



VDA WEEKLY E-MAILING

May 27, 2014

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Administration for Community Living (ACL) News

Here is a link to news & information from the Administration for Community Living (ACL):

<http://www.acl.gov/NewsRoom/NewsInfo/Index.aspx>

NASUAD Weekly Update

Note: The web links in this document may change over time. DARS-VDA does not attempt to refresh the links once the week has passed. However, this document is maintained on the web for a period of time as a reference. Some links may require registration.

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Here is a link to the weekly National Association of States United for Aging and Disabilities (NASUAD) update where you can sign up or view the current and archived editions:

<http://www.nasuad.org/newsroom/friday-update>

Commissioner Rothrock Submits a Letter to the Roanoke Times

Tim Catherman, Director Aging Operations for Commissioner Rothrock

The following letter was submitted to the Roanoke Times and appeared in the Op-ed section of the newspaper.

The 'Age Wave' is upon us

Jim Rothrock | Posted: Monday, May 19, 2014 2:15 am

Growing older is a privilege that we have been able to expand as health care and quality of life have improved over the past 50 years. More Virginians are living longer and, in many cases, living better.

As we adjust to this reality, it can grow our economy and improve the quality of life for all Virginians.

The 2013 "Age Wave Study" by the Roanoke Valley-Alleghany Regional Commission found that between 2000 and 2010, the Roanoke Valley's population grew by 6.1 percent. The baby boomer age groups (55-59 and 60-64) increased nearly 37 and 58 percent respectively.

As the baby boom generation races toward traditional retirement age, the number of Virginians ages 65 and older will increase by nearly 30 percent by 2020 and reach 1.8 million by 2030 – more than double the number in 2000.

The F.R.E.E. Foundation, a Roanoke-based, volunteer-led nonprofit, recently won a Commonwealth Council on Aging Best Practice Award for helping people get the technology and equipment they need to regain their mobility. F.R.E.E. collects, sanitizes and repairs donated mobility equipment and gives it to uninsured and underinsured adults in Virginia.

It is among many organizations helping Virginia adjust to the "Age Wave." Our commonwealth benefits from a network of local Area Agencies on Aging (Triple A's) that respond to each community's needs. Many have begun to offer successful workshops on managing chronic diseases like diabetes, obesity and heart disease.



In other parts of the state, our Triple A's offer coaching to those with chronic diseases after discharge from a hospital. Already, this coaching has dramatically decreased hospital readmissions and begun to bend the health care cost curve.

Another great organization is the Older Dominion Partnership. Since it was created in 2007 by business leaders, health system executives, nonprofit leaders, Virginia's philanthropic community, academics and state government officials, it has been a catalyst for collaboration on making Virginia a great place to age well.

Surveys document that the overwhelming majority of us prefer to stay in our own home as we grow older, maintaining connections to our communities and friends, and retaining medical professionals who know our history. We call this "aging in place."

Unfortunately, our communities are not designed well enough for us to age in place. Most are aging in suburbs that are not walkable, often isolated from grocery stores, pharmacies and other services, with little or no access to public transportation.

Fortunately, models and resources are available to help improve communities. Of particular note is the national movement to create aging friendly or "livable" communities for all ages.

There are some universal ways to enhance livability for older adults: sufficient affordable housing; universal design features that help people remain in their communities; street signage and traffic patterns designed with older drivers in mind; walking paths and transit systems that help those unable to drive remain mobile; sufficient and meaningful opportunities for lifelong learning and engagement in social and civic activities; and access to necessary services, from shopping to medical care.

I encourage you to think more about the kind of community you want to age in. The local Office on Aging is a crucial resource that does great work serving folks in the Roanoke Valley. This month is Older Virginians Month in the commonwealth. Use the occasion to connect with these resources, and discover how aging in Virginia is something to be celebrated and enjoyed.

Jim Rothrock is Commissioner of the Virginia Department for Aging and Rehabilitative Services

ACL Update

James A. Rothrock, Commissioner



UPDATES

May 27, 2014

Bringing Out Their Best Through Service

By Wendy Spencer and Kathy Greenlee

Whether they're designing new digital programs to tutor students in mathematics or organizing meal programs for elderly neighbors; whether they're driving veterans to doctor appointments or visiting patients in nearby hospitals, older Americans are transforming lives and communities across the country.

