



NaCCRA LIFE LINE

*The Resident's Watchdog...
The Industry's Friend*

National Continuing Care Residents Association

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PRESIDENT'S MESSAGE

This being my last message as president of NaCCRA, I want to accomplish two things... thank all the individuals across the country who provided support and encouragement the past four years and to wish the new president and board of NaCCRA the best of luck and pledge my support. At my first meeting in Hightstown, NJ, I met five individuals who made a lasting impression on me. Charles Germany, President of the NJ Residents Association; Bob Negele, President of the CT Residents Association; Dick Spencer, Representative of the FL Residents Association; Bob Anderson, Treasurer of NaCCRA; and Doug Pace, VP for CCRCs and Assisted Living at AAHSA. They were all, except Doug Pace, at least ten years my senior and full of energy with a desire to serve residents.

After that first meeting the list of individuals that I could identify as strong supporters and leaders within the NaCCRA and AAHSA organization grew and are now too numerous to list by name. I do want to offer a special thanks to Larry Minnix, Susan Weiss, Steve Maag, Bruce Rosenthal, Maggie Flowers and Sarah Mashburn from AAHSA for their support the past four years.

Two special supporters have been Anne Burns Johnson, President/CEO of Aging Services of CA and Janegale Boyd, President/CEO of FL Homes and Services for the Aging. Thanks to you dear ladies.

David Dole of MN has made excellent suggestions and worked hard to help NaCCRA secure a foothold in MN. Joe Strain of MA is a hard worker for all residents and provides excellent information as Editor of the states' newsletter. Elaine Sorensen provided the leadership to secure our first Erickson Community member, Greenspring, VA. Jane Madsen arranged my first opportunity to visit and speak with a PA CCRC. Fisher Howe, Washington DC, has provided excellent articles for the *Life Line*. Bob Lane of CT has given us Greyisgreen. Jane Hasty, Editor of Piedmont Spirit, NC, has provided numerous laughs. Priscilla Bleke has assisted with new members in NC. Jay Troxel of FL made a significant contribution to our financial well being my first year in office. The Rev. Bob Bell, President of Westminster CCRCs in the Washington DC area, is a tremendous supporter of NaCCRA. John Thompson, Executive Director, The Estates

(continued on page 11)

NaCCRA Officers...

President	Charles D. Paulk, Lakeland, FL paulk65@gte.net
Vice President	Marleen Varner, Lakeland, FL travelgal2342@aol.com
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Check our web site at: www.NaCCRA.com

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NaCCRA Opportunities Unlimited

It is reported that there are approximately 2000 Life Care Retirement Communities in the United States with a new CCRC opening every week. NaCCRA has done remarkably well in the first decade of its birth, but we are still in our infancy.

Along the Eastern Seaboard and California we are well organized and represented from Maine to Florida, but understandably there is much for us waiting our attention in the Midwest. Many NaCCRA residents have friends across the country, and they are among the prospects for membership prior to and following their moving to a CCRC. We have capitalized on this friendship in Illinois, Minnesota and Tennessee and to some degree in Alabama and Arizona.

This condition calls for us to establish NaCCRA Membership and Recruitment Chairs in all of our existing CCRC's, as well enlisting the at large NaCCRA members to assist us throughout the country. In many cases we have 6 to 8 members in a CCRC while in others we have over 100 because there is an ongoing Recruitment Program for new members as soon as they enter a CCRC.

We now have a listing of 15 Very Good Reasons for Becoming a Member of NaCCRA, which you find listed on page 9 in this issue of *Life Line*. They are concise and easy to interpret and share, but it takes an individual a few minutes of their time to enlist new members. NaCCRA is the organization for residents just as AAHSA is the organization for management.

Through the tireless efforts of Charles Paulk, NaCCRA has achieved an excellent working relationship with AAHSA. Across the country NaCCRA and AAHSA are cooperating in mutual efforts to improve quality of care for all residents.

In addition, there are now over 13 states that have granted a waiver to the "Provider Tax" sometimes known as the "Bed Tax". This has saved CCRC's literally 100's of thousands of dollars. Those states that have achieved the waiver must now make their services available in assisting other states. We are all invited to make the 2008-2009 year a period of significant growth.

Faithfully yours,

John T Mathison

The Legacy of Art Burrell

Joe Strain

This issue of *Patriot* is dedicated to the memory of Arthur E. Burrell, Founding President of MLCRA, first Editor of *Massachusetts Patriot*, and President of the National Continuing Care Residents Association. A Past President of the Residents Association at Edgewood, North Andover, Art died on January 27, 2008. We are saddened by our loss but inspired by our memories.

