

Amazing Aging!

For Seniors and Those Who Love Them

A free publication of the Jayhawk Area Agency on Aging, Inc.
Advocacy, Action and Answers on Aging for Shawnee, Jefferson and Douglas Counties

FALL 2020



Our Mission

Jayhawk Area Agency on Aging, Inc. advocates on aging issues, builds community partnerships and implements programs within Shawnee, Jefferson, and Douglas counties to help seniors live independent and dignified lives.

- Is a 501(c)3 non-profit organization
- Is funded by tax-deductible contributions, federal funds, under state general funds and funds through local governments
- Does not discriminate on the basis of race, color, sex, national origin, age, religion, or disability



Marsha Henry Goff

Martha and Curt Lanpher's favorite morning activity is watching their goats graze and play in the high pasture of their Ad Astra Farms southeast of Lawrence. (Please see story on page 3.)

A Message from Susan Harris, JAAA Executive Director

As we have been navigating COVID-19 since March, we at Jayhawk Area Agency on Aging have opened our office back up and have the necessary safety equipment in place to keep you and our staff safe as you are coming into our office for assistance especially as we are entering the busy Medicare Open Enrollment Period.

October 15th starts Medicare Open Enrollment, which runs through December 7th. This is the time that Medicare Beneficiaries are given the opportunity to shop and compare Medicare Part D plans as well as Medicare Advantage Plans. We encourage all Medicare Beneficiaries to take the



Susan Harris

opportunity to review their current Medicare Part D plan or Medicare Advantage Plan to see if that plan is going to continue to be the appropriate plan for you with regard to cost and coverage. Plans can change annually what they charge in premium, as well as costs you will pay at the pharmacy counter... it is in your best interest to review your plan and compare coverage options and make changes if necessary.

We have a team of individuals ready and able to help you through this process.

National Caregiver Month is in November. Jayhawk Area Agency on Aging has several events planned to celebrate

caregivers. We recognize the challenges that family caregivers face and how they manage them day and night. Over half of family caregivers are women. One out of every four caregivers reports diminished family relationships. Most caregivers work outside the home either part-or-full time in addition to their caregiving responsibilities. Over a million American young people, aged 8 to 18, care for an adult relative on a daily basis. Nearly 70 percent of caregivers report they don't see their doctor regularly because of their responsibilities.

This November, we will remember and celebrate the people who lovingly give baths, clean houses, shop for, cook meals for, and comfort

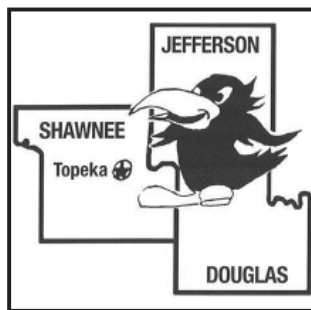
the millions of older adults and ill people who are friends and loved ones. We encourage everyone to reach out to a caregiver for an older adult that they know and ask what you can do to help make their job a bit easier. Something as simple as going to the grocery store for them or offering to be with their loved one so that they can have a break can go a long way to helping caregivers reduce the stress they can feel. As a caregiver the healthiest thing you can do for yourself is to fit naps into your schedule. Round-the-clock caregiving is never easy, but when your loved one takes a break, don't do another task, you take a break too. It's important to not wear yourself down or who will take care of you?

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You are encouraged to write us at:

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Marsha Henry Goff, editor



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Amazing Aging strives to provide readers with the information they need to live independent and productive lives. We also seek to feature stories of seniors who are active as workers, volunteers or engaged in hobbies. If you know a senior you would like to see featured in a future issue, please contact editor Marsha Henry Goff at mhgink@netscape.net or write to her in care of JAAA, 2910 SW Topeka Boulevard, Topeka, KS 66611.

Please visit us online at
www.jhawkaaa.org.

