Jones  
www.edwardjones.com

### How Can Life Insurance Help You?

You may not be aware of it, but September is Life Insurance Awareness Month. Of course, you probably recognize, at least in a general sense, the importance of life insurance, but do you know the various ways in which it can help you?

Life insurance can play a sizable role in your ability to achieve some important financial goals, such as these:

- **Helping your family maintain its lifestyle** – If you are married and have young children at home, you and your spouse may need to work. If you were no longer around and your earnings were gone, could your family still afford to live as they do now? Adequate life insurance can help them preserve their lifestyle.

- **Helping your children continue their education** – Even if you weren't planning to foot the entire bill for your children's college education, you still might be doing what you can, such as contributing to a 529 education savings plan. If your income was lost, could your family still afford to continue these contributions? With enough life insurance, you can improve the chances that your children will at least get some financial help for college or vocational training.

- **Helping your survivors pay off debts** – Are all your debts paid off? If not, you could be leaving your family on the hook for some of them, such as credit cards and car loans – not to mention your mortgage. Also, as uncomfortable as it may be to consider it, funeral and burial costs can easily run into the thousands. The proceeds of your life insurance policy can help pay down debts, handle your final expenses – and relieve your family of costly burdens.

- **Helping your spouse build resources for retirement** – It's almost impossible for most of us to save too much for retirement. Your spouse may already have some retirement accounts, such as a 401(k) and an IRA, but will these be enough to sustain a long retirement? Through life insurance, you can potentially add significant amounts to your spouse's retirement assets.

As we've seen, you can accomplish a lot with life insurance. But how much do you need?

If you want the appropriate amount of coverage, you should consider a variety of factors. How much do you earn? How much does your spouse earn? How many children do you have? How old are they? How much do you owe on your home? By answering these and other, similar questions, you can arrive at a coverage level that's suitable for your needs. Also, keep in mind that those needs will change – for example, if your children are grown and you've downsized your living arrangements, you may require less insurance than at earlier times in your life.

Life Insurance Awareness Month is a good time to remind yourself of the importance of insurance and of the need to own the correct amount. So, review your coverage soon – after all, you can't predict the future, but you can still prepare for it.

*This article was written by Edward Jones for use by your local Edward Jones Financial Advisor. Edward Jones is a licensed insurance producer in all states and Washington, D.C., through Edward D. Jones & Co., L.P., and in California, New Mexico and Massachusetts through Edward Jones Insurance Agency of California, L.L.C.; Edward Jones Insurance Agency of New Mexico, L.L.C.; and Edward Jones Insurance Agency of Massachusetts, L.L.C.*



## FACILITY FACT SHEET

By Jennifer Garner

### ANDERSON COUNTY

#### Guest Home Estates Assisted Living Facility

806 West 4th Street, Garnett, Ks 66032, Phone: 785-448-6884

**Locked doors or require code to enter building:** No

**Accepts Alzheimer's/Dementia Residents:** Dementia Residents

**Locked unit:** No

**Types of payment accepted:** Private pay and Medicaid

**Accepting pending Medicaid:** Yes

**Number of beds:** 24

**Special features/attractions:** Newly built pergola overlooking garden and butterfly pavilion on the east patio. Residents enjoy day trips with staff including local tours and eating out at restaurants. Private spa room. All rooms are private with private bathrooms.

#### Parkview Heights

101 North Pine Street, Garnett, Ks 66032, 785-448-2434

**Locked doors or require code to enter building:** No

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, and Private pay

**Accepting pending Medicaid:** Please contact the facility for more information

**Number of beds:** 45

**Special features/attractions:** Parkview Heights (formerly Golden Heights Living Center) is specifically designed to provide residents with progressive, short-term rehabilitation and skilled nursing services, in a beautifully-appointed, homelike environment. We also provide restorative programs, Alzheimer's services, respite care and hospice care.

Please visit us at [www.parkviewheights.com](http://www.parkviewheights.com) for additional information.

### COFFEY COUNTY

#### Sunset Manor/Coffey County Hospital Long Term Care Unit

128 South Pearson Ave, Waverly, Ks 66871, 785-733-2744

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** No

**Types of payment accepted:** Medicaid and Private pay

**Accepting pending Medicaid:** No

**Number of beds:** 30

**Special features/attractions:** Small Facility

#### The Meadows Assisted Living

1201 Martindale, Burlington, Ks 66839, 620-364-8861

**Locked doors or require code to enter building:** No

**Accepts Alzheimer's/Dementia Residents:** No

**Locked unit:** No

**Types of payment accepted:** Private Pay

**Accepting pending Medicaid:** No

**Number of beds:** 24 apartments

**Special features/attractions:** NA

### FRANKLIN COUNTY

#### Ottawa Retirement Village

1100 West 15th Street, Ottawa, Ks 66067, 785-242-5399

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** No

**Types of payment accepted:** Medicare/Medicaid/Private/Insurance

**Accepting pending Medicaid:** Yes, but by case only

**Number of beds:** 93 in long term care and 71 in assisted living

**Special features/attractions:** 4 levels of care, Skilled nursing, residential care, assisted living, and independent apartments

#### Morningstar Care Homes

622 High Street, Baldwin City, Ks 66006, 785-594-2603

**Locked doors or require code to enter building:** Requires key code

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** Entire Facility requires key code to enter/exit

**Types of payment accepted:** Private pay or Medicaid HCBS

**Accepting pending Medicaid:** No

**Number of beds:** 10-12

**Special features/attractions:** We specialize in memory care associated with Alzheimer's, Dementia, and Parkinson's. We have small Homes staffed with caregivers 27/7 in which we can care for 10-12 people at a times. Our smaller communities allow us to offer very specialized and personalized care.

#### Richmond Healthcare and Rehab

340 East South Street, Richmond, Ks 66080, 785-835-6135, 785-214-0871

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Yes, have a 16-bed secured unit specializing in dementia care with their own dining room, activities, and secured courtyard

**Locked unit:** Yes

**Types of payment accepted:** Medicaid, Medicare, HMO's, and Private Pay

**Accepting pending Medicaid:** Yes

**Number of beds:** 60

**Special features/attractions:** Besides the traditional skilled therapy services we also offer specialized care such as trach care, trilog, exceptional wound care program, telemedicine where a physician can see a patient through a tv monitor and look at wounds, etc. with the nurse operating the equipment, new specialized therapy equipment for short stay therapy and outpatient therapy, cook to order breakfast, food orders 24/7, restaurant style meals, allow residents to sleep in, eat when they want, go to bed when they want, etc. We are involved in the PEAK program, so we try to allow the residents to live just like they did at home.

Continued on page 7

Are you having difficulties resolving your  
KanCare/Medicaid issues?

AD ASTRA PER ASPERA

# KanCare

## Ombudsman

HERE TO ASSIST YOU

1(855) 643-8180 [kancare.ombudsman@ks.gov](mailto:kancare.ombudsman@ks.gov)  
[www.kancare.ks.gov/kancare-ombudsman-office](http://www.kancare.ks.gov/kancare-ombudsman-office)

## Facility Fact Sheet *Continued from page 6*

### Wellsville Manor

304 West 7th Street, Wellsville, Ks 66092, 785-883-4101

**Locked doors or require code to enter building:** Yes, a code is required for the entire facility

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, and Private Pay

**Accepting pending Medicaid:** Yes

**Number of beds:** 60 Beds for skilled and 20 beds for assisted living

**Special features/attractions:** Family owned and operated. We also embrace resident-centered care. We are driven by what the resident's wants and needs.