During World War II, Art served as a Flying Sergeant in the First Commando Air Force, U.S. Army Air Force, flying troops deep into the jungles of Burma and rescuing injured and wounded men.

After the war, he was graduated from Boston University, worked for Sentry Insurance Company, and became Comptroller and Office Manager of Sentry's Northeast Regional Office. In this position, he was responsible for a \$90 million budget and a staff of 300 "to help me spend it." In 1964, he founded the Burrell Insurance Agency and served as its president for 30 years.

A 50-year resident of Lexington, Art was an elected member of Town Meeting for 30 years. He was also a member of the Governor's Advisory Committee on Emergency Management, and Disaster Chairman of the Metropolitan Boston Chapter, American Red Cross. In short, he lived a life of service to others, a tradition he continued as a retiree at Edgewood and president of MLCRA.

Art envisioned MLCRA as a friend and supporter of the retirement home industry, and as a "Watch Dog" (his words) to ensure the quality of life and financial security of residents. In short, MLCRA is a form of protection insurance.

Art understood the actuarial reality that MLCRA's dependence on dues from the limited number of Residents Associations in Massachusetts would forever constrain its ability to achieve fiscal viability. He also understood that depending on Management to fund Residents Associations leaves them vulnerable to undue influence.

To achieve fiscal viability and organizational independence, Art advocated establishing voluntary Individual Membership dues. His successors – Presidents Anne Gold, Jerry Levy, Jean Vivian, Bob Naka, and the MLCRA Executive Committee – enthusiastically support Art's vision. The assembled Residents Association Presidents have voted to adopt voluntary Individual Membership dues of \$15. Additionally, they have approved stratified dues for member Residents' Associations based on the number of Independent and Assisted Living Units. In time, Art's vision and his successors' hard work and loyalty will make the MLCRA a living legacy for future generations of residents.

Art, we salute your leadership, commitment and vision. On your final flight, we wish you blue skies, a friendly tailwind, and a safe landing. Once again, you can report, "Mission Accomplished."

When next we meet, we anticipate your greeting us with an application for membership in your newly organized Celestial Residents' Association.

*Reprinted with permission from
Massachusetts PATRIOT, Vol. 8 Issue 4 – Winter, 2007*



Community Members Spotlight

**NEW
FEATURE**

Life Line is going to feature one of our community members in each issue. We are pleased to present Greenspring, an Erickson Community, located just outside the beltway and east of I-95. Greenspring is a beautiful community, with outstanding amenities, and professional management. Laverne and I have spent a week in this community and were treated like royalty. I can highly recommend this community for anyone desiring to locate near our nation's capital. Following is a fact sheet about the community and an article from the Resident News Letter titled Nostalgic Sounds of Summer:

**NEW
FEATURE**

Greenspring Retirement Community

Contact: Jason Connors, Public Relations Manager
jconnors@erickson.com • (703) 923-4690

- Greenspring, the largest campus of its type in Northern Virginia, is part of a national network of campuses for moderate-income people, age 62 and older, developed and managed by Erickson Retirement Communities, a Catonsville, Md., company.
- Opened in November 1998, Greenspring is the first Erickson campus in Virginia and is home to more than 2,000 residents and nearly 1,000 staff.
- Greenspring is a voting precinct.
- Greenspring consists of four main buildings and 12 resident apartment buildings, all connected via hallways and bridges. The entire campus is situated on more than 100 acres.
- Greenspring has five indoor restaurants, offering a variety of cuisine. Other amenities include an indoor fitness center and pool, shuttle service, dog park, a PNC Bank branch, gift shops, hair salons, an on-site doctor and Renaissance Gardens assisted living.
- Channel 6, Greenspring's closed-circuit television station that broadcasts to residents' apartments, won four Telly Awards in 2008.
- Greenspring has nearly 200 different clubs and groups, including a computer club and Nintendo Wii bowling league.
- Each Erickson campus is supported by Erickson HealthSM, the nation's largest and most completely integrated wellness and health care system for people older than age 62.
- Including Greenspring, the Erickson network currently comprises 21 campuses which in total are home to more than 19,000 people.
- Erickson pioneered the 100 percent refundable entrance deposit, which protects a resident's equity after they move into an Erickson community. Erickson fee-for-service schedule insures residents only pay for services they want and/or need, making the full range of housing and health services available to moderate income America.