Curt and Martha Lanpher: Living a dream they love

By Marsha Henry Goff

Photos by Martha Lanpher unless otherwise noted

There was not a moment in time when Kansas native Martha Lanpher knew she wanted to be a farmer but her husband Curt, raised on a farm near Trenton, Missouri, has wanted to be one all of his life. “I know the joy of being married to someone who is doing what he loves to do,” Martha says, “and I love working right alongside him.”

In addition to all of his work on their farm, Curt is Facilities Manager for The World Company in Lawrence. Martha, a master gardener who has a cotton plant in her front flower garden, has retired from her position as CFO for PROSOCO, Inc. in favor of working for Curt “12 hours a day, 7 days a week. We’re both healthier than we

were at the beginning of the year, just emotionally and physically,” she says, “This hard work is very healthy for us.”

The couple met at K-State and each embarked on career paths away from agriculture. But the dream to own a farm and live in the country was always in the background as years rolled by and they raised their son and daughter. As empty nesters, they bought acreage and planned to build their dream home, but jumped at the chance to buy ten acres with a house and barn in place which they named Ad Astra Farms. The plural on the last word does not refer to size but to the many and varied agricultural “projects” they have launched on their land.

Although they have been beekeepers selling honey for a few years, they regard this past year as a learning experience for what they plan to do next year.



Martha notes that when the feeders are placed in the pens, the chickens surround them and look like the petals of a flower.

One project that did not pan out was the idea to sell meat rabbits. “We bought a doe and a buck, made all the cages and she had babies,” Martha explains. “We invited families out, socialized the bunnies, named all of them and then we ended that operation because . . .” her voice trails off, before she adds happily, “but they were wonderful for petting experiences for kids.”

Their chicken project is going strong. Nine Rhode Island Reds, dubbed “the girls” produce eggs to sell, while “the boys,” 25 Cornish Crosses, provide fresh meat. Buddy the dog is considered “the perfect farm dog” because he doesn’t chase the chickens but roams right along with them when they are out of their cages. He is good with the goats, too. According to Martha, “He wants the goats to be his best friends. They kind of shy away from him but he doesn’t chase them.”

The goats are a recent project. Several months ago, the Lanphers had several acres of trees — planted by a previous owner who planned to sell them for Christmas trees — cleared from the high pasture. Once cleared, they bought four goats. As Curt brings the goats out of their small holding pen, Martha introduces them. “The one with the horns is the mom and the two others are babies. Papa, the buck, his name is Marty. He was bottle-fed and thinks he is a human. He is the most gentle-natured buck and we are so thankful.”

As the goats climb the slope to the high pasture, Martha explains that “The fence on one side is not good enough for goats out in the pasture so every morning we let them out and we have benches on the west and east and we sit and watch



Curt leads the goats from the barn to the high pasture. (Photo by Marsha Henry Goff)

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Are pre\$cription drug price\$ coming down?

By Marsha Henry Goff

Almost everyone admits that prescription drug prices are too high. My mother died before Medicare Part D took effect, but I remember her drug bills took \$400 monthly out of her meager income. Part D, even with today's high prices, would have been a blessing to her.

When my friend Al picked up his wife's prescription the other day, he paid only a \$7 copay when he normally paid \$30. I have not heard of anyone else who has had that experience but am anxious to know if you have. If you have encountered lower drug prices, please email me at mhgink@yahoo.com with "drug prices" in the subject line. If you do not have email, please call JAAA at 785-235-1367 or, if out of the Topeka area, 800-798-1366, and leave your name and number so I may call you back.

I am trying to learn whether President Trump's July executive order to lower drug prices has had any effect. If readers respond, I will report in the next *Amazing Aging* what you tell me with regard to your experience, either using your name or preserving your anonymity, whichever you choose.

When the Medicare Modernization Act Established Part D in 2003, it included a noninterference clause saying that the HHS Secretary "may not interfere with the negotiations between drug manufacturers and pharmacies and PDP sponsors, and may not require a particular formulary or institute a price

structure for the reimbursement of covered part D drugs." That wording means that the government could have no direct role in negotiating or setting drug prices in Medicare Part D as they do for the military.

