



**COMMONWEALTH of VIRGINIA**  
*Department for Aging and Rehabilitative Services*

James Rothrock  
Commissioner

Virginia Division for the Aging  
1610 Forest Avenue, Suite 100  
Henrico, VA 23229  
Phone 800-552-3402

[Click here to go to the Virginia Department for the Aging Home Page](#)

**TABLE OF CONTENTS**  
**AAA TUESDAY E-MAILING**  
**August 7, 2012**

<b>SUBJECT</b>	<b>VDA ID NUMBER</b>
<a href="#"><u>August Edition of On PARS</u></a> (James Rothrock)	12-231
<a href="#"><u>2010 Census Data on Disabilities Available</u></a> (Tim Catherman)	12-232
<a href="#"><u>Free Hurricane App Available from American Red Cross</u></a> (Cecily Slasor)	12-233
<a href="#"><u>Governor McDonnell Proclaims September 29, 2012 a Day of Service</u></a> (James Rothrock)	12-234
<a href="#"><u>HUD Section 202 Housing for the Elderly</u></a> (Kathy Miller)	12-235
<a href="#"><u>Relative Caregivers</u></a> (Ellen Nau)	12-236
<a href="#"><u>Caregiving</u></a> (Ellen Nau)	12-237
<a href="#"><u>Virginia Department of Health Letter to Clinicians</u></a> (Tim Catherman)	12-238



12-231

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**DEPARTMENT FOR AGING AND REHABILITATIVE SERVICES**

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Commissioner

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** James Rothrock

**DATE:** August 7, 2012

**SUBJECT:** August Edition of 'On PARS' information bulletin

I am pleased to share with you the August edition of On PARS, the Policy and Planning information bulletin. This edition, as well as previous ones, may be located at the Policy and Planning intranet site.

A very special thanks to Jenny Banks, Program Support Tech in the DRS Fairfax Office and member of the DARS Cultural Diversity Team, for her contributing article on Third Culture Kids.

Enjoy, stay cool out there, and please let me know if you have any suggestions for future articles.



On PARS  
August.pdf



### Governor Appoints New Members to DARS Councils

August, 2012

Volume 3, Issue 11

During July, Governor Bob McDonnell announced the appointment of seven new members to the State Rehabilitation Council. The new members are:

**Suzanne Bowers** of Bealton, Executive Director of the Parent Education and Advocacy Training Center (PEATC)

**J. Bryant Neville, Jr.** of Dewitt, Executive Vice President at the Bank of McKenny

**Thalia Simpson-Clement** of Washington, D.C., Deputy Chief Operating Officer for St. John's Community Services

**Sally J. Thompson** of Hampton, Education and Training Technician with the Expeditionary Warfare Training Group

**Julie Triplett** of Henrico, Disability Rights Advocate for the Virginia Office of Protection and Advocacy (VOPA)

**John Eisenberg**, of Richmond, Assistant Superintendent of Special Education and Student Services at the Virginia Department of Education

**Rumy J. Mohta**, Midlothian, Virginia Workforce Council member

### In this issue:

August 2012 Diversity Calendar	2
Diversity Team Article by Jenny Banks	3-4
Division of Rehabilitative Services Forms Cabinet	5

The Governor also has appointed the following two new members to the State-wide Independent Living Council:

**Ron Lanier**, Director of the Virginia Department for the Deaf and Hard of Hearing

**Lee Price**, Director of Developmental Services, Virginia Department of Behavioral Health and Developmental Services



### New Letterhead for AWARE Letters

All AWARE letters now sport the new DARS agency name and logo in the letterhead. If you experience formatting problems, one-page letters now going to a second page, or other issues with the letters, please contact your AWARE Level 1 support person. We will try to address your issue within a 24 hour turnaround (except August 2 - 9).



### Policy and Planning Mission and Values Statements.

#### Mission Statement:

Policy and Planning staff serve as an agency resource by providing research, evaluation, analysis, and communication of information to provide effective planning and decision making.

#### Values Statement:

We value excellence in our work through accuracy, integrity, collaboration, timeliness, clarity, and accessibility.

## August 2012 Diversity Calendar



## August 2012 Diversity Calendar

**Quote:** Action expresses priorities. Mahatma Gandhi

**Diversity Perspectives:**

You can promote diversity by planting 'a golden seed'. Take a moment to tell someone what they are really good at.