### Meadowbrook Rehabilitation Hospital

427 West Main Street, Gardner, Ks 66030, 913-856-8747

**Locked doors or require code to enter building:** Yes, on the Skilled Unit and no on the Acute Rehabilitation Hospital

**Accepts Alzheimer's/Dementia Residents:** Yes, if not needing "Secure" unit

**Locked unit:** Yes, for Traumatic Brain Injury Patients (age of these patients is typically 16-65)

**Types of payment accepted:** Medicare and Medicaid on all units and Rehabilitation accepts multiple commercial insurance plans as well

**Accepting pending Medicaid:** Yes, only for long term care unit

**Number of beds:** 54-Rehabilitation beds and 42-Skilled beds

**Special features/attractions:** New Acute Rehabilitation Hospital Unit- 22 ALL PRIVATE SUITES- CARF Accredited specializing in Physical, Occupations and Speech Therapy. Designed to return individuals back to their home environments within the shortest amount of time following a Stroke, Brain Injury, Fracture, Amputation, Neurologic Disorder or other life-altering illness or event.

## LINN COUNTY

### The Residencies of Pleasanton

706 15th Street, Pleasanton, Ks 66075, 913-352-6658

## MIAMI COUNTY

### Vintage Park of Osawatomi

1520 Parker Ave, Osawatomi, Ks 66064, 913-755-2167

**Locked doors or require code to enter building:** Doors lock only at night

**Accepts Alzheimer's/Dementia Residents:** No

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, Private Long-Term Care Insurance

**Accepting pending Medicaid:** No

**Number of beds:** 33

**Special features/attractions:** Private and companion suites with private bathroom, kitchenette and walk in closet.

All-inclusive pricing, three restaurant style meals a day plus snack, medication management, weekly housekeeping and personal laundry,

24-hour support from care staff, emergency response system, health status monitoring, respite and short term careful stays available, maintenance and basic utilities included, basic cable, beauty salon, and life enriching activities and events.

### Louisburg Healthcare & Rehabilitation Center

1200 South Broadway, Louisburg, Ks 66053, 913-837-2916

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Yes, following an evaluation

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, Private, Most Commercial Insurances

**Accepting pending Medicaid:** Yes

**Number of beds:** 60

**Special features/attractions:** Lymphedema Treatment Therapy, Physical Therapy, Occupational Therapy, Speech Therapy, and Wound Care

### Life Care Center of Osawatomi

1615 Parker Ave, Osawatomi, Ks 66064, 913-755-4165

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Yes

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, and Private

**Accepting pending Medicaid:** Yes

**Number of beds:** 110

**Special features/attractions:** Outstanding rehab program for both in-patient and out-patient rehabilitation. Work closely with several Hospice programs. In-house beauty shop.

## OSAGE COUNTY

Osage Nursing Center

1017 Main Street, Osage City, Ks 66523, 785-528-3138

**Locked doors or require code to enter building:** Yes

**Accepts Alzheimer's/Dementia Residents:** Alzheimer's and Dementia depending on their needs

**Locked unit:** No

**Types of payment accepted:** Medicare, Medicaid, Private pay, and work comp

**Accepting pending Medicaid:** Yes, and assist with completing the application and our SSD checks the progress weekly through the liaison office

**Number of beds:** 56

**Special features/attractions:** We have an in-house therapy team that provides therapy up to 7 days a week

## Upcoming Events

**Coffey County Health Fair:** 9am-1pm - October 12th @ (Burlington Recreation Center, Burlington, KS)

**Linn Valley Lakes Health Fair:** 9am-Noon - October 19th @ (Linn Valley Clubhouse - 6 Lakeview Lane, Linn Valley, KS)

**Linn County Senior Resource Fair:** 9am-Noon - October 26th @ (Mound City First Baptist Church - 8424 Paine Road, Mound City, KS)

**Stuff-A-Bear Event Franklin County:** 10am-11am - December 28th @ (First Baptist Church, 410 S Hickory, Ottawa, KS)

## KS COMMISSION on VETERANS' AFFAIRS

Contact your representative by mail or phone.

**Anderson & Linn Counties - 620-331-0540**

200 Arco Place, Rm. 421, Box 117,

Independence, KS 67301

[VSR003.ink.org](http://VSR003.ink.org)

**Coffey & Osage Counties - 620-342-3347**

Kress Center, Suite 1D, 702 Commercial St.,

Emporia, KS 66801

[VSR006@cableone.net](mailto:VSR006@cableone.net)

**Franklin & Miami Counties - 785-843-5233**

745 Vermont, Lawrence, KS 66044

[VSR012@sunflower.com](mailto:VSR012@sunflower.com)

This is a free service to assist veterans and their dependents with veteran service work.

## HOME TOWN HEALTHCARE

One of the main reasons people turn to hospitals is due to the unique and skillful abilities physicians and nurses are trained for. Fortunately though, you can have the same skilled services hospitals have right in your own *home* through *Home Town Health Care's* skilled nursing services. Our nurses are licensed, trained, and experienced.

What sets *Home Town Health Care* apart from everyone else?

- *Kansas family owned and operated*
- *Accept almost all insurance*
- *Zero deficiency company*
- *2017 Governors Small Business Award*
- *Six locations across eastern Kansas*

1-888-387-1160

[www.HomeTownHealthCare.net](http://www.HomeTownHealthCare.net)

Emporia - Lyndon - Fredonia - Sedan - Oswego - Independence

# Knowledge for Life

By Chelsea Richmond, Frontier Extension District  
Family and Consumer Sciences Agent  
Nutrition, Food Safety, and Health



## Common Food Safety Myths

It is a question many of us have often faced. We find a forgotten container of leftovers in the back of the refrigerator and as we pull it out, we ask, “this smells fine, so is it safe to eat?”

The food items that we grow, purchase, and prepare need to be handled and stored in a proper manner in order to prevent the growth of harmful bacteria that can lead to foodborne illness and getting sick. Below you will find five common food safety myths with facts presented that will help reduce the risk of foodborne illness:

**Myth:** I don’t need to rinse this melon for safety – the part I eat is on the inside!

**Fact:** Yes, you are not eating the rind of the melon, but there are many ways for pathogens or bacteria on the outside of the melon to contaminate the edible portion. For example, a knife or peeler passing through the rind can carry bacteria from the outside into the flesh of the melon. Additionally, the rind can also touch the edible portion when the fruit is arranged or stacked for serving or storage.

Remember to play it safe and rinse melons under running tap water while rubbing with your hands or scrubbing with a clean produce brush. And, remember to dry the melon with a clean cloth or paper towel.

**Myth:** Leftovers are safe to eat until they smell bad.

**Fact:** There are many different types of bacteria, some of which cause illness in people and others that don’t. The types of bacteria that can cause foodborne illness do not necessarily affect the taste, smell, or even the appearance of food.

In order to prevent getting sick, freeze or toss refrigerated leftovers within 3 to 4 days, even if they smell and look fine. Also, if you are not sure how old your leftovers are or how long they have been in the refrigerator, toss them. Remember, “when in doubt, throw it out!”

**Myth:** Putting chicken in a colander and rinsing it with water will remove bacteria like Salmonella.

**Fact:** Rinsing chicken in a colander will not remove bacteria. In

fact, it can spread raw juices around your sink, onto your countertops, and onto ready-to-eat foods. Bacteria in raw meat and poultry can only be killed when cooked to a safe minimum internal temperature, which for poultry is 165 degrees Fahrenheit, as measured by a food thermometer.