President Trump's executive orders instructed HHS to take a number of actions:

- End a shadowy system of kickbacks by middlemen that lurks behind the high out-of-pocket costs many Americans face at the pharmacy counter. Under this action, American seniors will directly receive these kickback as discounts in Medicare Part D. In 2018, these Part D discounts totaled more than \$30 billion, representing an average discount of 26 to 30 percent.

- Require federally qualified health centers who purchase insulins and epinephrine in the 340B program to pass the savings from discounted drug prices directly on to medically underserved patients. This will increase access to life-saving insulin and epinephrine for the patients who face especially high costs among the 28 million patients who visit FQHCs every year, over six million of whom are uninsured.

- Finalize a rule allowing states to develop safe importation plans for certain prescription drugs.

- Authorize the re-importation of insulin products made in the United States if the Secretary finds re-importation is required for emergency medical care pursuant to section 801(d) of the Food, Drug, and Cosmetic

Act.

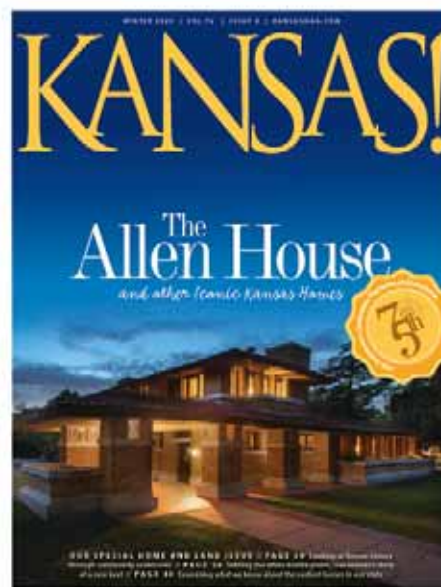
- Create a pathway for safe personal importation through the use of individual waivers to purchase drugs at lower cost from pre-authorized U.S. pharmacies.

- Take action to ensure that the Medicare program and seniors pay no more for the most costly Medicare Part B drugs than any economically comparable OECD country, ending foreign countries' free loading off the backs of American taxpayers and pharmaceutical investments. This order takes

effect in 30 days unless Congress acts.

The executive order was meant to ensure the most vulnerable populations received the greatest benefit from both the health center and 340B drug pricing programs and to help these two programs work together to see to it that health center patients had access to both high quality primary care and life-saving, affordable medications.

That is what it was meant to do. The question is: Is it working?



Kansas! Magazine, Winter 2020

Kansas pioneers: Some were women

Have you ever wondered if you would have had the courage to be an early American pioneer? Would you have been able to leave home and family behind as well as the modern comforts and medical care of the 19th Century to head West?

The winter 2020 issue of KANSAS! Magazine includes Marsha Henry Goff's article about her Great-great-grand-

mother Mary Hammond Sly who journeyed with her husband and two children to Kansas via flatboat and covered wagon in 1857. The family settled in pre-Civil War Nemaha County, endured "Bleeding Kansas" tribulations and, though staunch Abolitionists, were threatened by both Jayhawkers and Rebels.

Mary gave birth to her third child shortly after arriving in Kansas and the next year her eldest child Cornelia, only five years old, was the first in the burial ground. Pioneering was tough, but Kansas pioneers like Mary Hammond Sly were tougher. They had to be.

them and feel blessed.”

Curt adds, “These goats go all around the pasture, then they’ll come to this side and they’re ready to go home. They’ll just take off and go back to the barn. We’re creating fencing for baby goats and we’ve got that project to hold the goats in progress right now. We’ve got a corral area and we’ll have runs and pens at the barn for them to stay in and then we hope to turn them loose and not have to worry about them during the day in the pasture.”

Their ultimate plan is to breed goats. Martha shares that she and Curt are taking an online class on goats because “we really didn’t know hardly anything at all about goats when we bought these. It was a small investment. The next goats we buy, we’ll be a little more discriminating. We’re going to get cows, too, and

create a symbiotic relationship out here. Cattle graze low to the ground and goats forage higher. So they also help with pesticide control. They help each other. We’ll get the chickens out here so they can come along behind and help with fly control.”