As leaders of two of the country's foremost organizations that provide service opportunities for seniors, the Corporation for National and Community Service (CNCS) and the Administration for Community Living, we are consistently grateful for and inspired by our nation's senior volunteers. And every day, we see the transformative power of service as older Americans use their skills and talents to make a difference, and we witness the tremendous value of their contributions. Their commitment reminds us that serving others not only changes the lives of those who are served, but forever changes those who serve, as well. [Read More.](#)

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TOP](#)

How the Older Americans Act Helps More Americans Stay "Safe Today, Healthy Tomorrow"



Tim Catherman, Director Aging Operations for Kathy Greenlee, Assistant Secretary for Aging



May 20, 2014

How the Older Americans Act Helps More Americans Stay "Safe Today, Healthy Tomorrow"

By Kathy Greenlee, Assistant Secretary for Aging and Administrator of ACL

During the month of May, our nation observes Older Americans Month. This tradition dates back to 1963 when President John F. Kennedy encouraged Americans to celebrate the contributions and sacrifices of older people with a month-long commemoration.

Within two years, this annual tribute was translated into action through the passage of the Older Americans Act (OAA). For nearly half a century, the OAA has helped older adults stay healthy, live independent lives, and remain physically and socially engaged. And along the way, Older Americans Month has given us a means of publicly honoring our older population, while raising awareness about issues that affect them.

This year, injury prevention is the focus of [Older Americans Month](#). The theme, "Safe Today, Healthy Tomorrow," could not be more relevant. [Read more.](#)

Join the Older Americans Month Twitter Chat

On Wednesday, May 28 from 3:00 to 4:00 p.m. EST, the Administration for Community Living will join the American Occupational Therapy Association



and the Consumer Product Safety Commission to host a Twitter Chat to raise awareness of the resources available to keep older Americans safe. Join the conversation at #OAM2014chat.

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The Aging Network's Volunteer Collaborative: RSVP Program in Fairfax, VA

Tim Catherman, Director Aging Operations

The following is a case example of the RSVP Program in Fairfax.



 [Like Us On Facebook](#)

 [Forward To A Friend](#)



Volunteers Develop an Advisory Council Framework to Meet Community Needs

When [RSVP-Northern Virginia](#) determined that an Advisory Council would help build the program's capacity, [staff looked to volunteers for help](#).

Staff had limited time to dedicate to developing a framework and outlining the role of an Advisory Council.

After attending the PowerUP! Training Institute, RSVP-Northern Virginia's Program Manager recruited a self-directed volunteer team from the community to form a Steering Committee. Using a PowerUP! template to create a team charter, the team produced a work plan for the project and began development of a framework for the Advisory Council and recruitment of Council members.



[Senior Corps Week](#)

[Senior Corps Week](#)

- [Read letter.](#)

[Learn about PowerUP!](#)

- [Get more information.](#)

[Got an Hour? Campaign](#)



Results

After 500 hours worth thousands of dollars in capacity, the team presented to leadership a final report on plans for an Advisory Council that would match the community's needs. The report will guide the implementation of a self-directed Advisory Council, while the team's work will lay the groundwork for future self-directed volunteer teams.

[Read the case study](#) to learn about this volunteer team.

- [Recruit volunteers!](#)

[Register Now!](#)

[Are you Ready to Become
Powered by Pro Bono?](#)

[June 10, 2:00 p.m. EDT](#)

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You are receiving this email because you are part of the Aging Network or you have requested to get our updates.

Our mailing address is:

National Association of Area Agencies on Aging
1730 Rhode Island Ave NW
Suite 1200
Washington, DC 20036

[Add us to your address book](#)



ACL Webinar of Older Americans Act Title III-D Funds

Elaine S. Smith, MS, RD, Program Coordinator

Because I've had a lot of questions about evidence-based programs and the tier levels that are allowable for use of Title III-D funds, and as we go into the area planning process, I want to call your attention again to the webinar announced in last week's Weekly Emailing. Please consider joining the webinar or viewing the recording afterwards as you plan your disease prevention and health promotion programs for the 2015 Area Plan and beyond.