### Special Days

- |             |   |
|-------------|---|
| <b>1st</b>  | <b>Fast in Honour of Holy Mother of Jesus - Orthodox Christian</b><br><b>Lammas - Christian</b>                     |
| <b>2nd</b>  | <b>Raksha Bandhan - Hindu</b><br><b>Lugnassad - Imbolc - Wicca Northern and Southern hemi spheres</b>               |
| <b>6th</b>  | <b>Transfiguration of the Lord - Orthodox Christian</b><br><b>Summer Bank Holiday - Scotland/ROI</b>                |
| <b>9th</b>  | <b>International Day of the World's Indigenous People</b>   |
| <b>10th</b> | <b>Krishna Janmashtami - Hindu</b>  |
| <b>12th</b> | <b>Closing Ceremony of the London 2012 Olympic Games</b><br><b>International Youth Day</b>                          |
| <b>15th</b> | <b>Assumption of the Virgin Mary - Catholic Christian</b><br><b>Dormition of the Theotokos - Orthodox Christian</b> |
| <b>18th</b> | <b>Jamshedi Noruz Shenshai - Zoroastrian</b><br><b>Ramadan ends - Islam</b>   |
| <b>23rd</b> | <b>Khordad Sal, Shenshai - Zoroastrian</b>  |
| <b>27th</b> | <b>Summer Bank Holiday - England/NI/Wales</b>   |
| <b>29th</b> | <b>Opening Ceremony of the London 2012 Paralympic Games</b>   |

## Diversity Team Article



This On Pars article was shared by Jenny Banks, Cultural Diversity Team Member  
"I think there may be material here that is relevant for staff and clients who may have shared the same---or similar---circumstances."

### [The Trouble with Third Culture Kids](#)

You may not notice her. At first glance, she may appear perfectly comfortable -- these kids are chameleons, adept at taking on the colors of each new environment they are plunged into. She looks and sounds like the other kids in her class; she wears the same kind of clothes, has the same gadgetry, and carries the same backpack.

Perhaps she comes to your attention because she is having adjustment problems, like any other new kid on the block. She isn't making friends easily, doesn't join group activities. She is withdrawn, uncooperative, angry or disruptive. Or maybe she's been diagnosed and labeled, but it doesn't seem to explain everything.

She doesn't want to talk about it. She doesn't know where to begin.

What you don't know and can't see is that she is a Third Culture Kid (TCK) -- a child who has moved in and out of foreign countries as her parents have transferred around the world. Born into one culture, raised among others, her identity is most closely aligned with others raised like her, moving internationally. She is not "from" anywhere. Although she was born here, for her this country is another foreign assignment. Feeling out of place is only the tip of the iceberg. She is struggling through yet another adaptation, another culture shock, another freefall.

TCKs are the children of international business people, global educators, diplomats, missionaries, the military -- anyone whose family has relocated overseas because of a job placement. The children attend international or host-country schools, or are sent to boarding schools, or are home-schooled. They are supposed to be coming home -- even if they've never lived here, even if they've only been back on furlough. Often, this is their most difficult relocation. There are nearly a million in international schools around the world; others in Department of Defense schools on international military bases; countless numbers returned to their passport countries of origin.

Rebecca Grappo, an educational consultant who specializes in the placement of these children, says there are three basic things all children need: belonging, recognition and connection. For TCKs, these basic needs are ripped away with each move. Powerless in the decision to relocate, their many losses are often not acknowledged even by their own parents, and the main problem is unspoken, unrecognized, shunted aside.

It looks like depression, but it's not. This is the face of TCK grief.

And, according to Ruth Van Reken, unresolved grief is the most urgent mental health issue facing TCKs -- the children as well as the adults they will become.

Herself a TCK, Ruth Van Reken has spent a lifetime writing and advocating and teaching about the psychological impact of an internationally mobile childhood. Along with the many benefits come challenges that must be faced with each move the child makes. She states, "The issue is that transition always involves loss, no matter how good the next phase will be. Loss always engenders grief and the greater you have loved a situation or place or people, the greater the grief."

The layers of loss run deep: Friends, community, pets. Family, toys, language. Weather, food, culture. Loss of identity. Loss of a place of comfort, stability, a safe and predictable world. Home.

