Project REACH...

Resources for Elderly Assistance and Community Help

(315) 435-2362

Partnership Education and Training

A program designed to help our Seniors stay in their homes safely

This project is funded by the NYS Office of Mental Health

Joanne M. Mahoney
County Executive

County of Onondaga
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Edward Kochian
Deputy County Executive

June, 2008

Dear Onondaga County Partners:

I want to thank you for agreeing to participate as an "eyes and ears" partner in Project REACH (Resources for Elderly Assistance with Community Help). Project REACH is a program designed and structured to assist frail elderly in out community. It can only be successful with your help.

As you engage in your daily work activities, you come in contact with many county residents. You may see, firsthand, signs and symptoms that might indicate a senior citizen who is in need of help. As a trained "eyes and ears" partner, your role will be to make the important telephone call to the Onondaga County Department of Aging and Youth, Office for Aging, to make a simple referral. Professional staff from Project REACH will do the necessary follow-up.

This follow-up with seniors, who ma be in need of physical health, mental health or chemical dependency services, as well as supportive services such as transportation, home care and meals-on-wheels, cannot happen with out your help. Being the eyes and ears, watching and listening as you go a bout your daily business, is what will make Project REACH meaningful and successful. Together, we can work to ensure that older adults live stronger and healthier lives in our Onondaga County community.

Again, thank you for joining our Project REACH team.

Sincerely,

Joanne Mahoney

Joanne M. Mahoney
Onondaga County Executive

About Project REACH

Origin of program

- Project REACH is an Onondaga County Community collaboration managed by the Departments of Aging and Youth and Office of Mental Health
- Project REACH is one of three such programs in New York State that is funded by NYS Office of Mental Health

Goals of the program

- Increase awareness and knowledge of mental health and the elderly
- Identify behavior and indicators for at-risk elderly
- Seek out at-risk elderly whose independence and safety may be in jeopardy of mental health and substance-use conditions
- Early intervention of community support services will help decrease inappropriate and unnecessary placement in nursing homes or adult residential facilities

Need for the program

- The number of adults 85 and older living in Onondaga County will increase 66% by the year 2015
- Senior adults are living longer and the projected growth of adults 65 and older will double by 2030
- Increasing isolation of senior adults with no family or social connections
- Increasing connection between physical and mental health disorders
- One in every five people 55 or older experiences a mental disorder- which is not a part of normal aging
- Studies indicate that approximately 63% of older adults with mental health issues do not receive the services they need.
- Diminished functioning, substance abuse, poor life quality and increased mortality can result from untreated mental health problems
- Adults age 65 and older have the nation's highest suicide rate

About Project REACH, continued

How Will Project REACH Work?

- The initial supporting Onondaga County Community Project REACH Partner Agencies are :

  Christopher Community, Inc.

  National Grid

  Sage Upstate

  Syracuse Housing Authority

  Time Warner Cable

Partner Agencies have agreed to identify employees that, through the course of their everyday business, will be trained to recognize older adults who may be at risk of behavioral issues and in need of supportive community services. More “Partners” will be added in the future.

Project REACH Partners will be educated and make referrals as needed.

Project Reach Staff with the Department of Aging and Youth will follow up and offer supportive assistance to those accepting services.

About Project Reach, continued

What Will Project REACH Do For You,

The "Eyes and Ears" Partners?

- Present an opportunity to make a valuable contribution to your community
- Increase your awareness and knowledge about aging and mental health issues
- Increase your happiness/satisfaction quotient knowing that you have helped someone
- Being more secure knowing about aging and mental health resources that could help a family member or you
- Taking pride knowing that your employer values the Onondaga County community and **you** by supporting Project REACH

Age Related Changes

"Everyday I'm as young as I want to be and as old as I have to be" -Rhoda Harris

Honoring yourself is an important private ritual…..

Old Age isn't so bad when you consider the alternative.

-Maurice Chevalier

You are a powerful Project REACH Partner!

Age Related Changes

Sensory Perception (Includes all of our senses—sight, smell, touch, hearing and taste)

Visual and hearing impairments interfere with communication, social interactions, and mobility, leading to social isolation.