Webinar on OAA Title IIID Funds

MOVING ON UP! Older Americans Act (OAA) Title IIID Funds - Disease Prevention and Health Promotion Webinar on the Evidence-Based Requirement

Wednesday, June 4, 2014 from 3:00 p.m. - 4:00 p.m. Eastern

The focus of this webinar is to give guidance to the Aging Services Network in "moving on up" to provide only the highest-level criteria evidence-based interventions with OAA Title IIID funds.

Webinar Objectives:

- Provide background, current status, and a look ahead regarding OAA Title IIID
- Highlight ACL's [Aging and Disability Evidence-Based Program and Practices \(ADEPP\)](#) review process
- Inspire movement to highest-level criteria
- Provide the Aging Services Network with an opportunity to give feedback and have questions answered

[Register](#). Note: Space is limited, so please register as early as possible.

This webinar will also be recorded and posted on the [AoA OAA Title IIID webpage](#) soon after the webinar.

National Home & Community Based Services Annual Conference

Cecily Slasor, Administrative Support

Please see the notice below regarding the 2014 National Home & Community Based Services Conference to be held in September. This successful annual conference has typically seen attendance of 1,000 or more aging and disability advocates, as well as federal, state and local leaders.



DIVISION FOR THE AGING
VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES



NASUAD Meeting: September 13–14, 2014
Pre-Conference Intensives: September 15, 2014
HCBS Conference: September 16–18, 2014
LTQA's 2014 Conference: September 18, 2014

Hyatt Regency Crystal City • Arlington, VA

30th ANNUAL HCBS CONFERENCE

Registration Now Open

For thirty years, the nation's long-term services and supports system has been in the midst of an historic shift from institutional care to individualized home and community services for older adults and people with disabilities. Today changes continue and waiver programs and services are changing too. You are invited to attend one of the year's most important national conferences, the National Home and Community Based Services (HCBS).

This conference showcases innovative national, federal, state and local delivery and policy developments vital for assuring that Americans of all ages and abilities receive the highest quality community living supports, care, and services possible. Over 1,000 national, federal, state and local leaders, advocates, and champions for children, older adults, and individuals with disabilities from across the nation are expected to attend the conference. At last year's conference we had a strong presence from the U.S. Department of Health and Human Services ranging from Administration for Community Living (ACL), Centers for Medicare & Medicaid Services (CMS), Health Resources and Services Administration (HRSA), Substance Abuse and Mental Health Services Administration (SAMHSA), and more.

Due to the overwhelming success of last year's conference, NASUAD has decided to again host special Pre-conference Intensives at this year's conference. NASUAD is working closely with the CMS and ACL to develop content for both the Pre-conference Intensives and HCBS conference. The Pre-conference Intensives and HCBS conference are designed to meet specific federal grant requirements.

This year, NASUAD is celebrating 50 years of working with state disability and aging agencies. In honor of the associations 50 year history, there will be a gala



DIVISION FOR THE AGING
VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

event on Tuesday, September 16th. (Black Tie Optional)

Please register to join us at the HCBS Conference!

[Click Here to Learn More](#)

National Association of States United for Aging and Disabilities

www.nasuad.org

202-898-2578

First Responders Group Webinar Series: Communicating with
Persons with Access and Functional Needs During Emergencies

Tim Catherman, Director Aging Operations, for Carmen Sanchez, ACL

FIRST RESPONDERS GROUP
CapacityBuilding
WebinarSeries



Promising Practices and Technologies for
Communicating with Persons with Access and Functional Needs
during Emergencies



DIVISION FOR THE AGING
VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

In partnership with:



FEMA

DATE & TIME

Wednesday, June 4, 2014

1PM EDT/10AM PDT

Pre-registration is not required. Click this link to access the webinar:

<https://share.dhs.gov/capacitybuildingseries>

PRESENTERS

Dr. Cheryl Levine

At-Risk Team Lead, Division for At-Risk Individuals, Behavioral Health and
Community Resilience, ASPR, HHS

Barbara Fox

Public Information Officer, Cabinet for Health and Family Services, Commonwealth of
Kentucky

Samantha Stone

Risk Communication Coordinator, Office of Preparedness and Emergency Management,
Massachusetts Dept. of Public Health