These children are losing the worlds they love, over and over. They cycle through the stages of grief each time they move -- or they don't, and push it down, submerge it, only to have it bubble up later in life, unexplained.

The grief of children is often invisible. They are told they will adapt, they are resilient. They are told they'll get over missing that friend, they'll get another pet, they'll have a nicer room in the new house. Their family is rushed; they don't have time to mourn their losses.

And they are children, and don't know how to express what they are feeling.

Some mental health professionals call it trauma.

Kathleen Gilbert has researched grief among TCKs, and writes, "Losses that are not successfully resolved in childhood have an increased likelihood of recurring in adulthood... For TCKs, questions about who they are, what they are, where they are from, what and who they can trust are examples of existential losses with which they must cope. And the way in which they process these losses will change, or may even wait until long after their childhood."

So when she comes to you, don't ask her where she's from, or what's troubling her. Ask her where she's lived. Ask her what she's left behind. Open doors. And just listen. Give her the time and space and permission she needs to remember and to mourn. She has a story -- many stories. And she needs and deserves to be heard, and to be healed, and to be whole.

© Nina Sichel

She is a published author and editor and invites a wonderful perspective on the art of writing from the heart. Her focus here is on the life of children in the U.S. who grew up overseas. She talks about how that experience can distinguish them from their stateside peers, sometimes in very challenging ways.

She can be reached at [nsichel@yahoo.com](mailto:nsichel@yahoo.com).

### **Student Referral to DRS Form Now Incorporates RS-3e**

The Student Referral to DRS form now includes a consent section, which replaces the need for a separate RS-3e form. When the record only contains education information, the new consent language at the bottom of the Student Referral to DRS form suffices as the Release. However, when the school record includes medical or psychological information or other protected health information (use RS-3j) or alcohol/SA information (use RS-3j) you must continue to use the RS-3i or RS-3j to obtain informed written consent.



### **Clarification on Policy Regarding Services to Students in Transition**

The Division of Rehabilitative Services may provide transition services to any eligible student with a disability. This includes:

Students with disabilities being served under an IEP through the local educational agency or a state operated program

#### **Students with disabilities eligible for Section 504 services**

Students with disabilities who have withdrawn from school and may be eligible for Vocational Rehabilitation services.

Shortly, a Policy Transmittal will be sent out containing the clarifying language regarding students eligible for Section 504 services.

## Division of Rehabilitative Services (DRS) Forms Cabinet

All vocational rehabilitation forms now carry the new DARS agency and DRS division name.

These forms have been updated for content:

**RS-13** updated with family size table for 2012

**Vendor Application for Licensed Behavior Health Services Provider**

**Trial Work** and **Extended Evaluation** Plans – removed client signature line as not required.

**Student Referral to DRS** – now includes consent section to replace RS-3e. When the record includes protected health information (use RS-3j) or alcohol/SA information (use RS-3j) you must continue to use the RS-3i or RS-3j.

**Cold Case Referral** (new!) is added under Referrals heading.

These forms are **Retired**:

- **RS5c Closure Notice.** This has been replaced by a set of letters in AWARE.
  - **RS-4a SFL Checklist.** The checklist is now in AWARE-12 Eligibility Determination form (hard copy of screen). Paste client's specific SFLs into AWARE Eligibility Determination screen Section 6 Other, in the "Other Comments" text field.
  - **RS-4a Disability Code List.** The list is now included in AWARE-15 New Case Screens form and AWARE-12 Eligibility Determination Screen form (these forms are a hard copy of the AWARE screens). Use the Disabilities Codes list to enter the correct codes for Impairment, Due To, and Specific Impairment fields into AWARE.
  - **Voter Registration Receipt.** This is included at the bottom of the Voter Registration Application.
  - **AWARE-2** Crosswalk of VRIS status to AWARE status. This is no longer needed.
  - **AWARE-5** Crosswalk of AWARE to Retired Forms. This is no longer needed.
- Technology Services Referral.** Use the AWARE Service module instead.

These forms are **Moved**:

- **Commissioner Approval Process** is now under the Financial Information heading.
  - **SPCC Client Reconciliation Process** is now under the Financial Information heading. This document is out-of-date and is being revised by DRS and Fiscal staff.
- Referral MH** for mental health referral sources to use is added under Applications heading.