- Vision – about one-fifth of people older than age 70 have visual impairments that limit activity and increase the risk of falls
- Hearing – one-third of older Americans have impaired hearing, leading to frequent frustration to both older adults and those who are trying to talk to them

Motor Abilities (Strength, balance, physical abilities)

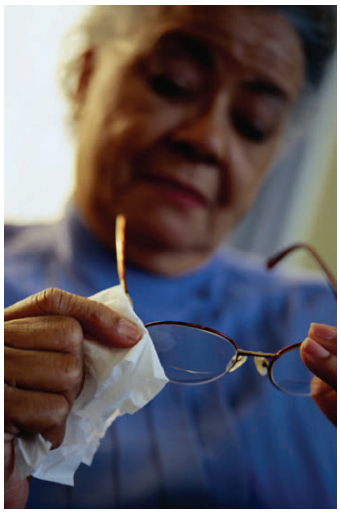
Decreased muscle strength and flexibility impairs an older person's mobility. Their risk for falling increases and if they do fall, their risk for injury is greater.

- Arthritis – estimates are that over 90% of the population over the age of 40 are effected by arthritis, although symptoms may not show until the later years
- Hip Fractures – about 5% of all falls result in a fracture

Cardiovascular System (Heart, lungs, circulation)

The leading cause of death in the older American is from heart disease. Contributing factors include hypertension, high cholesterol, and heart attacks. Having had a stroke may also greatly impact a person's day to day activity. Some cardiovascular symptoms are:

- Difficulty Breathing
- Cyanosis (blue coloration of the skin)
- Dizziness
- Chest Pain



Age Related Changes, continued

Neurological

Age related changes often involve memory and cognition, sleep, slower reflexes and motor coordination.

- Memory – forgetting names, misplacing items, poor recall of recent events
- Cognition – refers to an individual thinking, remembering, perceiving, communicating, and calculating
- Sleep – increased incidences of awakening after falling asleep
- Balance, posture and movement requires sensory input and motor output. If reflexes are slower and motor coordination is compromised, they may have a greater risk for falling
- Diseases such as Parkinson's Disease impact neurological abilities, other conditions that you might see are tremors and seizures

Cultural Diversity

And Cultural Competence

Defend the Dignity of the Person

As You Would Your Own….

Honoring yourself is an important private ritual…..

There is magic in believing….

You are a powerful Project REACH Partner!

Cultural Diversity and Cultural Competence

Onondaga and City of Syracuse Population Statistics

Who will workers find in the homes of the elderly? In the City of Syracuse, a little over 25% of the people are African-American and Latino. In the County of Onondaga, only 2% of all residents are people of color.

Increasingly, our community is changing as new immigrant and refugee groups settle in Central New York; each year 400-800 refugees are settled here. Workers will encounter many more people from Africa, the Middle East, and South East Asia, many of whom are Muslim. Immigrant/refugee groups from the following countries have been arriving in Central New York for the last five years:

Afghanistan

Burma

China

Cuba

Haiti

Iran

Iraq

Liberia

Mauritania

Somalia

Sudan

Uzbekistan

Although it is difficult to understand all the variations in communication styles, certain principles apply in all situations.

This training module helps the participants gain understanding and appreciation for differences, and allows a place for participants to practice respectful ways of communicating.

About Communicating

Honoring yourself is an important private ritual…..

"There is strength in talking to each other. We need each other."

-L. Jack

You are a powerful Project REACH Partner!

Communication Styles

Communication styles differ for each group. For example, there are marked difference in:

- Eye contact
- The way emotions are portrayed
- Distance/closeness
- Gesturing
- What is acceptable and unacceptable in terms of touch
- Loudness or softness of speech

General tips:

1. **Respect** is the key ingredient: if you do not understand the other person's manners, it may be that their cultural norms and ways of expressing themselves are different from yours. Simply act out of respect for them in all ways and communication will go better.

2. **Mirror/match** – When communicating with a person whose culture is different from your own, mirror and match their style. For example, if eye contact is limited, as is often the case with people from Asian countries, then downcast your own eyes as a sign of respect.