LesleyAnne Ezelle

Regional Disability Integration Specialist, Federal Emergency Management Agency

Stephanie Brady

Assistant Executive Director, Independent Living Center, Joplin, MO

Amy S. Goldman

Co-Executive Director, Institute on Disabilities, Temple University

[Webinar Home](#) | [Test Webinar System](#) | [Join Our Email List](#) | [Podcasts](#) |
[Contact Us](#)



The First Responders Group Capacity Building Webinar Series features webinar-based training events that offer innovative practices and emerging national models on how our nation's emergency management and responder agencies can effectively share incident-critical information, improve emergency communications, and implement solutions that are cost-effective, interoperable, proven, and available. Participants earn Continuing Education Units (CEUs) upon successful completion.

For more information visit the "Grants and Training" section on www.firstresponder.gov.

Virginia's Sales Tax Holiday Begins Sunday

Tim Catherman, Director Aging Operations, for Chip Stratton, Safety and Risk Management Director



Help promote the Hurricane Preparedness Sales Tax Holiday, Sunday, May 25 through Saturday, May 31. People can stock up on many supplies that will be useful during emergencies and pay no sales tax on them. **New for 2014 – gas-powered chainsaws costing less than \$350 and chainsaw accessories costing \$60 or less are tax exempt.** See www.ReadyVirginia.gov for more information and resources to promote the tax holiday, including a flier listing the tax-exempt items.

Thanks! And as always, please share with family, friends, and clients!

Chip Stratton

Safety and Risk Management Director

Emergency Coordination Officer

Woodrow Wilson Rehabilitation Center

Virginia Department for Aging and Rehabilitative Services

Office (540) 332-7163 Cell (540) 569-0321

Chip.Stratton@wwrc.virginia.gov



June is Alzheimer's & Brain Awareness Month

Cecily Slasor, Administrative Support, for Mary Sandridge, Alzheimer's Association

June is Alzheimer's & Brain Awareness Month – an opportunity to hold a global conversation about the brain, Alzheimer's disease and other dementias. Everyone who has a brain is at risk to develop Alzheimer's, the only leading cause of death that cannot be prevented, cured or even slowed. During the month of June, the Alzheimer's Association® asks people around the world to wear purple and use their brains to fight Alzheimer's disease.

During Alzheimer's & Brain Awareness Month, you can join us on a special day to make a difference in the fight against Alzheimer's disease. On June 21, participate in The Longest Day®, a sunrise-to-sunset event to honor those facing Alzheimer's with strength, passion and endurance. Start a team today to raise funds and awareness. Visit alz.org for details.

United Health Foundation: America's Health Rankings Senior Report (Attachment)

Tim Catherman, Director Aging Operations

The United Health Foundation released the 2014 America's Health Rankings Senior Report. To see the full rankings, visit: www.americashealthrankings.org/senior. Virginia ranked 21st for Seniors. The Commonwealth fared well in food insecurity and poverty. In fact we were one of the best states for food insecurity. Virginia was in the middle for obesity, physical inactivity, flu vaccine and falls. The Virginia pages are attached.

Information for Mandated Reporters (Attachment)

Tim Catherman, Director Aging Operations for Gail S. Nardi, Director Adult Protective Services

Attached is information for mandated reporters on how to recognize signs of abuse, neglect and financial exploitation as well as how to report suspected abuse.

Workshop: Dementia Care My Way-A Vision for Person-Centered Care (Attachment)

Charlotte Arbogast, MSG, Dementia Services Coordinator

Please see attached flyer on the 4th Annual Alzheimer's Education Workshop sponsored by the Alzheimer's Association Central & Western Virginia chapter.



AMERICA'S HEALTH RANKINGS® SENIOR REPORT

UNITED HEALTH FOUNDATION®

TOP FIVE HEALTHIEST STATES

1. Minnesota
2. Hawaii
3. New Hampshire
4. Vermont
5. Massachusetts



Virginia

RANK: 21

OBESITY

26.8%

of seniors in **Virginia** are obese compared to 25.8% nationally.



PHYSICAL INACTIVITY

28.6% or about

1 in 3



seniors in **Virginia** are physically inactive compared to 28.7% nationally.

FOOD INSECURITY

8.4% or about

1 in 12



seniors in **Virginia** are marginally food insecure compared to 14.3% nationally.