These forms are in both the Forms Cabinet and AWARE Letter Catalog:

- **Unpaid Work Experience Enrollment** is under the Cooperative Agreement & MOUs heading
- Schedule A Hiring** letter is under the Federal Appointment Letters heading

If you have technical difficulties with fill-in fields, please include the form name, field name, and issue in an e-mail to Mary Lutkenhaus, Policy Analyst.



## Sales Tax Holiday

From Friday, August 3, through Sunday, August 5, most school supplies costing \$20 or less each and clothing items and footwear priced at \$100 or less each are exempt from Virginia's 5 percent state and local sales tax. You do not have to be going back to school to take advantage of these savings. An all-inclusive list of school supplies, a list of exempt clothing and footwear items, holiday guidelines for shoppers, and FAQ are available on the Tax Department's Sales Tax Holiday Information Center at [www.tax.virginia.gov](http://www.tax.virginia.gov).





12-232

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** Tim Catherman

**DATE:** August 3, 2012

**SUBJECT:** 2010 Census Data On Disabilities Is Now Available

The U.S. Census Bureau has just released their report, *American With Disabilities: 2010* which presents data and information from the 2010 Census (May-August, 2010) as it relates to this important population. Prior to this issuance, the most current census data for Americans with disabilities was from the 2005 census.

Key highlights include:

- Over 56 million people in the United States have a disability.
- This translates to 19% of the total population or nearly 1 out of every 5 people.
- Of this number, over two-thirds, or 38 million, report having a severe disability.

The 24-page report provides more in-depth disability data by gender, age, race/ethnicity, and measure of disability as well as by a variety of additional measures including employment and monthly income. Comparisons to 2005 data are also presented.

View and print [Americans with Disabilities: 2010](#)

View and print [U.S. Census Bureau Press Release](#)

*"CRCC is pleased to forward the most current data on Americans with disabilities as published by the U.S. Census Bureau. We understand the data may be a helpful resource to our certificants and all others who also work diligently to best serve individuals with disabilities."*



12-233

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** Cecily Slasor

**DATE:** August 7, 2012

**SUBJECT:** Free Hurricane App available from American Red Cross

Chip Stratton, Safety and Risk Management Director at Woodrow Wilson Rehab Center, sent information regarding a new, free hurricane app from the American Red Cross. The app offers location-based NOAA weather alerts and lets users send a one-touch "I'm safe" message via social networks to family and friends in an emergency. The app became available on August 1, 2012 to coincide with the start of the third month of the Atlantic Ocean hurricane season. Please share this resource with clients, family and friends.

**American Red Cross:** <http://www.redcross.org/>

**Hurricane App:**

<http://www.redcross.org/portal/site/en/menuitem.94aae335470e233f6cf911df43181aa0/?vgnextoid=4a0a5ae8931e8310VgnVCM10000089f0870aRCRD>

**Chip Stratton**  
**WWRC Safety and Risk Management Director**  
**DARS Emergency Coordination Officer**  
**Phone 540-332-7163**  
**Fax 540-332-7132**



12-234

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** James Rothrock

**DATE:** August 7, 2012

**SUBJECT:** Governor McDonnell Proclaims September 29, 2012 Day of Service

## **Governor McDonnell Declares September 29, 2012 Day of Service in Virginia**

*Day to serve will bring together interfaith groups to combat hunger in Virginia, Maryland, West Virginia and Washington, D.C.*

**Citizens can submit “Day to Serve” events and find ways to help at <http://www.daytoserve.org/>**

**RICHMOND** – Governor McDonnell today joined Maryland Governor Martin O’Malley, West Virginia Governor Earl Ray Tomblin, D.C. Mayor Vincent Gray, the Church of Jesus Christ of Latter-day Saints and members of the interfaith community in declaring September 29, 2012 a “Day of Service” in Virginia. The regional effort will bring together members of the faith and non-profit community, Virginia’s food banks and engaged citizens to collect food donations and assist those in need.

Speaking about the Day of Service in Virginia, Governor McDonnell said, “There’s precious little agreement on too many policy issues in Washington and state capitals, but we can all agree that the fight against hunger is an important one. Since 2006, food banks have seen a 54 percent increase in demand. The day to serve will be a tremendous opportunity to bring recognition to that need and to do something meaningful to meet it. I thank Elder Jack Gerard of the Church of Jesus Christ of Latter Day Saints for bringing together these regional partners to make a real difference on the issue of hunger. I encourage all Virginians, in the days leading up to September 29, to join me in contributing to this important effort.