So, save yourself the messiness of rinsing raw poultry. It is not a safety step and can cause cross-contamination. And, remember, always use a food thermometer to check the internal temperature of your food.

**Myth:** Only kids eat raw cookie dough and cake batter. If we just keep kids away from the raw products when adults are baking, there won’t be a problem!

**Fact:** People often understand the dangers of eating raw dough due to the presence of raw eggs and the associated risk with Salmonella. Consumers, however, should also be aware that there are additional risks associated with eating raw dough, such as harmful strains of E. coli in a product like flour. Flour is derived from a grain that comes directly from the field and is not typically treated to kill bacteria. And, animal waste, for example, can potentially contaminate the grain before it is harvested or milled into flour. When raw cookie dough is eaten, steps haven’t been taken to kill the harmful bacteria before it is eaten.

So, whether you are a kid or an adult, it is important to remember that eating raw doughs and batters have the potential to make you sick. Also, remember to wash your hands, work surfaces, and utensils after they have been in contact with flour and raw dough products.

**Myth:** Once a hamburger turns brown in the middle, while cooking on the stove or grill, it is cooked to a safe temperature and is okay to eat.

**Fact:** You cannot use visual cues to determine whether or not food has been cooked to a safe minimum internal temperature. The only way to know that food has been cooked to a safe temperature is to use a food thermometer. Ground meats, such as hamburger, should be cooked to 160 degrees Fahrenheit.

Source: Partnership for Food Safety Education – [www.fightbac.org](http://www.fightbac.org)

## SAVE THE DATE

### WHAT: LINN COUNTY HEALTH FAIR



WHEN: FRIDAY, OCTOBER 26TH, 2018

WHERE: FIRST BAPTIST CHURCH (8424 PAINE ROAD, MOUND CITY, KS)

TIME: 9AM-NOON

BINGO, GIVEAWAYS, FLU SHOTS, FREE HEALTH SCREENINGS, AND MORE!



## LOW VISION GROUP

Wednesday, October 24th, 2018

1:30-2:30PM

ECKAAA Conference Room

Guest Speaker: Mandy Smith

Topic: Vision Loss and Grief, Reducing Falls & New Vision Technology



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Ranking based upon 13 nationally endorsed quality measures.  
Kansas Foundation for Medical Care

# Medicare Part D Worksheet

The area agency will once again be assisting with Part D Medicare Drug Plan Open Enrollment comparisons. Open Enrollment begins October 15th and ends December 7th. Once the form is completed and returned a comparison will be ran and you will be sent the top 3 plans for the medications you listed. If you need more explanation or assistance in reading the comparison contact the agency at 785-242-7200 or 1-800-633-5621. Appointments will not automatically be made but can be made after you receive the comparison if you need more help. You may also pick up a worksheet at the office at 117 S Main, Ottawa, M-F, 8:00 to 5:00pm, or have one mailed or emailed to you.

## Medicare 'Doughnut Hole' Will Close in 2019 Drug companies will pay more to lower some Part D costs AARP, February 2018

Medicare Part D beneficiaries who have high prescription drug expenses currently have to pay more once the total cost of their medicines reaches a certain threshold.

Medicare beneficiaries with high annual prescription drug costs will get some relief a year earlier than expected as a result of the budget deal passed in February.

Part D beneficiaries who have high prescription drug expenses currently have to pay more once the total cost of their medicines reaches a certain threshold. That's due to a quirky aspect of Part D called the coverage gap, also known as the "doughnut hole."

The doughnut hole has been narrowing each year since the Affordable Care Act (ACA) was passed in 2010. The gap was scheduled to close in 2020, when beneficiaries would be expected to pay 25 percent of the cost of all their prescriptions while they were in the gap.

Under the recent budget deal, the doughnut hole will now close next year. Beginning in 2019, Part D enrollees will pay 25 percent of the cost of all their prescription drugs from the time they enter the gap until they reach catastrophic coverage.

For 2018, the threshold for entering the doughnut hole remains at \$3,750 worth of drug costs. Once a Medicare enrollee passes that limit, he or she is in the coverage gap and will have to pay 35 percent of the cost of brand-name drugs and 44 percent of generics. They will continue to pay those costs until their out-of-pocket spending reaches \$5,000. Once they hit that limit, they'll no longer be in the doughnut hole and will pay no more than 5 percent of their drug costs for the rest of the year.

Congress made the early close of the doughnut hole possible by requiring certain pharmaceutical manufacturers to pay more of the costs for enrollees who are in the coverage gap. Currently, brand-name drug makers pay 50 percent of enrollees' brand name drug costs while they are in the coverage gap. Under the new budget law, they will now pay 70 percent.

2019 For Office Use Only: \$ Before \_\_\_\_\_ \$ After \_\_\_\_\_  
Drug List ID: \_\_\_\_\_ Password Date: \_\_\_\_\_

**MEDICARE PRESCRIPTION DRUG COVERAGE WORKSHEET**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ COUNTY: \_\_\_\_\_ RACE: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
MEDICARE ID NUMBER: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_  
EFFECTIVE DATE FOR PART A \_\_\_\_\_ FOR PART B \_\_\_\_\_

Contact information if you are handling this worksheet for someone else:  
Name \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

1. Do you currently have a Part D Prescription Drug Plan? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what company? \_\_\_\_\_ what Plan? \_\_\_\_\_

2. If you received a letter from Social Security about Extra Help please attach it.  
Are you eligible for extra help but not currently receiving it (see guidelines below)? Yes \_\_\_\_\_ No \_\_\_\_\_

**2019 annual income and resource limits to qualify for Extra Help**  
Single- income less than \$1,538/month & resources less than \$14,100  
Married (living w/spouse)- income less than \$2078/month & resources less than \$28,150  
\*Numbers based on information at [www.medicare.gov](http://www.medicare.gov) and [www.socialsecurity.gov](http://www.socialsecurity.gov), Sep 2018\*  
\*\*\*\*\*  
-HOW DO I GET HELP DECIDING WHAT PRESCRIPTION DRUG I NEED?  
1. Complete this worksheet and return it to ECKAAA- 117 S. Main, Ottawa, KS 66067  
2. You will be mailed/emailed a comparison of the top 3 plans w/an explanation and instructions.  
3. If you would still like help or require further assistance call 785-242-7200 or 800-633-5621.

\*\*\*Please list all the prescription medications you take on the back\*\*\*

Donations are appreciated to help offset the costs for printing and mailing comparisons and enrollment assistance forms.  
Checks may be made payable to ECKAAA/SHICK. Thank you for your generosity!

\*\*\*If you take a generic medication, please write down that name, rather than listing the brand name.

Drug List ID: _____	Password Date: _____				
\$ Before: _____	\$ After: _____				
Please print the info below					
	Complete Drug Name	Will you take generic if available?	Capsule or Tablet	Dosage/ Strength	# of Pills Taken Per Day (Example: 1 tab 2 x daily)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Comments: \_\_\_\_\_

Please list your local pharmacy (we cannot run comparisons for mail order pharmacies). Please include name and address.

**YOU WILL BE EMAILED OR MAILED PLAN INFORMATION ON THE TOP 3 PLANS FROM THE MEDICARE WEBSITE. CALL UPON RECEIVING IT IF YOU NEED FURTHER ASSISTANCE. 800-633-5621 or 785-242-7200.**

RETURN THIS FORM TO:  
ECKAAA, 117 S. MAIN ST., OTTAWA, KS 66067 or  
FAX 785-242-7202 or EMAIL [leslear@eckaaa.org](mailto:leslear@eckaaa.org)

Senior Health Insurance Counseling for Kansas (SHICK)

# OPEN ENROLLMENT

## October 15- December 7

Funded by the Older Americans Act through the Kansas Department on Aging and Disability Services. Our agency does not assist with enrollment for Parts A or B - this must be completed through your local social security office.