Another project is reconditioning the pasture. Curt would like to have brome grass and they have been advised to feed cattle the hay they want to grow and the cattle will plant the seeds from the hay. The goal is to have a sustainable farm they can share with others. “We love the experience and we want others to do so,” Martha says. “It is more experiential. The product is important but one of our main products is experiences.”

“Yes,” agrees Curt. “We want to share this place with people. The way we have shared this year is we’ve invited people who are single, lonely — single mothers with children — to come out.

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Curt leads the goats from the barn to the high pasture. (Photo by Marsha Henry Goff)

Medicare PART D Open Enrollment

SHICK can help you save money

It’s that time of year again: Open Enrollment for Medicare Part D from October 15 to December 7. Even if you visited JAAA last year and had help choosing the best plan for you, this year you may find a different plan that fits you better and saves you money. Best of all, the help is free and each year SCHICK staff and volunteers save our clients thousands of dollars collectively. Who can’t use a little extra money in their pocket each month?

SHAWNEE AND JEFFERSON COUNTY

JAAA’s SHICK (Senior Health Insurance Counseling for Kansas) contract covers Shawnee and Jefferson residents. Call JAAA at 785-235-1367 or 800-798-1366 to schedule an appointment Mondays through Fridays and some Saturdays. **Appointments fill up fast, often by the beginning of October, so don’t delay.**

DOUGLAS COUNTY

The Senior Resource Center in Lawrence handles SHICK services for Douglas County residents. Due to COVID restrictions, they are offering appointments by telephone or ZOOM. They also have a limited number of in-person appointments. For an appointment, please call 785-727-7872.

FOR THOSE DIYers WHO ARE COMPUTER SAVVY

Go to <https://www.medicare.gov> and answer a few simple questions. You will have the opportunity to add the prescription drugs you take, choose the pharmacies you would like to use and compare plans and costs. If you cannot get a SHICK appointment and are not computer savvy, ask a trusted family member or friend who is computer savvy to help you.

**WHATEVER WAY YOU CHOOSE TO USE,
IT PAYS TO CHECK OUT NEXT YEAR’S PLANS!**

The Lanphers

CONTINUED FROM PAGE FOUR

See the farm. See the animals.”

While Curt says he has targeted this year for animals, they have not neglected the garden produce which they sell. However, he describes an unpleasant encounter with raccoons. “Earlier this year we planted our sweet corn in a couple different plantings and so we had a good following of people wanting sweet corn and we sold all we picked, but the last picking we planned to do — we had half of it sold to people who wanted it — and the day before we planned to pick it, the raccoons came in and wiped us out. So we had to call people and say we didn’t have it. The ‘coons, it was just like they waited until the day before. Wiped us out completely. Shucked it and everything.” He laments that the trail cam he positioned in the hope that the light turned on by the

motion detector would scare off the raccoons was ineffective. “It didn’t bother them at all.”

Their plans for garlic — some of which they hoped to sell to restaurants — to be a cash crop this year was thwarted by the COVID pandemic. Instead, they invited friends out to taste test the four varieties of garlic they successfully raised. Next year Ad Astra Farms will have the first of its annual Garlic and Honey Tasting Festivals where guests taste garlic, then clear their palates with honey before tasting another variety.

Currently, they have set up a rustic cart near the front of their property filled with produce for sale. Although Martha plans to man it on Saturday mornings, the rest of the time they will use the honor system for customers. Parked near the cart is a newly purchased 1949 International pickup, which they journeyed to Central City, Nebraska to buy. A credit union with mostly agricul-

CONTINUED ON PAGE SEVEN



Curt is hands on with the chickens.



The patio where Curt and Martha like to spend summer evenings eating volunteer watermelons and spitting the seeds at the chickens.



The slide indicates why baby goats are called “kids.”