Whether it's taking a day to help stock food pantry shelves, dropping off a bag of canned goods at a local donation bin or making a monetary contribution, every Virginian can participate in the day of service."

Governor McDonnell has long supported programs that help people in need put food on their table. In 2007, as attorney general, he spearheaded the "Statewide Legal Food Frenzy," a philanthropic competition among Virginia's legal community benefiting Food Banks statewide. Earlier this year, he announced the creation of the "Governor's Bowl" food and fund drive which partners with the Virginia Chamber of Commerce and the Federation of Virginia Food Banks to challenge the business community to bring in food for its local food bank. That competition ran from Memorial Day to Independence Day, collecting food and funds during the summer months that typically see a drop-off in donations and a rise in need.

Governor McDonnell official proclamation of September 29, 2012 as a Day of Service can be found here: <http://www.governor.virginia.gov/OurCommonwealth/Proclamations/viewproc.cfm?id=161>





12-235

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** Kathy Miller and Katie Roeper

**DATE:** August 7, 2012

**SUBJECT:** HUD Section 202 Supportive Housing for the Elderly Program

The federal government is now implementing changes in policy regarding funding for supportive housing for very low-income people that shifts some administrative responsibility and decision-making to states. These changes will soon be impacting supportive housing for the elderly.

To prepare for these changes, state housing and human service agencies are initiating more collaborative relationships, and are seeking area agency on aging input on a potentially new services-enriched seniors housing model for Virginia.

The U.S. Dept. of Housing and Urban Development (HUD) FY 2013 proposed budget initiates significant change to the HUD Section 202 Supportive Housing for the Elderly program. HUD is seeking legislative and regulatory authority from Congress to offer to states \$100 million of five-year rental assistance so that states may enable the development of 3,500 supportive housing units affordable to very low-income seniors. This housing would be developed through other federal, state and local capital funding programs, such as Low Income Housing Tax Credits, and HOME funds.

HUD has already announced funding for a similar state rental assistance demonstration to fund supportive housing for non-elderly people with disabilities through the Section 811 program. That demonstration is expected to serve as a general model for a FY 2013 Section 202 demonstration. The Section 811 demonstration requires collaboration among state housing, Medicaid and human service agencies under a formal partnership agreement to determine need, allocate rental assistance to specific housing units, provide ongoing referral of eligible

tenants to assisted units, and ensure case management and ongoing access to supportive services.

It is expected that AAA's would have a key role in a new Section 202 program here in Virginia. A meeting to discuss this potential new model and collaboration among state agencies and local AAA's will be scheduled during mid to late September. If you are interested in participating in this meeting, please notify Kathy Miller via email at: [kathy.miller@dars.virginia.gov](mailto:kathy.miller@dars.virginia.gov).

If you would like more specific information about the Section 202 program, please contact:

Bruce DeSimone, AICP  
Community Housing Officer  
Virginia Housing Development Authority (VHDA)  
601 S. Belvidere Street  
Richmond, VA 23220  
Phone: 804-343-5656  
[bruce.desimone@vhda.com](mailto:bruce.desimone@vhda.com)



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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** Ellen Nau, Program Coordinator

**DATE:** August 7, 2012

**SUBJECT:** Relative Caregivers

**Grandparents Day 2012**

**September 9, 2012 is Grandparents Day!** Generations United is urging everyone to do something "grand" and is launching Do Something Grand, a full week of intergenerational activism. The organization has launched a website to give you ideas to celebrate. Go to: <http://grandparentsday.org/>

In addition, Generations United urges you to become a Grand Face Grand Voice on behalf of America's children and youth. [Take the Grand Faces Grand Voices pledge today.](#)

**VDA Staff and Kinship Care**

Various aspects of relative caregiving continue to be under discussion in two venues in the Commonwealth. Ellen Nau is participating in these groups. First, the Division of Family Services at the Virginia Department of Social Services (VDSS) is addressing the issues of kinship assessment tools, reviewing staff training curricula that pertains to working with kinship families and developing a script for workers to use in discussing the variety of options kin have for being available to children involved with the child welfare system. This is part of the Division of Family Services' Program Improvement Plan. In collaboration with its stakeholders, the Virginia Department of Social Services (VDSS) will develop and implement policies and practices that improve the lives of children and families in Virginia.