3. **Ask questions** in a gentle, friendly manner in all ways. Do not assume an overly friendly manner, (ie: touching, closeness of body, exuberance) as this may be construed as threatening.

4. **Apologize** if you have made a faux pas, and ask the person to explain to you what you have done that has been offensive.

Communicating With the Elderly

General Considerations

- As we all know, show respect
- Be a good listener
- Voice tone matters
- With hearing deficits – adjust your voice level as needed, gestures may be helpful
- Check for understanding – ask them to repeat back what you told them
- Individuals with vision deficits– appropriate lighting is helpful
- Nonverbal clues are important from the customer, such as, arms folded, eye contact, moving closer, facial gestures

Behavior Health/ Mental

Health Information

" you can't turn back the clock. But you can wind it up again." -Bonnie Prudden

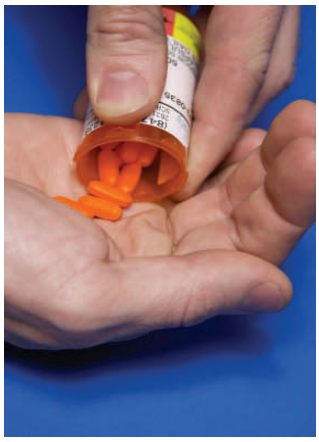
Honoring yourself is an important private ritual…...

I still have a full deck; I just shuffle slower now.

You are a powerful Project REACH Partner!

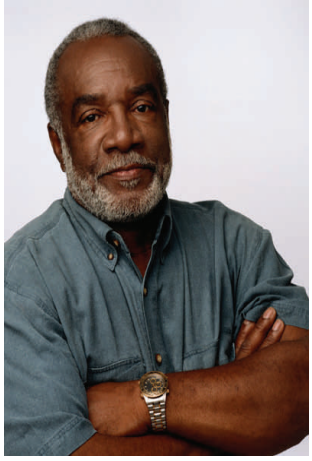
Three Factors that Influence Behavior

Biological Factors



- Not feeling well or being in pain
- Medications and their side effects
- Physical illness

Psychological Factors



- Loneliness or loss issues
- Mental illness
- Dementia or Alzheimer's Disease

Environmental Factors

- Too hot or too cold
- Dirty living conditions/garbage
- Unsafe living conditions
- Too much noise or stimulus
- Disruption to routine
- Socially isolated
- Broken windows, doors, screens
- Odors

Mental Health in the Elderly

Approximately 15% of the elderly population experience mental health issues of some type. Most fall under one of the following three categories:

Delirium (Confused, Disoriented)

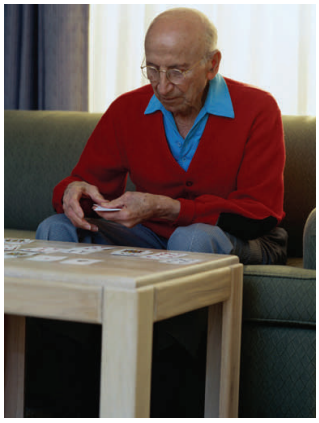
Mental changes that are reversible and generally arise from a specific cause such as: social isolation, immobilization, sleep deprivation, infections, trauma, dehydration, temperature changes, environmental stimuli and medications. When the onset is sudden, it's important for the person to be examined by a healthcare provider so the cause can be determined and treatment started.

Dementia (Progressive Disorder)

This involves a progressive impairment of intellectual (cognitive) function that interferes with normal social and occupational activities. It is characterized by loss of memory and disturbances in any of the following: orientation to person, place or time; attention span; calculation abilities; language; and motor skills. The onset is generally not rapid and the disease is irreversible.

Depression

Although depression in the elderly is a common problem, only a small percentage get the help they need. There are many reasons depression in older adults is so often overlooked: some assume seniors have good reason to be down or that depression is just part of aging. Elderly adults are often isolated, with few around to notice their distress. Healthcare providers are more likely to ignore depression in older patients, concentrating instead on physical complaints. Finally, many depressed seniors are reluctant to talk about their feelings or ask for help.