The Lanphers

CONTINUED FROM PAGE SIX

natural clientele owned the truck and had it painted multicolored for use in parades: one side green for its John Deere customers and the other red for customers who owned Case tractors. Now, each door emblazoned with their Ad Astra Farms and Market logo, the truck stands in their front yard next to the rustic cart holding produce for sale.

The Lanphers are serious about their agricultural pursuits and appear unafraid to tackle almost anything. Two 280 pound hogs were purchased earlier this year and because the processing plants were closed due to COVID, Curt and son Brad butchered them, “It was the best meat. It was a

learning experience. We raised hogs when I grew up on the farm but I had never processed one.” The couple study and work hard to make their projects successful, but if — like the “meat rabbit project” — they do not work out, they simply chalk it up to experience and keep good memories of the endeavor.

The thought they put into each project they also put into choosing a name for their farm. “Ad Astra is Latin for ‘to the stars,’” Martha explains. “On the Kansas seal is a farmer working hard for a dream. That is what Curt and I are doing at Ad Astra Farms. We are pursuing a dream. Our barn has a large lighted star that shines every night; a reminder that dreams are worth working hard for.”



Curt is using a heated knife to cut off the wax cappings from the honey frames. After the cappings are removed, the frames are put into the extractor and spun to remove the honey and then it is bottled. The wax cappings are rinsed and used in lotions, lip balms and candles.



Buddy, the perfect farm dog, and “the girls” take an interest in Martha’s work. (Photo by Curt Lanpher)



The Lanphers’ colorful 1949 International truck and a picturesque cart welcome visitors to buy Ad Astra Farms produce.

Meet JAAA's new CHAMPSS Coordinator

By Marsha Henry Goff

Christine Johnson, CHAMPSS Coordinator, is excited about her role and happy to be a new member of JAAA's staff. The Pittsburgh, Pennsylvania native moved to Topeka last year after meeting in Colorado and marrying a man from Topeka who wished to return home. She likes Topeka and says that she cannot say enough about the place. "I feel like it is kind of a hidden gem. Just like the organization itself and it has such amazing people who work here. And CHAMPSS came out of that. It wouldn't do as well as it

does without the people around here."

She is not new to nonprofit work, having spent her entire career in the nonprofit field. But it is the strong and loving relationship she forged with her maternal grandparents that made the CHAMPSS position so appealing to her. Though her grandfather died in 1989 and her grandmother in 2015, she keeps in her office a photo of herself with the grandfather whom she describes as "a proud Marine and football coach" and the grandmother she dubs "a stay at home spitfire."

Christine says that "the close



Christine Johnson, CHAMPSS Coordinator, holds photos of herself with her beloved grandparents.



This photo of Christine with her grandparents was taken when they were celebrating her graduation from high school.

relationship I had with my maternal grandparents provided me with a deep understanding of the importance of social emotional well-being as we age. My grandparents made it a point to keep active doing the things they loved and being around those who were important to them. The time I spent with them and their close friends was invaluable. I know they would be so proud that I was part of the CHAMPSS program."

Although she has been researching CHAMPSS sites around the country and visiting some of JAAA's CHAMPSS sites, the Covid pandemic has greatly reduced participation, with some sites only offering pickup of meals. She is eager for Covid restrictions to end so the CHAMPSS orientation sessions may resume and she can meet and visit with cardholders. Look for her when they do. She'll be the woman wearing a big smile,

Visit us online at www.jhawkaaa.org

Your rights and responsibilities as a hospital patient

By Marsha Henry Goff

Once upon a time, hospitals kept patients until they were well. That is no longer true and it is not necessarily a bad thing. Many patients recover faster and better at home, provided they have the help they need in caregivers and medical equipment. Where a new mother and baby were once hospitalized for a week, now they leave the hospital in a day or two. The same is true for outpatient surgeries such as appendectomies or laparoscopic gall bladder surgeries.