East Central Kansas Area Agency on Aging

### You're Getting a New Medicare Card!

Medicare will mail new Medicare cards between April 2018 – April 2019. Your card will have a new Medicare Number instead of a Social Security Number.

Make sure your mailing address is up to date so you get your new card. Visit [ssa.gov/myaccount](http://ssa.gov/myaccount) or call 1-800-772-1213 (TTY: 1-800-325-0778) to correct your mailing address.

Visit [Medicare.gov](http://Medicare.gov) for the latest updates.

CMS Product No. 12006 August 2017

# CDDO Corner

Amber Vogeler

Community Development Disability Organization

Serving Coffey, Osage, and Franklin Counties

117 S. Main - Ottawa, KS 66067

(785) 242-7200 - fax: (785) 242-7202

## Person-Centered Thinking in Developmental Disabilities — Dreaming Possible Dreams

By Lynn K. Jones, DSW

*People with developmental disabilities dare to dream outside the box of standard social services options with the guidance of astute, creative professionals, family, and community.*

“I have a dream today...” intoned Martin Luther King, Jr., as he painted his vision for America’s future. From that moment, America was changed. The power of that dream publicly shared with a crowd on the Washington Mall continues to be felt 40 years later, reverberating through the message of hope that set the tone of Barack Obama’s election.

Trying to understand the dreams that people have for their lives is not foreign territory for most of us; as children, we were encouraged to dream. What child wasn’t asked the question “What do you want to be when you grow up?”

But dreams are still denied to some groups of Americans. Rarely have people asked those with developmental disabilities what dreams they’ve had for their lives. Their futures, limited by the reality of their disabilities, have been about finding suitable options within the social service system. For many, these options have been based on what is available among institutions and group homes, sheltered workshops, and day programs, not on their dreams. Instead of being encouraged to dream about their futures, they have been forced to grapple with the realities of their disability and how it defines their lives.

Susan L. Parish, PhD, MSW, an assistant professor at the University of North Carolina at Chapel Hill and director of the Developmental Disabilities Training Institute at the University of North Carolina, explains it this way: “Honoring the desires of the individual and his or her family is a vastly different proposition from putting a person into a residential facility and then giving them whatever that facility offers. In some facilities, if occupational or speech therapy is offered, then the person will automatically get that. That is a different approach from saying, ‘Well, here is an individual, and what is it that they want to achieve with their life? What can we scaffold around them to help them to achieve their desires?’”

### An Appreciative Perspective

Shifting thinking about people with developmental disabilities from their deficits to appreciating what they have is at the core of person-centered thinking and akin to social work’s strengths-based approach.

Angela Amado, PhD, has been working on implementing person-centered approaches for people with developmental disabilities for the last 20 years. She explains how a person-centered approach differs from the familiar systems-centered approach: “In a system-centered approach you see someone as a client and focus on their deficits and their needs, which lead you to certain conclusions as to what kind of treatment the client needs or what kind of support the client needs. In a person-centered approach, we see someone as a person first, not someone who is defined by their disability. By understanding who this person is, we see the person in terms of the person’s capacities; we appreciate the person for what the person can do, for the gifts the person has, and how the person can contribute to others. This shifts thinking to how can we help the person have as normal a life as possible. This does not mean ignoring the disability but rather supporting it in as normal a way as possible. The focus is on supporting the personhood as much as possible.”

Stephanie Beck, MSW, LCSW, is a clinical director in North Carolina who works from a person-centered perspective and explains how supporting personhood alters the focus of social workers: “The individual has the right, and we have the responsibility. You talk to people who just want to go to school or just have guitar lessons. Our responsibility as social workers is to identify the steps to achieve what they want. It is like an onion. We have to peel the layers away to see what the steps are. All the steps are the barriers that have prevented the individual from achieving their dream.”

### Dreaming the Possible Dream

How does one begin to find out another’s dreams, especially someone who has been bombarded with the message that dreams are limited by a disability? Amado says it is not easy. “Some people with developmental disabilities don’t talk; some just say what they think is available in the services system,” she explains. “I met a woman once who lived in a facility with 24 beds. I asked her, ‘What do you see as your future?’ She responded, ‘Well, first I’m going to a waiver home then independent living.’ She had all the system categories down. That was what she had learned. But it wasn’t her dream. If you separated out what was offered to her in the system, what she really wanted was to live in her own apartment and get married.”

Helping people with a developmental disability dream involves being an astute listener. “You have to see underneath the first thing people say; you have to listen for the unsaid,” explains Amado.

Some social workers who are helping people with developmental disabilities to dream begin by taking all the traditional service options off the table. This forces the person to think about what else may be in their future beyond the service system.

### Expanding the Possibilities

“Our understanding of what is possible for people with a developmental disability keeps expanding,” explains Amado.

Sue Harding is an example of a woman who has been helped to dream about a life that few would have thought possible for someone with a developmental disability. Patti Scott, the CEO of an organization in New Jersey that supports people “to live the life they want to live,” helped Harding figure it out. Scott explains: “I first met Sue in 1998. She was living with her parents. We spent a number of months planning for what she wanted her life to look like. Because of her disability, she needed help with some basic self-care and in tasks like cooking. We put together a plan where she would move out of her parents’

home and would live with someone who did not have a disability and could help her in the ways that she needed help. We were all set to submit her plan to the state when she called and said, ‘I have decided I want to be a nun. Don’t tell my parents.’ She had done some paid work with the Sisters of Mercy, and it turned out she had been secretly dreaming about being a nun since she was 8 years old.”

Sometimes articulating the dream is the first step in making it happen. When Scott and Harding asked the sisters whether Harding could join their community, the idea seemed out of the question at first, but they figured out a way. Today, Harding has been an “associate” in the Sisters of Mercy community for the last 10 years. As part of her duties, she attends associate conferences, does some computer work for the community, coordinates volunteers, and answers the phones. “I may not officially be a nun, but I pray with the sisters, and I had a private ceremony with God. I do everything with the sisters,” Harding says.

Scott says that Harding has a “reciprocal relationship” with the sisters. With the supports that she has developed through the Sisters of Mercy community, the staff support that she needed dramatically diminished. In fact, she hasn’t needed any extra support for the last three years. She has developed a rich social life, including singing around the state with several sisters in a group they formed called Tender Mercy.

### Actualizing New Futures

Actualizing the dreams of people with developmental disabilities involves including the people who love them, care about them, and have been a part of their lives in some way. In Harding’s situation, these people included the Sisters of Mercy and her parents. Initially, she hadn’t wanted to tell her parents about this dream. When they learned of her dream, however, they supported her.

“A group of committed people come together to create a life of meaning and purpose on behalf of the individual with a developmental disability. If the people care about the person, they generally are willing to think more,” explains Amado.

Amado helped the mother of the 24-year-old woman, who could only dream about going to a waiver home, gather all the people who loved her daughter. This included her daughter’s “babysitter” from her teenage years. During the meeting, Amado determined that the woman had been the happiest when she had a relationship with her babysitter, who really loved her. “We found this out by asking questions of the group: ‘When was she the happiest in her life? When did she flourish the most?’” Amado explains.

The meeting resulted in an arrangement for the woman to move in with her beloved babysitter, her husband, and their new baby. The money that would have been spent paying for a caretaker went instead to the babysitter, allowing her to be able to stay home and take care of the family’s new baby instead of going back to work. It was a win-win situation for everyone.