The Virginia Commission on Youth under the leadership of Delegate Christopher K. Peace, Chair is conducting an advisory group on the *Definition of Kinship Caregivers*. The Advisory Group will meet three times over the summer and fall.

**Local Kinship Care Support Group in the News!**

To read about the outstanding job that Debbie Leidheiser, Senior Advocate in

Chesterfield County has done in establishing a monthly support groups for grandparents raising grandchildren, go to:

<http://www2.midlothianexchange.com/news/2012/aug/02/grandparent-connection-support-group-assists-secon-ar-2104735/>

A truly wonderful leader and group of participants are the hallmark of this outstanding support group.

### **October is Intergenerational Month!**

41 states, including Virginia, have declared **October 3, 2012 Intergenerational Day!** Countries across the globe will be celebrating! To find out about activities and ideas to celebrate, go to: <http://www.intergenerationmonth.org/>

### **Intergenerational Living**

For a moving story of caregiving and intergenerational living, read Amy Goyer's account of taking care of her elderly parents at: <http://blog.aarp.org/2012/07/18/amy-goyer-caregiving-parents-moving-in/> Amy, a long-time employee at AARP and frequent guest speaker at kinship care events, has made the decision to live with her parents as they experience the health crises that sometimes accompany the aging process. Some of our own DARS and AAA employees and members of the Virginia Caregiver Coalition are making difficult decisions on caring for their elderly relatives. Offer them your support!



12-237

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**MEMORANDUM**

**TO:** Executive Directors  
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**FROM:** Ellen Nau, Program Coordinator

**DATE:** August 7, 2012

**SUBJECT:** Caregiving Professionals

**Transportation Providers**

ARCH is working with Easter Seals on the **development of a fact sheet on overcoming transportation barriers to respite**. If you have model initiatives or know of any in this area that you would like to share that we can highlight in the fact sheet, please let me know as soon as possible at [jbkagan@verizon.net](mailto:jbkagan@verizon.net) or post them on the [Discussion Forum](#). This fact sheet will address transportation barriers for family caregivers, as well as transportation barriers that might be faced by respite workers/volunteers in getting to a family's home or to the respite site, so feel free to include *any* solutions to any transportation barriers you have faced.

The Virginia Caregiver Coalition is a member of the ARCH National Lifespan Respite Network. **The mission of the ARCH National Respite Network and Resource Center** is to assist and promote the development of quality respite and crisis care programs; to help families locate respite and crisis care services in their communities; and to serve as a strong voice for respite in all forums. Please let Ellen Nau at [ellen.nau@dars.virginia.gov](mailto:ellen.nau@dars.virginia.gov) If you submit information on your transportation program to ARCH. Thank you in advance for your participation!

**FEMA and Personal Assistance in Emergencies**

**Emergency planners, disability services providers and AAA employees take note!** An August 15, 2012 webinar will discuss the Post-Katrina Emergency Reform Act's Personal Assistance contract vehicle. This service will be provided upon request by the affected state for survivors in shelters and other congregate sites who have access and functional

needs and require PAS in order to maintain the same level of independence as they have at home. This webinar will cover the Mass Care program at FEMA and the newly awarded contracts to provide Personal Assistance Services to individuals with access and functional needs in congregate facilities during disasters, when this assistance is requested by the affected state. The presentation will be held at 2 PM Eastern Time and last 60 minutes. To join the Webinar on that date, please visit: <http://www.tinyurl.com/PASElluminate> (It is recommended to join a few minutes ahead of time to test your computer equipment's capacity for joining the webinar.)

### Caregiver Assessments

**Caregiver Assessment II: *Practice Considerations for System Change*** (part 2 of a two-part webinar series) will be held at 3 P.M. Eastern Time on August 23, 2012 **Space is limited! Reserve your webinar spot NOW at:** <https://www3.gotomeeting.com/register/339613342>

This is the 2nd of two webinars which focus on the importance of the caregiver assessment as an instrument and a process to better identify their needs and form the foundation for an appropriate plan of care. (Click on the title to listen to the first webinar, [Caregiver Assessment I: Why and What Should We Assess?](#))