You are most likely sick or injured when you are hospitalized and consequently not thinking your best. That is why hospitalized patients usually need advocates. But the Covid-19 pandemic has diminished the role of an advocate by cutting visiting hours and only allowing one visitor for a short period of time. That makes it all the more important for you to understand your rights as a hospital patient *before* a potential hospitalization. You have the following rights to:

1. Be entitled to respectful care.
2. Receive correct and full information about your health and your care.
3. Participate in your care decisions.
4. Confidentiality and security.
5. Have a family member and/or personal representative and your primary care physician promptly notified when you are admitted to a hospital.
6. Receive assistance completing an advance directive if you choose to create one. If you already have an advance direc-

tive, you have the right to expect it to be followed by the physicians and hospital staff caring for you.

7. Be treated in the least restrictive way that preserves your safety and that of other patients and hospital staff.

8. Expect hospital staff to be committed to your pain prevention and management.

9. Receive communication in a language you can understand.

10. Consent to or refuse to participate in any proposed research study without retribution or difference in the quality of your care.

11. Be informed of available resources for resolving problems or questions you have about your care, including Patient Relations and the Ethics Committee.

12. Examine your bill and receive an explanation of the charges, regardless of the source of payment for your care.

With rights come responsibilities. Your responsibilities as a hospital patient are to:

1. Provide correct information about your symptoms, past illnesses, hospitalizations, medications and any other pertinent information.

2. Ask questions until you fully understand your plan of care.

3. Participate fully in decision-making about your plan of care. This includes telling your physicians and nurses about any obstacles you may encounter in continuing your plan of care after discharge.

4. Follow your treatment plan.

5. Follow hospital rules, such as a no-smoking policy and visitor and noise-control guidelines.

6. Show respect to other patients, physicians and hospital staff.

7. Choose someone to speak for you if you cannot speak for yourself

8. Be fully involved in your discharge plan.

9. Provide information necessary to process your bill.

10. Promptly meet any financial obligations.

11. Consent to a blood test if any healthcare worker should come in contact with your blood.

MEDICARE EARLY RELEASE

You may appeal to Medicare if you believe you are being released too early. Hospitals are required to give you and have you sign a document within two days of entering the hospital that tells you about your right to appeal if you think the hospital is discharging you too early. They must give you that same document before discharge. Hospitalization coverage is one of the best benefits of Medicare. However, if you are admitted as a Medicare patient, the hospital may try to discharge you before you are ready.

The hospital cannot force you to leave, but it can begin charging you for services so it is important for you to know your rights and how to appeal. You have the right to an expedited appeal if you do not believe your care should end. Even if you do not win your appeal, appealing can buy you extra days of Medicare coverage.

Of utmost importance when you are discharged to home rather than to a nursing facility is that you have in place at home the caregivers and equipment you will need to recover there. A hospital social worker should be involved

in your discharge who should apprise you of available services, many of which will be paid by Medicare, such as visiting nurses and therapists. If the social worker does not mention home caregiving services, ask about them. If you do not require skilled nursing or therapy, JAAA offers a number of at home services that may be helpful to you. If you qualify for Older American Act funding, the services are free; if your income is too great for OAA, the same services are offered through Senior Care Act on a sliding-scale basis. Especially make sure that any equipment — such as oxygen — you require is in place.

One patient requiring two liters of oxygen in the hospital was sent home without a home oxygen unit in place. For two nights the patient limped along with a portable unit which sends oxygen into the cannula (nose piece) only when a breath through the nose is detected. A mouth breather (as many people are while sleeping) receives no oxygen.

An oxygen unit was not ordered by the hospitalist and delivered to the patient until a member of the hospital's board of directors became involved. Mistakes happen but that was a big one that could have been fatal. Make sure that everything you need is in place before the hospital discharges you and sends you home.

The best thing you can do as a hospital patient is to know your rights and ask questions until you fully understand the answers you are given. And do not hesitate to appeal if you believe you are being discharged before you are ready. You have absolutely nothing to lose by appealing . . . and everything to gain.