Risk of self harm/suicide in the Elderly

Statistics

1. The highest rate of any age group occurs among those 65**+**.
2. Every 90 minutes, there's one completed suicide among the elderly around the country.
3. Firearms (71%), overdose (11%), and suffocation (11%) are the three most common methods of suicide for those 65**+.**
4. It's estimated that 20% of elderly persons who commit suicide visited a physician within 24 hours of their act, 41% visited within a week of their suicide, and 75% have been seen by a physician within one month of their suicide.

Upstate New York Suicide Rates by Age, Ethnicity

	65-74	**75-84**	**85+**
Males	44	43	16
Females	13	8	6
White Male	43	42	16
White Female	13	8	5
Black Male	1	1	0
Black Female	0	0	0
Hispanic Male	0	1	0
Hispanic Female	1	0	0
Other Male	0	0	0
Other Female	0	0	1

Source NYS Department of Health, 2005, Table 43

Risk of Suicide in the Elderly, continued

Some Risk Factors

- Loneliness and isolation
- Reduced sense of purpose
- Health problems
- Medications
- Fears
- Recent bereavement or other significant loss
- Access to lethal weapons
- Depression

Ways to Recognize depression

And suicide ideation/thoughts

Older adults who deny feeling sad or depressed may still have major depression. Some clues to look for:

- Unexplained or aggravated aches and pains
- Hopelessness, helplessness
- Anxiety, irritability
- Memory problems
- Loss of feeling of pleasure
- Slowed movement
- Lack of interest in personal care (skipping meals, forgetting medications, neglecting personal hygiene)
- Recent loss (spouse, close friend, pet)
- Diagnosed with a terminal illness

Thoughts of suicide may include the following:

- Verbalizing
    1. "I have nothing to live for."
    2. "I don't know why I'm having this service done, I'm not going to be here much longer anyway."
    3. "No one will miss me."
    4. "I won't be a burden to anyone anymore."
    5. "I'm going to end my life." or "I'm going to kill myself."
- Giving away possessions
- Getting affairs in order

Who to Call?

Tools…

- First Encounters – a reminder
- Referral Form

Act on your instincts as
Well as the advice of
Strangers and experts….

Honoring yourself is an important private ritual…..

Life offers unlimited possibilities….

You are a powerful Project REACH Partner!

Who Do I Call?

Call 9-1-1:

Refer to your organizations procedure regarding 9-1-1

- If unconscious, not responsive, or minimally conscious
- Complaining of chest pain, or shortness of breath
- Recent onset of trouble seeing, walking, speaking, and/or has a noticeable droop on one side of their face or limb on one side of their body (stroke)
- Has fallen and can't get up – **Do Not** attempt to move or lift them unless there is immediate danger (fire)
- Moderate or severe bleeding

Important:

1. Remember to check the scene for your own safety first before intervening to help someone. You don't want to become injured as well.
2. **9-1-1** will ask your name, location, person's approximate age, and the type of emergency.

Call Project Reach at 435-2362:

- Whenever **9-1-1** has been called
- Whenever you have concerns about one of your elderly customers, including issues related to:
    1. Their environment – a household that is obviously dirty or disordered; pet urine or feces evident; foul odors or squalor conditions; evidence of rodent or pest infestation; alcohol or pills evident; refrigerated food left out
    2. Changes in a person's behavior – a normally social person becomes nonverbal or verbally aggressive or physically combative
    3. Physical concerns (non-emergent) – the person may verbalize they had a fall or are not feeling well; evidence of open sores, bruises, cuts, or scrapes

Who Do I Call?, continued

4. Financial concerns – tells you they have run out of money; may make statements such as “I have run out of my medication” or “I have no food.”

   Suspect they may be scammed if you hear statements such as:

   “My kids want me to sign all these papers and I don’t know what they're for.”

   “I keep sending these people money and they keep asking for more.”

   “I won a great prize; all I have to do is send them money.”

Remember the importance of maintaining

Confidentiality

Project REACH...