POVERTY

7.7% or about

1 in 13

seniors in **Virginia** live in poverty compared to 9.3% nationally.



FLU VACCINE

60.1%

of seniors in **Virginia** receive the flu vaccine compared to 59.4% nationally.



FALLS

26.1% or about

1 in 4

seniors in **Virginia** reported falling in the last 12 months compared to 27.1% nationally.



VIRGINIA

SENIOR HEALTH

DETERMINANTS	BEHAVIORS	2014		NO 1 STATE
		VALUE	RANK	
	Smoking (Percent of adults aged 65+)	9.6	32	4.7
	Chronic Drinking (Percent of adults aged 65+)	3.3	20	1.7
	Obesity (Percent of adults aged 65+)	26.8	28	14.1
	Underweight (Percent of adults aged 65+)	1.1	3	0.8
	Physical Inactivity (Percent of adults aged 65+)	28.6	22	21.1
	Dental Visits (Percent of adults aged 65+)	69.1	17	77.2
	Pain Management (Percent of adults aged 65+)	52.6	20	60.7
	BEHAVIORS TOTAL	0.047	14	
	COMMUNITY & ENVIRONMENT			
	Poverty (Percent of adults aged 65+)	7.7	15	5.4
	Volunteerism (Percent of adults aged 65+)	27.4	19	39.8
	Nursing Home Quality (Percent of 4 & 5 star beds)	40.5	43	67.3
	C&E — MACRO PERSPECTIVE TOTAL	0.009	27	
	Social Support (Percent of adults aged 65+)	81.5	15	85.4
	Food Insecurity (Percent of adults aged 60+)	8.4	1	8.4
	Community Support (Dollars per adult aged 65+ in poverty)	\$595	32	\$8,033
	C&E — MICRO PERSPECTIVE TOTAL	0.066	8	
	COMMUNITY & ENVIRONMENT TOTAL	0.076	19	
	POLICY			
	Low-Care Nursing Home Residents (Percent of residents)	8.6	14	1.1
	Prescription Drug Coverage (Percent of adults aged 65+)	84.3	39	89.6
	Geriatrician Shortfall (Percent of needed geriatricians)	59.9	21	13.1
	POLICY TOTAL	-0.015	25	
	CLINICAL CARE			
	Dedicated Health Care Provider (Percent of adults aged 65+)	93.8	37	97.5
	Recommended Hospital Care (Percent of hospitalized patients aged 65+)	98.3	18	99.1
	Flu Vaccine (Percent of adults aged 65+)	60.1	25	70.1
	Health Screenings (Percent of adults aged 65–74)	87.9	13	92.4
	Diabetes Management (Percent of Medicare beneficiaries)	82.4	14	86.1
	Home Health Care (Number of workers per 1,000 adults aged 75+)	86.0	23	299.6
	Preventable Hospitalizations (Discharges per 1,000 Medicare beneficiaries)	59.0	19	27.4
	Hospital Readmissions (Percent of hospitalized patients aged 65+)	15.7	27	12.3
	Hospice Care (Percent of decedents aged 65+)	42.9	35	63.0
	Hospital Deaths (Percent of decedents aged 65+)	27.8	40	16.4
	CLINICAL CARE TOTAL	0	25	
	ALL DETERMINANTS	0.108	20	
	OUTCOMES			
	ICU Usage (Percent of decedents aged 65+)	13.8	31	5.1
	Falls (Percent of adults aged 65+)	26.1	16	14.5
	Hip Fractures (Rate per 1,000 Medicare beneficiaries)	7.7	34	3.0
	Health Status (Percent very good or excellent of adults aged 65+)	41.7	22	49.3
	Able-Bodied (Percent of adults aged 65+)	65.5	17	68.2
	Premature Death (Deaths per 100,000 population aged 65–74)	1882	28	1425
	Teeth Extractions (Percent of adults aged 65+)	16.1	23	7.0
	Mental Health Days (Days in previous 30 days)	2.1	10	1.5
	ALL OUTCOMES	0.059	24	
	OVERALL	0.167	21	

Overall Rank: 21

Determinants Rank: 20

Outcomes Rank: 24

Strengths:

- Lowest prevalence of food insecurity
- Few poor mental health days per month
- Low prevalence of underweight seniors

Challenges:

- High percentage of hospital deaths
- Low percentage of quality nursing home beds
- Low prescription drug coverage

Ranking: Virginia is 21st in this Senior Report. In the 2013 Edition, it ranked 23rd.