### Systems Transformation

Person-centered thinking is transforming whole systems of care and organizations that serve people with developmental disabilities.

The Tri-Counties Regional Center in southern California is responsible for developing plans and providing services for more than 10,000 people with developmental disabilities within its three-county service area. The center is an example of an organization that has been transformed by creating “a person-centered thinking culture.”

Omar Noorzad, PhD, the center’s executive director, explains that they are committed to doing more than just consistently and successfully meeting basic assurances—the clear, nonnegotiable requirements that keep people safe, healthy, and protect their basic rights. “We need to also have the skills, actions, and practices that will support the vision of the future for each person that we serve,” he says. “This entails changing from a consumer mindset to an informed and active citizen mindset. Increasingly, people tell us what they expect: It is that meaningful and individualized results are paramount. Person-centered thinking is essential to achieving these outcomes.”

To see people with developmental disabilities as informed and active citizens rather than consumers of services is a dramatically different view. Just as King dreamed of a future when black children would not be judged by the color of their skin, today a new future is being constructed for people with disabilities to dream possible dreams.

—Lynn K. Jones, DSW, is a freelance writer and an executive coach and organizational consultant in Santa Barbara, CA. As a specialist in organizational culture, she supports leaders and organizations in developing mission-driven cultures.

### Key Values and Principles of a Person-Centered System

A person-centered system involves person-centered thinking, planning, and organizations. These guiding principles apply to the system serving all people who need long-term services and supports, and their families. A person-centered system acknowledges the role of families or guardians in planning for children/youth and for adults who need assistance in making informed choices.

To be person-centered means the following:

- treating individuals and family members with dignity and respect;
- helping individuals and families become empowered to set and reach their personal goals;
- recognizing the right of individuals to make informed choices, and take responsibility for those choices and related risks;
- building on the strengths, gifts, talents, skills, and contributions of the individual and those who know and care about the individual;
- fostering community connections in which individuals can develop relationships, learn, work and produce income, actively participate in community life, and achieve their full potential;
- promising to listen and act on what the individual communicates;
- pledging to be honest when trying to balance what is important to and for the person;
- seeking to understand individuals in the context of their age, gender, culture, ethnicity, belief system, social and income status, education, family, and any other factors that make them unique;
- acknowledging and valuing families and supporting their efforts to assist family members;
- recognizing and supporting mutually respectful partnerships among individuals, their families, communities, providers, and professionals;
- advocating for laws, rules, and procedures for providing services, treatment, and support that meet an individual’s needs and honor personal goals; and
- endorsing responsible use of public resources to assure that qualified individuals are served fairly and according to need.

— As adopted by the North Carolina Department of Health and Human Services Long-Term Services and Supports Cabinet

2018. Social Work Today. Person-centered thinking in developmental disabilities – Dreaming possible dreams. Retrieved from: [http://www.socialworktoday.com/archive/exc\\_011909.shtml](http://www.socialworktoday.com/archive/exc_011909.shtml)

## Social Security Disability Benefits For Seniors

*By Alexandra R. English*

When seniors think of Social Security, they are probably thinking of retirement benefits. But, there are three main types of Social Security Benefits an individual (even a senior citizen) can qualify for on his/her own. Benefits an individual might receive from another's work record, such as widow's benefits, are not included in this discussion.

1) SSDI – Social Security Disability Insurance Benefits: When someone is disabled and unable to work but has previously worked for at least 40 quarters, that individual may apply for SSDI. If approved, a monthly disability award is paid to that person based on the amount of Social Security taxes he or she paid into the system while working. For example, someone who was working as a pharmacist for 20 years before becoming disabled would receive a much higher SSDI benefit than someone who worked as a bus driver for 20 years before becoming disabled. SSDI is a federal social security benefit. Individuals on SSDI qualify for Medicare within 1 year of being approved.

2) SSI – Supplemental Security Income: When an individual is disabled and unable to work but has not previously worked for at least 40 quarters and has no other assets or income, that individual may apply for SSI. If approved, a monthly disability award, based on the Federal base rate, is paid to that individual for an amount no higher than \$750 per month. A SSI eligible individual with an eligible spouse can be entitled to an amount no higher than \$1,125 per month per couple. Maximum Federal Supplemental Security Income payment amounts increase with regular cost-of-living increases. SSI is a benefit paid only to low income individuals. For many low income Americans, receiving SSI is the difference between living on the streets and having enough money for a small apartment. Depending on a family's household income, disabled children are also eligible for SSI. SSI is a federal social security benefit administered through the state. Individuals on SSI qualify for Medicaid immediately upon being approved. SSI benefits typically last for life, as most individuals needing SSI are not eligible for Social Security Retirement Benefits.

3) Social Security Retirement Benefits: At age 66, an individual qualifies for full retirement benefits based on his or her previous work record. Similar to Social Security Disability Income, the more Social Security taxes an individual paid into the system while working, the higher that individual's retirement benefits are. These retirement benefits do not terminate until death. SSDI is a federal social security benefit. Upon turning 65, individuals automatically receive Medicare Part A, regardless of whether they are already receiving Social Security Retirement Benefits.

For many seniors who are not yet 66 years old, but who would consider themselves disabled and unable to work, applying for SSDI or SSI is the best option for receiving a steady income. The disability application process can be grueling, however. In order to receive SSDI or SSI, you must meet a disability listing. A disability listing is a category of disability. You can find the Social Security Administration's listing categories here: <http://www.ssa.gov/disability/professionals/bluebook/AdultListings.htm>. Examples of disabilities that could easily be approved for SSDI or SSI include cardiovascular, musculoskeletal, or mental disorders. If you are older you do not necessarily have to meet a listing. Age, education, and past relevant work can also be considered when determining your eligibility. A 60 year old with a disability has a better chance of being approved for disability benefits than a 30 year old with the same disability. Accordingly, if you are a senior who is under age 66, and believe you are too sick or disabled to work, you should consider applying for disability.

At age 62 you have the option of taking early retirement benefits. However, anyone who chooses to take early retirement benefits will receive a reduction in retirement benefits. For example, if you choose to take early retirement at age 63, you may only receive

\$1,000 per month for the rest of your life, whereas if you waited to take your full retirement benefits at age 66 you would receive \$1,300 per month for the rest of your life. Therefore, you can see how beneficial it would be, if you are disabled, to receive SSDI benefits until you reach the age of 66 when you can start collecting your full retirement benefit, which is higher than the amount you can receive on disability. You cannot receive both SSDI benefits and Social Security Retirement Benefits at the same time.

Upon initial application, many disability requests are denied. You only have 60 days to appeal that decision. If you do not already have an attorney to handle your disability case prior to this point, you will want to find one to assist you with your appeal. Because deadlines are so short, you should contact an attorney right away. Some disability attorneys will take your case on a contingency fee basis, which means that if you do not win your disability claim, the attorney does not get paid and you do not owe that attorney any money. However, if you do win and get a back-award (the amount owed to you from the date you first applied for disability, had it been awarded immediately), that attorney will get a portion of your back-award.

The appeal process is daunting and complex. You must make sure that you have been seeing a doctor regularly to document your disability. If you appear at your disability hearing without any medical evidence, the administrative law judge will not be able to approve your disability. You will also be required to testify at your hearing, and the judge will use your credibility as evidence. If you appear to be lying, if you have refused medical treatments, or if you are currently dependent on drugs or alcohol, your claim will likely be denied. These are all things that your disability attorney should discuss with you.