### Reports, Articles etc.

**[The Mental Health and Substance Use Workforce for Older Adults: In Whose Hands?](#)** by Jill Eden, Katie Maslow, Mai Le, and Dan Blazer, Editors; Committee on the Mental Health Workforce for Geriatric Populations; Board on Health Care Services; Institute of Medicine (IOM), July 10, 2012

An expert committee assessed the needs of this population and the workforce that serves it. To read the report online or to download, visit the IOM website at <http://www.iom.edu/Reports/2012/The-Mental-Health-and-Substance-Use-Workforce-for-Older-Adults.aspx>

**American Time Use Survey -- 2011 Results**, by US Bureau of Labor Statistics (BLS), June 22, 2012

In 2011, 16 percent of the U.S. civilian noninstitutional population age 15 and over were eldercare providers. This and other information about eldercare providers and the time they spent providing care were collected for the first time in the 2011 American Time Use Survey (ATUS). To see the data summary, visit the BLS site at <http://www.bls.gov/news.release/atus.nr0.htm>

**Next Step in Care**, a campaign of United Hospital Fund, updated their hospital admission and Emergency Room guides to provide basic information about "observation status" and what to ask. This information is important for family caregivers to make them aware of this rising trend.

Click [here](#) to open the hospital admission guide.

Click [here](#) to open the Emergency Room guide.

Click [here](#) to read it as a standalone piece.

### **What's Disability to Me?**

“What's Disability to Me?” CDC video:

<http://www.cdc.gov/NCBDDD/video/bernard/index.html>

“What's Disability to Me?” WHO video series:

[http://www.who.int/disabilities/world\\_report/2011/videos/en/index.html](http://www.who.int/disabilities/world_report/2011/videos/en/index.html)

World Report on Disability: [http://www.who.int/disabilities/world\\_report/2011/en/index.html](http://www.who.int/disabilities/world_report/2011/en/index.html)

### **Resource Highlight: ADA Audioconference Series**

The NIDRR-funded [Great Lakes ADA Network](#) offers regular audioconferences on a diverse range of topics relating to the ADA and other accessibility legislation. These low-cost sessions are designed to support professional development of an individual, a department, or an entire agency. The August 21st audioconference covers Segways, golf carts, and four-wheelers as mobility options. [Schedule, program, and pricing are available online.](#)



12-238

**COMMONWEALTH OF VIRGINIA**  
**DEPARTMENT FOR AGING AND REHABILITATIVE SERVICES**

JAMES A. ROTHROCK  
Commissioner

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**MEMORANDUM**

**TO:** Executive Directors  
Area Agencies on Aging

**FROM:** Tim Catherman

**DATE:** August 7, 2012

**SUBJECT:** Emergency Preparedness Information for Clinicians

Please see the attached letter and information on emergency preparedness for clinicians from Dr. Karen Remley, Director of the Virginia Department of Health. The information is scheduled to be distributed to practitioners across the Commonwealth as well as to several State Medical Associations and Organizations.



## COMMONWEALTH of VIRGINIA

Department of Health  
P O BOX 2448  
RICHMOND, VA 23218

KAREN REMLEY, MD, MBA, FAAP  
STATE HEALTH COMMISSIONER

TTY 7-1-1 OR  
1-800-828-1120

August 3, 2012

Dear Colleague,

It has already been a long, hot, stormy summer resulting in severe health threats and we have not yet arrived at peak hurricane season. I would like to thank you for your ongoing efforts to provide your patients with the timely medical advice they need to prepare and implement thoughtful emergency preparedness plans. With your assistance I am confident that we can increase community resilience and decrease the loss of life and morbidity resulting from events such as hurricanes and extreme heat emergencies. This correspondence will focus on personal/family preparedness, business continuity planning for your practice and “medication preparedness” resources to share with patients as they plan for emergencies.

In medical practices, severe weather emergency preparedness begins by assuring that you, your staff and your families have an emergency plan and related resources. Excellent personal and family preparedness information is available at <http://www.vaemergency.gov/readyvirginia>. Once you are personally prepared and confident that a critical mass of staff will be able to work during an emergency, the next step is to be sure your practice or institution has a written and tested continuity of operations plan (COOP). Continuity of operations is not just an abstraction; when healthcare facilities are able to continue operating during a crisis they not only allow other scarce response resources to be directed elsewhere but help to provide a sense of stability to the community. The price that a community pays when healthcare facilities (including doctors’ offices, urgent care and dialysis centers as well as home health care providers) are not able to continue operations during emergencies is very high. Comparatively, the cost of preparing these healthcare facilities and their operations for emergencies is much smaller.