Highlights:

- Physical inactivity decreased in the past year, from 33.8 percent of adults aged 65 and older to 28.6 percent.
- In the past year, use of hospice care increased from 31.7 percent of decedents aged 65 and older to 42.9 percent, and hospital deaths decreased from 33.3 percent of decedents aged 65 and older to 27.8 percent.
- The number of poor mental health days among seniors increased in the past year, from 1.7 to 2.1 days in the past 30 days.
- In the past year, food insecurity decreased from 9.3 percent of adults aged 60 and older to 8.4 percent.
- Only 60.1 percent of seniors received a flu vaccine in the last year.

Disparities: In Virginia, 44.1 percent of seniors with less than a high school education are physically inactive compared to only 14.8 percent of seniors with a college degree.

State Health Department Website:

www.vdh.state.va.us

SUPPLEMENTAL MEASURES

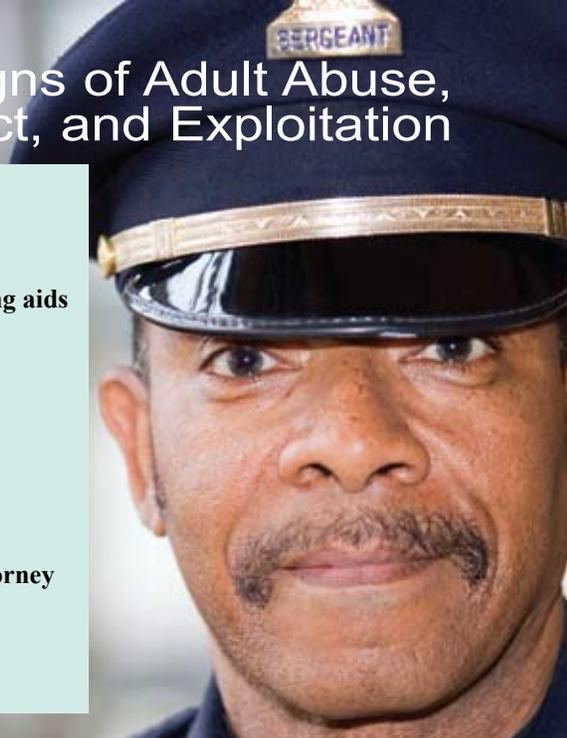
	2014		NO 1 STATE
	VALUE	RANK	
Education (Percent of adults aged 65+)	25.9	10	31.0
Multiple Chronic Conditions (Percent of adults aged 65+)	34.0	26	20.9
Cognition (Percent of adults aged 65+)	9.0	28	6.6
Depression (Percent of adults aged 65+)	12.0	12	8.3
Suicide (Deaths per 100,000 adults aged 65+)	15.4	24	6.4

SENIOR POPULATION GROWTH	STATE	US
Projected Increase 2015–2030	54.5	52.7



For a more detailed look at this data, visit www.americashealthrankings.org/senior/VA

Some Common Signs of Adult Abuse, Neglect, and Exploitation



- Burns, welts, scratches, bruises, cuts
- Fractures, dislocations, sprains
- Inappropriate or inadequate clothing
- Lacks needed dentures, glasses, hearing aids or medication
- Lacks needed supervision
- Malnourishment
- Mistrust of others
- Personal belongings are missing
- Property or savings are mismanaged
- Severe anxiety, fearfulness, depression
- Sudden change in will or power of attorney
- Unpaid bills
- Unsanitary or unsafe housing
- Untreated medical condition

Abuse hurts at any age
Mandated Reporters can save lives

Mandated Reporters

WHAT YOU NEED TO KNOW



1 (888) 832-3858

REPORT SUSPECTED ADULT ABUSE. CALL TODAY.

What Rights Do Mandated Reporters Have?

- A person who reports is immune from civil and criminal liability unless the reporter acted in bad faith or with a malicious purpose.
- A person who reports has a right to have his/her identity kept confidential unless consent to reveal his/her identity is given or unless the court orders that the identity of the reporter be revealed.
- A person who reports has a right to hear from the investigating local department of social services confirming that the report was investigated.