Caregiving: A calling for some, a struggle for others

By Marsha Henry Goff

Caregiving may come naturally to some. It doesn't to me, but I wish it did. I cannot imagine anyone less suited to be a nurse than I am. My grandmother was a nurse trained in a Victorian hospital. She was the soul of patience; me, not so much. It appears that when — along with all the other babies waiting to be born — I was in the line where God was dispensing patience, I said the same thing as when He offered me the ability to understand algebra: "I don't think I'll be needing that." Then I headed for the line of babies waiting for a sweet tooth.

I know one woman who as a young wife nursed her husband in his final illness. She must have been a natural because after his death she attended nursing school and became an RN. Now she is an exceptional physician. Caring for patients is clearly a calling for her.

My late sister Bette gave up an excellent job to care for her son Mike who had MS. Mike required a feeding tube and a ventilator. Bette was competent at managing both, feeding him through the tube and suctioning the trach when the alarm sounded. On the rare occasions when my sister Vicki and I persuaded her to let us take her to lunch when we traveled to Topeka, Bette's love and sense of duty was so strong she would not stay away more than an hour even though she had a

nurse with Mike. She always told me she wanted to live as long as Mike did so she could take care of him. She survived him by a year and a half.

I have only been a health caregiver for my mother and more recently for my husband as he recovers from surgery followed by pneumonia. While I handled my paternal grandmother's business for her in her final years and was the go-to person for the nursing facility where she was a patient, I wasn't responsible for her medical and personal care and therein lies the difference. You would think it should be easy to serve as caregiver for those you love dearly, but for me it is not. I am always worried that I am doing the wrong thing, something that is harmful instead of helpful.

Ray keeps complimenting me on what a good job I am doing which shows what a low bar he has set for me. He was a much better nurse to me when I had surgery 21 years ago. I have frequently said that I hoped he never needed a nurse, but if he did I hoped I could be half as good a nurse to him as he was to me. I'm afraid the verdict on that statement is in and I fell far short of the mark. The truth is I am not one-quarter of the nurse he was even though I may be working twice as hard at caregiving.

Five years ago, I wrote a book — *Everything I know about medicine, I learned on the Wrong Side of the Stethoscope* — intended to

CONTINUED ON PAGE 11

JAAA gets around! Look for us!

When Amazing Aging went to press, not all of these groups were meeting due to the COVID-19 pandemic. It is likely they may be meeting sometime during this quarter, but please call to be sure the presentation or group you want to attend is meeting.

TOPEKA/SHAWNEE PUBLIC LIBRARY
CANCELS ALL MEETINGS HELD THERE
UNTIL 2021

A Caregiver Support group and our Medicare Mondays and Part D DIY Information meetings are normally held in the Topeka/Shawnee Public Library. We regret that the library has elected to stop all group meetings in the library. They plan to allow meetings to resume in 2021

Caregivers' Support Groups

Baldwin Methodist Church, first Wednesday of each month, 1 p.m - 2 p.m.

November 4 December 2 January 6

JAAA, third Friday of each month, 12:00 noon - 1:00 p.m.

November 20 December 18 January 15

Events and Presentations

Grey Wolves in Meriden, Meriden United Methodist Church, third Tuesday of each month, 11 a.m.

November 17 December 15 January 19

Caregiver Support

Caring for loved ones during the COVID crisis

By Michele Dillon
JAAA ADRC Supervisor

If you want 2020 to end, raise your hand. Yeah, me too. This year has brought so many different emotions. COVID has affected so many people in so many ways. Loneliness for our seniors, especially, as they have had to stay home and isolate. During this time, I have spoken to many caregivers regarding decisions about how to best care for their loved one. They are torn between placing their loved ones in long term care and keeping them at home. If they place them in long term care, they know they will not be able to see them or monitor their care but can they do all the care themselves? Let's look at the options:

Long term care — This is a pretty safe environment. They are doing testing regularly and quarantine staff as required. Few residents in our local facilities have been exposed. The staff wants to keep the families they go home to safe as well. That said, here are important questions to ask:

How many COVID cases (staff and residents) have you had and what are your procedures?