I would like to provide you with a brief overview of the steps for a health care COOP as outlined in the journal, *Disaster Medicine and Public Health Preparedness*<sup>1</sup>:

- 1) Similar to the risk profiling and stratification in clinical practice that influences prevention and treatment strategies for your patients, each region in Virginia has a slightly different emergency risk profile that impacts the type of planning required. Through communications with your local emergency manager (<https://lemd.vdem.virginia.gov/Public/>) or district health department director (<http://www.vdh.virginia.gov/LHD/>) you can confirm the most likely hazards/threats in your area to be sure your practice’s planning efforts are most appropriately targeted.
- 2) Know the capabilities and limitations of your practice location’s mission critical systems (electrical power, water supply, HVAC, IT, communications).

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<sup>1</sup> AB Bierenbaum, et al. Importance of Business Continuity in Health Care. *Disaster Med and PH Prep* 2009 3:57

- 3) Develop contingency plans should your power, water or other critical systems fail and consider ways to both lessen the impact of the most likely hazards/threats and enhance practice resiliency.
- 4) Before an emergency, communicate with your power, water and communications providers to be sure you are listed among their priority recovery groups. Seek formal agreements where possible.
- 5) Educate all staff on their roles in the COOP.
- 6) Evaluate and improve your plans at least annually as a result of planned exercises and real world experiences.

A COOP template is available at:

<http://www.ready.gov/sites/default/files/documents/files/BusinessContinuityPlan.pdf>

To facilitate emergency “medication preparedness,” I am providing a checklist as an attachment to this letter to share with your patients as they prepare for emergencies. You can assist their efforts by:

- Providing updated medication lists whenever there is a change in their medication regimens.
- Reminding them to keep a small “grab and go” bag of important medications, including over-the-counter drugs, in waterproof bags with a copy of their medication list in the bag.
- Encouraging them to refill medications while they still have a few days’ supply left.

Building resilience in our healthcare delivery system and assisting your patients with their planning can dramatically mitigate the impact of disasters and emergencies in Virginia.

Lastly, I would like to share that in an effort to improve communication and provide you with information to facilitate care, the Virginia Department of Health will be implementing an email subscription service. This monthly service is similar to the previously produced and very popular “Monthly Epi Bulletin.” If you are interested in subscribing and receiving our monthly email, please visit, [www.vdh.virginia.gov/clinicians](http://www.vdh.virginia.gov/clinicians). From the Resources for Health Care Professionals web page, please click “Sign up” to be directed to the VDH Public Health Information Network. After registering with the VDH Public Health Information Network, you will be able to select topics of interest and as that information becomes available, begin receiving updates.

Sincerely,

Karen Remley, MD, MBA, FAAP  
State Health Commissioner

## HOW TO PREPARE YOUR MEDICATIONS FOR EMERGENCIES

### *A CHECKLIST*

- Always carry an up to date detailed list of all your medications with you.
  - The list should include the medication names, strengths, directions and prescriber.
- Keep a small “grab and go” bag of important medications, including over-the-counter drugs, in waterproof bags.
  - An extra copy of your medication list should also be placed in the kit.
- Refill medications while you still have a few days’ supply left.
  - The extra medicine can be put aside and stockpiled in your disaster kit.
  - After you obtain a refill, use the old labeled containers to store emergency supplies.
  - Periodically rotate the medications in the kit with new ones to prevent product expiration.
- If you have complex medication regimens, such as injectable medications or medications delivered by nebulizer, consider creating your emergency plans with the assistance of your pharmacist or the prescriber.
- Review the resource links below for additional detailed guidance and to create your own medication list

### *Resource links*

- Tips to help you prepare
  - <http://www.safemedication.com/safemed/MedicationTipsTools/WhatYouShouldKnow/PreparingforEmergencies.aspx>
- Instructions for drugs requiring refrigeration
  - <http://www.fda.gov/Drugs/EmergencyPreparedness/ucm085213.htm>
  - <http://www.fda.gov/Drugs/EmergencyPreparedness/ucm085200.htm>
- Create Your Own Medication List
  - <http://www.rxresponse.org/PublicResources/Pages/EmergencyPrescriptions.aspx>