[Caring.]

Adult Protective Services Division

8004 Franklin Farms Drive
Henrico, VA 23229-5019



VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

www.vadars.org

mandated reporters

Any person licensed, certified, or registered by health regulatory boards listed in § 54.1-2503, except persons licensed by the Board of Veterinary Medicine:

- **Board of Audiology and Speech Pathology:** Audiologists; Speech-Language Pathologists; School Speech-Language Pathologists
- **Board of Counseling:** Licensed Professional Counselors; Certified Substance Abuse Counselors; Counseling Assistants; Certified Rehabilitation Providers; Marriage and Family Therapists; Licensed Substance Abuse Treatment Practitioners
- **Board of Dentistry:** Dentists and Dental Hygienists
- **Board of Funeral Directors and Embalmers:** Funeral Establishments, Services Providers, Directors, and Embalmers; Resident Trainees; Crematories; Surface Transportation and Removal Services; Courtesy Card Holders
- **Board of Long-Term Care Administrators:** Nursing Home and Assisted Living Facility (ALF) Administrators
- **Board of Medicine:** Doctors of Medicine, Surgery, Osteopathic Medicine, Podiatry, and Chiropractic; Interns and Residents; University Limited Licensees; Physician Assistants; Respiratory and Occupational Therapists; Radiological Technologists and Technologists Limited; Licensed Acupuncturists; Certified Athletic Trainers



- **Board of Nursing:** Registered Nurses (RN); Licensed Nurse Practitioners (LNP); Licensed Practical Nurses (LPN); Clinical Nurse Specialists; Certified Massage Therapists; Certified Nurse Aides (CNA)
- **Board of Optometry:** Optometrists
- **Board of Pharmacy:** Pharmacists, Pharmacy Interns, and Technicians; Permitted Physicians; Medical Equipment Suppliers; Restricted Manufacturers; Humane Societies; Physicians Selling Drugs; Wholesale Distributors; Warehousemen
- **Board of Physical Therapy:** Physical Therapists and Physical Therapist Assistants
- **Board of Psychology:** School, Clinical, and Applied Psychologists; Sex Offender Treatment Providers; School Psychologists – Limited
- **Board of Social Work:** Registered Social Workers; Associate Social Workers; Licensed Social Workers; Licensed Clinical Social Workers

- Any mental health services provider as defined in § 54.1-2400.1
- Any emergency medical services personnel certified by the Board of Health pursuant to § 32.1-111.5, unless such personnel immediately reports the suspected abuse, neglect or exploitation directly to the attending physician at the hospital to which the adult is transported, who shall make such report forthwith
- Any guardian or conservator of an adult
- Any person employed by or contracted with a public or private agency or facility and working with adults in an administrative, supportive, or direct care capacity
- Any person providing full, intermittent or occasional care to an adult for compensation, including but not limited to companion, chore, homemaker and personal care workers
- Any law-enforcement officer

What Are Mandated Reporters Required to Report?

Mandated reporters are required to report **suspected** abuse, neglect, or exploitation of elders or incapacitated adults.

Reporters should provide the name, age and address or location of the person who is suspected of being abused, and as much information about the abusive situation as possible.



Other Responsibilities Given to Mandated Reporters:

Mandated Reporters are required to share with the local department of social services records and information related to any report of abuse, neglect, or exploitation regardless of who made the report.

What Is the Timeframe for Making Reports?

Virginia law §63.2-1606 says that reports should be made “immediately.”

Is There a Penalty for Failure to Report?

Mandated Reporters who fail to make a report may be fined up to \$500 for the first failure and up to \$1,000 for subsequent failures. The Commissioner of the Department of Social Services shall determine and impose the fine for all mandated reporters except law enforcement.

APS also will refer matters as necessary to the appropriate licensing, regulatory or legal authority for administrative action or criminal investigation.

Who Should be Contacted?

A mandated reporter must make a report to the local department of social services or to the toll-free 24-hour APS Hotline at 1 (888) 832-3858.

A mandated reporter must report a suspicious death of an adult to the local medical examiner and law enforcement.