How do you provide activities and prevent social isolation?

Do you allow window or outdoor visits? What about bedside visits for hospice?

How do you handle caregiver concerns?

In home care — This environment is controlled by you. Do you want to bring in home providers into your home? These providers work hard to keep your loved one and their staff safe. They don't want to bring it home to their families either. Questions for these providers are:



Michele Dillon

What are your testing procedures?

What are your quarantine procedures?

Here are some services to help you if you and your loved one decide to stay in home:

Caregiver Respite — Caregivers are provided temporary relief from caregiving duties whether through personal care and homemaker services or respite. Services can be tailored to meet the needs of the caregiver.

HCBS — provides oversight for a system of community based supports and services for persons in Kansas with disabilities. Providers include a variety of not-for-profit and for-profit organizations as well as governmental entities. This service is for lower income adults.

Hospice — Hospice care is a

special kind of care that focuses on the quality of life for people and their caregivers who are experiencing an advanced, life-limiting illness. Hospice care provides compassionate care for people in the last phases of incurable disease so that they may live as fully and comfortably as possible. Please don't wait until they are actively dying. This program offers so many wonderful features. This program can be used simultaneously with the two previously mentioned.

It is your responsibility to cancel any in home services if you and/or your loved one are sick at all. Slow the spread. Most importantly, if your loved one is oriented please allow them

to make the decision. Ageism is a huge issue in this country. Your loved one may decide that quality and not quantity of life is what is important to them. Will they get quality cooped up in their room with no visitors or socialization? Please allow them to decide how they want their life to go. Make sure everyone you care for, 18 years or over, has Advanced Directives to determine what they want their life care issues to be and who will be the best person to follow those directives.

For further information on any of these services or help in deciding the best plan for you please call me at the Jayhawk Area Agency on Aging (785)235-1367 ext 300.

Caregiving

CONTINUED FROM PAGE 10

help laypersons navigate from cradle to grave what can be a confusing healthcare system. I incorporated into the book what I learned as my mother's advocate and caregiver as well as my own medical experiences and those of other family members and friends. Soon I intend to update it with recent changes

to the healthcare system as well as what I have learned caring for my husband during his recovery. I am amazed at how much I have learned and how much more I still have to learn.

So to you readers who are currently caregivers or who will one day be caregivers — whether you are naturals at it like Grams, the young-wife-turned-doctor and my sister Bette — or struggle through caregiving duties as I do, I salute you.



November is National
Family Caregivers' Month.
Thank you from all of us
at JAAA.



Lori Thompson, new OAA Program Supervisor

By Marsha Henry Goff

Lori Thompson, newly hired Older Americans Act Program Supervisor, says she was attracted to the position because “the work entailed responsibilities toward wellness and nutrition and the betterment for the aging population.” She also liked that it entailed interaction with various providers as well as accountabilities and compliance work she would be doing with providers.

Both her graduate degree in health promotion management and her work experience make her well-suited to the position. Lori understands the importance of socialization as well as nutrition so JAAA’s congregate meal sites are of particular interest to her. Unfortunately she has been unable to visit the sites because the Covid pandemic has closed them for sit-down meals as well as the socialization that ensues. However, most are open for carryout meals provided the site is given a 24 hour advance notice.

The congregate meal sites

which were active prior to Covid are Auburn, East Topeka Senior Center, Eudora, First Apartments, Highland Park, LULAC Senior Center, Meriden/St Aloysius, Papan’s Landing, Perry Street, Rossville, Santa Fe Apartments, Silver Lake and Tyler Towers.

One of Lori’s favorite work experiences was with the Kansas State Approving Agency where her job was to approve colleges, tech schools, apprenticeships and law enforcement programs for veterans who used the GI Bill to complete their educations. Her position as OAA Program Supervisor will very likely allow her to encounter older veterans who also completed their educations using the GI Bill.



Lori Thompson, JAAA's Older Americans Act Program Supervisor.

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