Kansas Legal Services handles both SSDI and SSI appeals. If you believe you are suffering from a disability that prevents you from working, you can apply for our services by calling 1-800-723-6953. For more information about SSI and SSDI benefits and to submit your initial application, you can visit the Social Security Administration's website at: <http://www.socialsecurity.gov/disabilityssi/apply.html>.

### CONSUMER ASSISTANCE

To report suspected Medicare fraud: - **800-876-3160**

For info about Medicaid, call the Department for Children & Families - **888-369-4777**

For no-cost mediation regarding problems with Medicare Providers, call the Kansas Foundation for Medical Care (KFMC) **800-432-0407**

KU Med Center Pain Management Hotline: **913-588-3692**

Centers for Medicare/Medicaid Services (CMS) Website: [www.medicare.gov/nhcompare/home.asp](http://www.medicare.gov/nhcompare/home.asp)

[www.mindsmatterllc.com](http://www.mindsmatterllc.com)

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to receive information and counseling on Reverse Mortgages (fees may apply for counseling) National Council on Aging - **855-899-3778**



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EQUAL HOUSING LENDER

## 10 WAYS TO PROTECT YOUR BRAIN FROM ALZHEIMER'S

by Dr. Frank Lipman

Alzheimer's. The mere mention of the word sends shivers down our collective spines. Millions have been touched by it, having witnessed the devastation up close with loved ones who've been diagnosed. It is, as we all know, a grim picture, so it's imperative that each one of us does everything possible to avoid the disease.

While we don't know exactly what causes Alzheimer's, there is mounting evidence that suggests the changes you make now can have a considerable impact on what happens to your brain decades from now. The current thinking is that we may be able to significantly slow or even stop the progression of Alzheimer's by adopting as many brain-supportive habits as early in life as possible. Here are the big ones to help keep your brain in top form for as long as possible:

### 1) TAME INFLAMMATION, 'ROUND THE CLOCK.

Chronic inflammation is often the starting point for diseases that these days are tragically becoming endemic, such as Alzheimer's and other forms of dementia. Fortunately, inflammation can be tamed, by trading sugars, industrial oils, processed foods, and factory-farmed meats for wholesome, fresh, consciously-raised, real foods and by maintaining the bacterial balance of the gut microbiome. To get on a more brain-supportive path, start with a 2 or 3 week cleanse to fortify and repair your gut, and add in the brain-loving foods listed below.

### 2) MORE MOVEMENT, AND A LOT LESS COUCH-POTATO TIME.

Simply put, moving your butt is good for your brain. Frequent movement helps improve memory and slows the rate of cognitive decline. Movement also increases blood flow to the brain, key for the health of the organ. According to the Alzheimer's Research & Prevention Foundation, regular exercise cuts the risk of developing the disease by half, so keep moving. If you're a desk jockey, work more movement into your day by setting an alarm on your phone to remind you to get out of your chair and do a lap or two around the office every 30 minutes or so. When time's too short for a 30 or 45 minute exercise session, embrace the idea of the 'micro session,' as in, do any kind of movement for ten minutes at least once or twice a day. Ten minutes of movement – that's about 3 songs worth on the I-phone – done several times in a day can keep the blood pumping to everywhere you want it to go.

### 3) MAKE QUALITY SLEEP A TOP PRIORITY.

Sleep, as well as its deeply refreshing counterpart, meditation, is not a luxury; it is an absolutely essential act of daily maintenance, and it's your ally in keeping your brain sharp and youthful. So, next time you plan to cut sleep corners, consider this: sleep may be pivotal in avoiding early mental decline. When you sleep, your brain protects itself from toxic proteins. Its glymphatic system flushes cerebrospinal fluid through the brain to remove proteins that accumulate between the cells, byproducts of neurological processes during the day. This "overnight cleanup" keeps the brain clear and healthy, but this brain-cleaning crew only works when you're asleep. If you don't let them do their work, it's like having a party one night and neglecting to clean up the mess the next day, and then having another party. These waste products begin to accumulate, the house starts to deteriorate. Science is now linking this toxic buildup with loss of neurological function. Over time, this "trash buildup" of proteins in the brain can contribute to dementia and Alzheimer's – so never underestimate the power of a good snooze! Be sure to get at least 7 hours of sleep a night.

### 4) WHAT GOES IN YOUR MOUTH MATTERS TO YOUR BRAIN.

Not paying all that much attention to your diet? Well, snap out of it! The recommended, wholesome foods below will help protect your brain by tamping down the cell-damaging inflammation that's considered a key contributor to the development of Alzheimer's. They'll also support the efforts of brain-protective glial cells which are thought to be responsible for pushing toxins out of the brain. So when you make your food choices throughout the day, think about feeding your head with the best brain foods possible, preferably organic leafy greens, colorful veggies, dark berries; nuts; healthy fats; and moderate amounts of organic, grass-fed or pasture-raised animals. Drink oolong or green teas and ditch sugar, processed foods, and industrial oils. Also, limit the amount of alcohol and, of course, cigarettes. They all can damage brain cells, in some cases, causing permanent brain changes, and, of course, boost Alzheimer's risk.



### 5) DITCH SUGAR – AND THE STANDARD AMERICAN DIET – TODAY.

As I often say, sugar is the devil because of its health-destructive properties. And now, there's yet one more reason to condemn the stuff – in addition to setting you up for obesity and type 2 diabetes, sugar may be destroying your brain cells. In fact, many scientists have taken to calling Alzheimer's the diabetes of the brain, or

'diabetes 3,' thereby making avoidance of all that sugar, simple carbs and processed foods endemic to the standard American diet of the utmost priority, that is, if you want to keep your brain healthy.

### 6) GET RID OF THE NON-STICK.

Cook using non-reactive materials like ceramic, enamel-coated cast iron, glass or silicone, instead of aluminum or non-stick cookware. Aluminum and non-stick have been tied to possible long-term health problems, including Alzheimer's, so steer clear. If, however you've got a kitchen full of non-stick, over time, replace your old stuff with healthier alternatives.

### 7) CHANGE YOUR EATING PATTERNS.

In recent months, chances are, you've heard about intermittent fasting – aka the 5:2 Diet or 8-Hour Window diet – as a trendy 'diet' that's making the news. But what you probably haven't heard is that it's showing some promise as a preventive tool to combat diseases of modern civilization like heart disease, stroke, cancer, and Alzheimer's disease. The theory is that the diet, in effect, re-sets the system and can help normalize blood glucose, blood pressure, and liver function, all of which in turn, protects brain health.

### 8) TAKE A BRAIN-BOOSTER.

In addition to eating a clean, plant-rich diet, I also recommend a few key supplements to help fill in nutritional gaps and strengthen the body's ability to ward off neurological decline. Among my favorite brain-supporters:

- Omega 3 fatty acids
- Methylated Folate and Vitamin B12
- Vitamin D
- Magnesium
- Nicotinamide Riboside
- Alpha Lipoic Acid
- Coenzyme Q10

To establish the appropriate levels for your needs, work with an integrative practitioner to develop a supplementation plan, and be sure to factor in any prescription med you may be taking — some commonly prescribed drugs, such as statins, can drain the body of key nutrients. For those already suffering from cognitive decline, consider including additional supplements such as acetyl-L-carnitine, phosphatidylserine and ginkgo biloba to help improve brain function and slow the slide.

### 9) MEDITATE, MEDITATE, MEDITATE!

One of the simplest things you can do to support brain health every day? Meditate, to give the brain the downtime it needs to relax, restore and refresh itself. Too much unrelieved stress contributes to brain shrinkage in the area responsible for memory, so it's imperative to counteract it with meditation. Get your meditation practice flowing and start preserving that all-important grey matter volume.