Resources for Elderly Assistance and Community Help

(315) 435-2362

First Encounter

- **F**rail looking
- **I**mpaired mobility/balance
- **R**esponds inappropriately
- **S**kin: ____ bruising ____open areas
- **T**ransportation concerns
- **E**nvironment: ___litter ___ too hot ___cold ___garbage ___odor ___no food
- **N**eglect in personal appearance
- **C**onfusion/disorientation
- **U**nder emotional distress: ____fearful ____withdrawal ____crying
- **O**dor of alcohol
- **N**eglected pets
- **T**emperament: ____aggressive ____argumentative ____very docile
- **E**xpressing financial concerns
- **R**eferral: **Call 9-1-1 if:** ___ chest pain ___difficulty breathing ___ fall ___unconscious

Call Project REACH (Department of Aging) at 435-2362 if:

____after 9-1-1 call _____ physical ____financial ____emotional ____environmental

Project REACH...

Resources for Elderly Assistance and Community Help

Project REACH...
Resources for Elderly Assistance and Community Help

Project Reach Referral Form
Onondaga County Department of Aging and Youth

Phone- 435-2362 Fax- 435-3129

Name of referring partner: _____ Date:_____

Contact Phone: _____ Partner agency:_____ ☐ Listed
Name of Client:_____ Phone:_____ ☐ Unlisted
Address: _____ ☐ Unknown

Remember!!! R-E-A-C-H-E-S
Please Check Any Areas That Apply And Circle Choices

Risk Of Physical Health
- ☐ Home health aide stopped
- ☐ Loss/gain in weight
- ☐ Rash/open sores/bruises
- ☐ Complaint of pain
- ☐ Severe difficulty seeing/hearing/walking

Emotional Health
- ☐ Recent loss of spouse/relative/pet
- ☐ Excessive statement of rejection
- ☐ Appearance of extreme anxiety/fidgeting/withdrawal
- ☐ Not eating/sleeping well
- ☐ Expressing hopelessness

Appearance
- ☐ Unkempt appearance
- ☐ Dirty clothes
- ☐ Body odors
- ☐ Odor of alcohol
- ☐ Inappropriate clothing for environment

Communication
- ☐ Confusion
- ☐ Disorientation (date, place, time)
- ☐ Inappropriate responses
- ☐ Forgetfulness

Home Conditions
- ☐ Exterior/Interior in poor repair, windows, screens
- ☐ Accumulation of old newspapers/mail
- ☐ House too hot/too cold
- ☐ Little or no food
- ☐ Garbage or litter
- ☐ Pets-many or appear neglected
- ☐ Strong odors
- ☐ Walks not shoveled
- ☐ Empty liquor bottles
- ☐ Many prescriptions/varied drugstores

Economic Conditions
- ☐ Inability to manage money
- ☐ Expressed concern about paying bills
- ☐ Large amounts of cash lying around
- ☐ Recent loss of income

Social Condition
- ☐ Living alone with help/no help
- ☐ Little/no social contact
- ☐ Possible victim of abuse/neglect/exploitation
- ☐ No transportation to doctor

Call 9-1-1: ☐ chest pain ☐ difficulty breathing ☐ a fall ☐ unconscious *then call Project REACH*

Partner's overall impressions/Observation of person(s)

Project REACH

In Conclusion

- You are **Not** expected to be therapists or social workers
- Trust your instincts – if something doesn't seem right, it probably isn't...call Project Reach
- Use your skills of observation and listening – your eyes and ears may save someone's life

You are a very important part of this project and we thank you for participating!

"Thank You!" "Merci!" "Gracias!" "شكرت أنت !", "Вы!", " Grazie!

Notes to Myself

Use this space for notes-questions you have about a situation you have encountered, notes about what you saw or heard at a person's home, follow up on a particular incident, etc.,

We thank you again for your time and being a

"Powerful Project Reach Partner"!

Project REACH...

Resources for Elderly Assistance and Community Help

Joanne M. Mahoney
County Executive

Lisa D. Alford
Commissioner, Department of Aging & Youth

Robert C. Long
Commissioner, Department of Mental Health

Onondaga County Department of Aging and Youth

Meeting Needs That Span The Generations

Emerald Training Consultants

InterFaith Works

Affirm Dignity

Community Wide Dialogue to End Racism