4th Annual Alzheimer's Education Workshop

*Dementia Care My Way:
A Vision for Person-Centered Care*

June 12, 2014

James Madison University
Festival Conference and Student Center
1301 Carrier Drive
Harrisonburg, Va.

alzheimer's  association®

Central & Western Virginia Chapter



Register today!

*Dementia Care My Way:
A Vision for Person-Centered Care*

alzheimer's  association®

Central & Western Virginia Chapter
1160 Pepsi Pl., Suite 306
Charlottesville, VA 22901

Nonprofit Org.
U.S. Postage
PAID
Permit No. 460
Charlottesville, VA

Dementia Care My Way: A Vision for Person-Centered Care

7:30 a.m. Registration opens

8:45 a.m. Welcome

Valda Garber-Weider, R.N., Certified Dementia Practitioner,
Director of Assisted Living

Virginia Mennonite Retirement Community

Sue Friedman, M.S. President & CEO

Alzheimer's Association/Central and Western Virginia

9:00 a.m. The Power of Residual Memory

Lanny D. Butler, M.S., OTR/L – No two individuals do anything the same way. What we do, how we do it and when we do it is all unique to us. This talk will explain how to enter a person's reality and find "The Person's Way" so you can use this information to allow people living with dementia the ability to again engage in bathing, dressing, eating and enjoying life.

10:30 a.m. Break

10:45 a.m. Optimizing Brain Health Across the Lifespan: What Can We Do to Reduce our Risk of Dementia?

Brian Mizuki, Ph.D., Aging and Memory Clinic, University of Virginia – In this presentation, Dr. Mizuki will highlight the factors that increase our risk for dementia. He will discuss current literature and whether it supports the use of brain games, exercise and other interventions.

Noon Lunch and Networking

12:45 p.m. You Don't Know What You Don't Know about Behaviors

Lanny Butler, M.S., OTR/L – This interactive session will provide strategies for person-directed care. Most behaviors found in people with dementia are caused by family members, caregivers

and therapists. We are moving so fast, making such demands on individuals that often they go into overload and the outcome is negative behaviors. This session will explain caregiving alternatives to decrease common behavior problems and explore how Residual Memory impacts the outcome.

2:15 p.m. Break

2:30 p.m. Breakout sessions. Choose one:

1. The Invisible Patient: Strategies, Support and Current Research for Caregivers of Individuals with Dementia

Brian Mizuki, Ph.D., Aging and Memory Clinic, University of Virginia In this presentation, Dr. Mizuki will focus on the under-recognized individuals caring for a loved one with Alzheimer's disease. He will discuss strategies that will focus on taking care of your loved one as well as yourself.

2. The Healing Power of the Arts

Harrigan Bowman, Ed.D. Activities professionals are often challenged to identify new and creative ideas for participants with memory care needs. This session will demonstrate how viewing and discussing artworks can truly engage residents in a meaningful, joyful experience, and will offer practical suggestions for how activities professionals can build experiences like this into their calendars.

3:45 p.m. Life In Reverse: Selma's Story

Florence Feldman, Filmmaker/Daughter/Caregiver – You will be encouraged and inspired as you view this award-winning short documentary and hear Selma's story from her caregiver, daughter and filmmaker Florence Feldman.

4:45 p.m. Closing Remarks

Please register by June 6, 2014. Payment must be received with your registration.

\$69 per person \$35 family caregivers*

One registration form is needed for each attendee. Group discount (\$60) for groups of five or more.

*Registration includes continental breakfast and boxed lunch. *Limited scholarships are available for family caregivers.*

To register by phone, call (800) 272-3900 and ask for Alzheimer's Education Conference at James Madison University.

To register by mail, complete the attached form and send to:

Ellen Phipps, Alzheimer's Association, 1160 Pepsi Place, Suite 306, Charlottesville, VA 22901

If paying by check, make check payable to Alzheimer's Association and mail with form below.

If paying by credit card, call the number above or complete the credit card information and mail with the form below.



Name _____

Address _____

Phone _____ Email _____

Meal Choice Regular Vegetarian Vegan

Please bill my credit card American Express Discover Mastercard Visa

Billing Address: _____

Credit Card No. _____ CVV _____ Expiration date _____

Total Amount \$ _____ No Refunds will be issued.