### 10) DON'T HIBERNATE – CIRCULATE!

One final thought – be social and stay connected with friends, family, neighbors and community. Those who remain socially active and connected with others have a lower incidence of Alzheimer's – so get out there!



**Advocacy:** working for YOU and for our communities to ensure inclusion, accessibility and quality of life for people with all kinds of disabilities

**Partnerships:** working with partner programs and organizations for health, well-being and independent living for all

**Community Education:** a presence and a voice in promoting and organizing inclusive and educational programs and events

**Youth Employment:** programs and services to meet the needs of youth and young adults seeking career development & employment

## What is Independence, Inc.? We're more than you might think!

Since 1978, Independence, Inc. has served as a resource in Lawrence and Northeast Kansas through our mission to maximize the independence of people with disabilities through advocacy, peer support, training, transportation and community education. As an Independent Living Center, we work with people with various disabilities to live in the environments of their choice. We offer options, resources and advocacy to help people live fulfilling lives. Our vision is to work together in transforming our communities to be the best places in which people with disabilities can live, learn, and work.

What can we do for YOU?

For more information about Independence, Inc., our programs and services, visit us on the web [www.independenceinc.org](http://www.independenceinc.org) or call us at 785-841-0333.

We look forward to serving your independent living needs!

*Left to right: 1. a consumer enjoying her new accessible bathroom thanks in part to advocacy and information & referral through Independence, Inc. 2. Independence, Inc. intern works with a consumer on his fitness goals as part of a health access program. 3. Independence, Inc. volunteer enjoys a community event focused on inclusive music and movement. 4. An Independence, Inc. YEP! participant poses for a pic after securing permanent employment.*



## SAVE THE DATE

### WHAT: LINN COUNTY SENIOR RESOURCE FAIR



When: Friday, October 26th, 2018  
Where: First Baptist Church  
(8424 Paine Road, Mound City, KS)  
Time: 9AM-Noon

Who should attend? Anyone interested in receiving information on resources available to seniors, caregivers, and family members.

Health screenings, flu shots, giveaways, Free breakfast, and more!

Please **RSVP** if you'd like to attend. Call 785-242-7200 or email Jasmine Anderson at [jasminea@eckaaa.org](mailto:jasminea@eckaaa.org)

## Thank you sponsors!

### GOLD:

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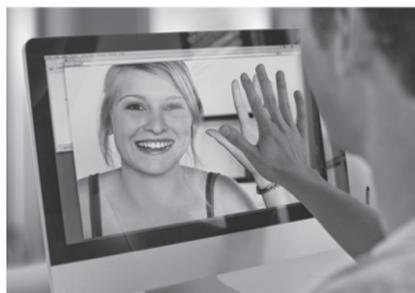
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# How Technology Benefits Senior Citizens

*Usage of smart, internet-connected devices is becoming the norm amongst people of all ages—even seniors. For the elderly, advanced technology and high-tech devices make daily tasks easier and can enhance quality of life. With technology, seniors have the tools and assistance to be more independent.*

## VIDEO CHATTING

Advances in technology now allow individuals to communicate effectively with their loved ones wherever they may be. Facetime and Skype have shaped the way we communicate with family and friends. Advancing camera capabilities, smartphone and tablet apps, and user-friendly access make it easier for seniors to maintain contact. Video chatting is a great way to foster social connection among seniors who may not have as many opportunities to talk to others. Continued social interaction with friends and family members could also help seniors with mental and cognitive health.



## SOCIAL MEDIA

Believe it or not, many seniors have active social media accounts. Platforms like Facebook, Instagram, and Twitter help seniors keep in touch with their children, grandchildren and friends. For caregivers and family members, social media is also a great way to keep tabs on how elderly family members are faring. With the growing popularity of live videos and social media “stories,” family members can get real-time updates on what their elders are up to, as well as insights into any health and wellness issues.

## GPS MOBILE SYSTEMS



GPS technology can help seniors find their way around town with easy-to-use apps compatible with smartphones and Apple Watches. For friends and family members, GPS technology can also help keep track of each others’ location. This could be especially beneficial for seniors with dementia or other cognitive impairments. Wearable tracking technology is also capable of sending real-time GPS locations to friends and family, offering safety and peace of mind.

## NON-EMERGENCY MEDICAL TRANSPORTATION

Rideshare companies such as Lyft have been branching out from their competitors to provide features for ease of use among all users.<sup>6</sup> Seniors can use apps to schedule rides to hospitals or medical appointments, helping them avoid unnecessary taxi or ambulance costs. Seniors don’t have to rely on friends or relatives for transportation either, which could mean huge boosts in independence and confidence, as well as more flexibility and opportunities for social interaction.

## FALL DETECTION MEDICAL ALERT SYSTEMS

Technology has advanced to help protect and save the lives of many seniors. Fall detection devices can sense when seniors are in dangerous situations, or when vitals change. With these systems, seniors can alert caretakers or contact help by simply pressing a button on a wristband or a necklace. Some wearable alert systems can even detect falls without the senior needing to press a button at all.<sup>7</sup> Emergency, family or friends are automatically alerted to ensure that the senior is okay.



## FINANCIAL PROTECTION

Financial exploitation is one of the most common types of elder abuse in the United States. In fact, one in nine seniors say they have been financially neglected or exploited in the past year. From “get rich quick” schemes to dishonest relatives, financial exploitation is a huge concern for seniors. In this age of advanced technology, seniors have the tools to protect themselves financially.

## MEDICATION REMINDERS

Thanks to modern technology, seniors don’t need to rely on brightly colored pill boxes to remember to take medication. There are many smart devices, apps, and wearables that can make sure seniors are taking the right pills at the right time. For example, the AdhereTech internet-connected smart pill bottle glows blue when it’s time to take medication, and if the senior misses a dose, a chime goes off to remind them. It can also alert caregivers or family members to missed doses. Apps such as WebMD feature intuitive medication reminders, and can be installed on wearable devices like the Apple Watch. The WebMD app displays on-screen instructions for taking medication, as well as the medication’s name and dosage.

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## FIRST FRIDAY FRIENDS

### Caregiver and Friends Tea



Caregivers and loved ones coming together to share

- a mid-morning tea and treat
  - conversations and activities around the monthly theme.
- Take home a few treats too!

**Day:** First Friday each month August-May

**Time:** 11:00 to 12:00

**Location:** Ottawa University Fredrikson Chapel, Meditation Chapel Partners: Fredrikson Center, ECKAAA, Winter Center

**Contact:** [shannono@eckaaa.org](mailto:shannono@eckaaa.org); [trish@winterc4rj.org](mailto:trish@winterc4rj.org)

### DATES and THEMES

**August 3:** Family Recipes, Summer Favorites

**September 7:** The Story of New Experiences

**October 5:** Humor, Jokes and Juggles

**November 2:** Where were you when...? Our Moments in History

**December 7:** Holiday Traditions

**January 4:** Inspiring People: Role Models

**February 1:** Taking Steps: Warming up with Dance

**March 1:** Songs of Spring: A Joyful Noise

**April 5:** Furry Friends: Tales of Tails

**May 3:** Ways We Travel (Transportation and Trips)

**Caregiver Chapel: Another chance to share fellowship and support**

**Fall:** Saturday before Thanksgiving; November 17, 2018

**Spring:** Saturday before Valentine’s Day; February 9, 2019

**Contact:** Trish at 785-393-4573 [trish@winterc4rj.org](mailto:trish@winterc4rj.org)  
Shannon at [shannono@eckaaa.org](mailto:shannono@eckaaa.org)

# Blind and Low Vision Services

The Resource Center for Independent Living, Inc. (RCIL) provides iKan-RCIL program which is to teach people who are blind or have low vision and are 55 years or older how to live as independently as possible. iKan-RCIL has been possible with contracts awarded from Kansas Rehabilitation Services (KRS) that allows funding for orientation and mobility training, assistive technology aids and devices, and independent living training. RCIL provide these services in 32 counties including Osage, Coffey, and Anderson counties.

To be eligible for this program you must live in one of the 32 counties, be 55 years or older and have a vision loss that affects your

daily living. Our Orientation and Mobility Specialist is certified and provides the services for this program. She travels to individuals' homes to teach the skills and/or give items that will allow individuals to be as independent as possible. This program is free to the individual and can be provided in any home setting. Our Orientation and Mobility Specialist also does presentations to promote services and educate the public. She will also be hosting independent living classes through the next few years throughout the 32 counties. For more information about iKan-RCIL services, contact RCIL at 785-528-3105.

## Meal Sites/Community Centers by County

Join us at the meal site for a congregate meal! Call one day ahead to reserve your hot meal.

**OSAGE COUNTY**  
**Townsite Community Center**  
 116 W. Lincoln  
 Burlingame, KS 66413  
 785-893-3425  
 Monday – Friday 9am-1pm

**Osage County Senior Center**  
 604 Market St  
 Osage City, KS 66823  
 785-528-4170  
 Monday – Friday 10am-2pm

**Osawatomie Senior Center**  
 815 Sixth St  
 Osawatomie, KS 66064  
 913-755-2443  
 Monday - Friday 9am-2pm

**Carbondale Community Building**  
 228 Main St  
 Carbondale, KS 66414  
 785-893-1107  
 Monday - Friday 9:30am-2pm

**COFFEY COUNTY**  
**Burlington Senior Center**  
 202 Neosho  
 Burlington, KS 66839  
 920-364-2730  
 Monday – Friday 9am-1pm

**Waverly Community Center**  
 419 Pearson  
 Waverly, KS 66871  
 785-733-2603  
 Monday – Friday 9am-1pm

**Lebo Senior Center**  
 2 W. Broadway PO Box 535  
 Lebo, KS 66856  
 620-256-6166  
 Tuesday, Wednesday, and  
 Thursday 10am-1:30pm

**FRANKLIN COUNTY**  
**Ottawa – First Baptist Church**  
 410 S Hickory  
 Ottawa, KS 66067  
 785-214-8289  
 Monday-Friday 9:30am-1:30pm

**Pomona Community Center**  
 219 Jefferson  
 Pomona, KS 66067  
 785-566-3608  
 Monday – Friday  
 9:30am-12:30pm

**Richmond Community Building**  
 205 E Central  
 Richmond, KS 66080  
 785-835-6465  
 Monday – Friday  
 9:30am-12:30pm

**Sunflower Plaza – Ottawa**  
 701 S Poplar  
 Ottawa, KS 66067  
 785-418-1222  
 Monday – Friday  
 9:30am-1:30pm

**Lane Community Center**  
 302 Kansas Avenue  
 Lane, KS 66042  
 785-869-2002  
 Monday, Wednesday, and Friday  
 10:30am-1:30pm

**Wellsville Community Center**  
 7th and Locust  
 Wellsville, KS 66092  
 785-883-4334  
 Monday – Friday 9am-1pm

**Williamsburg Community Center**  
 126 William St  
 Williamsburg, KS 66095  
 785-746-5459  
 Monday – Friday 10am-1pm

**MIAMI COUNTY**  
**Paola Senior Center**  
 121 West Wea  
 Paola, KS 66071  
 913-294-9220  
 Monday – Friday 9am-2pm

**Louisburg Senior Center**  
 S. 5th and Metcalfe  
 Louisburg, KS 66053  
 913-837-5113  
 Monday – Friday  
 9:30am-1:30pm

**ANDERSON COUNTY**  
**Colony City Building**  
 339 Cherry  
 Colony, KS 66015  
 620-852-3530  
 Monday, Wednesday, and Friday  
 10am-1pm

**Garnett Senior Center**  
 128 W 5th  
 Garnett, KS 66032  
 785-448-6996  
 Monday – Friday 9am-2pm

**Kincaid Community Building**  
 500 Fifth Avenue  
 Kincaid, KS 66039  
 620-439-5440  
 Monday, Wednesday, and Friday  
 10:30am-1:30pm

**LINN COUNTY**  
**Blue Mound Nutrition Site**  
 312 E Main  
 Blue Mount, KS 66010  
 913-756-2262  
 Monday – Friday 10am-1:15pm

**Centerville Nutrition Site**  
 410 N 1st  
 Centerville, KS 66014  
 913-898-2600  
 Monday – Friday  
 9:30am-1:30pm

**Pleasanton Nutrition Site**  
 201 E 13th St  
 Pleasanton, KS 66075  
 913-352-8896  
 Monday – Friday  
 9:30am-1:30pm

**Mound City Nutrition Site**  
 603 Main  
 Mound City, KS 66056  
 913-795-2605  
 Monday – Friday  
 9:30am-1:30pm

**Parker Nutrition Site**  
 423 W Kimball  
 Parker, KS 66072  
 913-898-6805  
 Monday – Friday  
 9:30am-12:20pm



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— FROM THE EDITOR —

# Sprinkles of Knowledge

By Jasmine Anderson

They say it takes a village to raise a child. That village is built by anyone who meets that child from birth to adulthood. Building intergenerational relationships between seniors and children help to build the foundation for our future! It inspires minds, encourages creativity, and creates positive relationships for children as they learn the ropes in life.

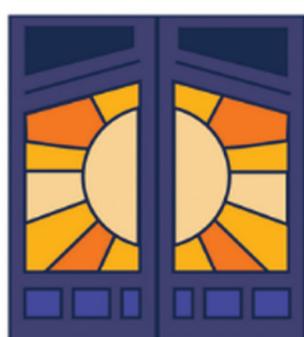
Many children are blessed to have grandparents in their lives while others are not. The relationship between different generations is one that should be cherished and nourished. As Alex Haley once said “Nobody can do for little children what grandparents do. Grandparents sort of sprinkle stardust over the lives of little children.” Every year, the Area Agency on Aging plans and coordinates intergenerational events throughout the communities that we serve. This year, the focus was placed on hands-on activities. The idea was to get kids interested in what seniors had to say – as you know these days it can be hard to keep a child’s interest for longer than 10 seconds.

*“Young people need something stable to hang on to — a culture connection, a sense of their own past, a hope for their own future. Most of all, they need what grandparents can give them.”*

– Jay Kesler



In August of this year, I went down to Mound City to the community center where I coordinated an event called Stuff-A-Bear. The motto for this event was “Building Relationships, Inspiring Minds, and Celebrating Generations”. Each kid was able to participate for free, and as a result they built their own stuffed animal with the help of local senior citizens. There was an amazing turnout of about 45 kids! One of the seniors even said “I had no idea there were so many kids in Mound City!” It was crazy, loud, exciting, and most importantly...impactful. Lots of conversations were started even though they were kept short and sweet. Our goal of encouraging face to face interaction while building intergenerational relationships was achieved! This event will be continued in each county for years to come.



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## *The Golden Years*

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**Elizabeth Maxwell,**  
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**Jasmine Anderson, Editor**

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