Greenspring Retirement Community
7440 Spring Village Drive, Springfield, VA 22150
www.ericksoncommunities.com/gsv

Nostalgic Sounds of Summer ...

Penny Showell (OH-214)

Thwack! The mallet hits the ball – it rolls through the grass, through a wicket – or not. Yeas of satisfaction, groans of frustration. How many of us have memories of playing croquet in our yards when we were young? Now this pleasant pastime is here, played by residents on a beautiful green court created by gardener John St. Lewis. It lies between the garage near Renaissance and the residents' gardens.

The players gather on Thursday mornings at 10 o'clock and play a couple of hours, and/or play at 7 the same evening. It's definitely Backyard Croquet, as opposed to Competitive. Of course, each player wants to win by getting through all the wickets first, but the emphasis is on the pleasure of being outside, companionship, and honing skills. Some of the players are new to the game, others, like Ruthe Faulkner (CC-523), are old hands. "I've played all my life," she said. "It's lots of fun." Ann Jaekle (GT-307) stopped to

play one evening at the end of May. "There were only four of us," she said. "It was a perfect evening – a wonderful time for it, and the people were welcoming. I intend to return."

Their leader is Eloise Chauvette (CC-215). She helped get the games started in April, coordinating with Christy Groves of Community Resources. Chauvette is there early to set up the wickets, sign up those who come to play, and see that things go in an orderly and fair way. Right now they have only four mallets and balls – blue, red, black, and yellow; so if there are more players than that, they take turns. It takes about half an hour to finish a game. Ten or more people have shown up, but eight is the more usual number. They play by U.S. Croquet Association rules that are adapted. The croquet set is kept in a "Tillager" garden shed, so it's easily accessible. "Bob Sherman (CC-105) has

(continued on page 5)



Making it Affordable to Care

By Larry Minnix

As the national debate around health care reform rages on, it's clear to those of us in the health care business that an important piece of the dialogue is missing – long-term care and what to do about it. This oversight surprises and worries me.

Long-term care costs account for an enormous percentage of overall health care budgets. Most existing programs all but ignore long-term care. Sen. Hillary Clinton (D-N.Y.) was the only presidential candidate to openly state the need to create some kind of national insurance to help families cope with caregiving challenges. We encourage the other two candidates to follow suite.

I don't have to tell you that long-term care isn't just about old people in nursing homes. It's about helping people of all ages receive the services and support they need when they can no longer completely care for themselves. It's about a daughter who feeds her elderly mother. Or a brother who drives his disabled sister to a doctor's appointment. It's about a visiting nurse who provides treatments to a widower in his apartment.

No, long-term care doesn't just take place in nursing homes. It's provided in homes by families and friends in every neighborhood in America. As former First Lady Rosalynn Carter said, "There are only four kinds of people in this world, those who have been caregivers, those who are currently caregivers, those who will be caregivers, and those who will need caregivers." Which kind of person are you?

There's no question that care giving is a national pastime. But paying for it is a national emergency. On average, according to a recent National Alliance for Caregiving survey, families involved in caregiving contribute more than \$5,500 per year out of pocket to pay for their loved ones' food, transportation and medicine. That's more than most spend on their own health care. On average, caregivers spend 35.4 hours a week caring for their loved one. And it's not just for a day or a week. More than half of us (52 percent) have been providing care for more than three years and a third (32 percent) give care for more than five years.

These peoples' responsibilities cost U.S. businesses more than \$2,000 every year per employee. Then there's the government. Our state and federal government currently spends more than \$100 billion each year on long-term care services through Medicare and Medicaid.

In a 2007 report on the issue, the National Commission for Quality Long-term Care argued that "It is critically important that policy makers at all levels of government understand that there will be no real solution to the health care crisis without a complementary solution to the long-term care crisis, and vice versa."

So, why isn't this issue on the front page or in a presidential candidate's platform? How can we have such

a detailed discussion about health care reform and not address the intrinsically linked issue of long-term care and caregiving? For the same reason that your first thought isn't to call your member of Congress when your loved one falls in the middle of the night. How can she help you then?

Part of the reason that caregiving is so hard is that we don't have policies that support caregivers or help people pay for what they need. It is absolutely unaffordable to care in this country.

But that doesn't have to be the case. Imagine if we had a national long-term care insurance program that all could participate in and all could get benefits from. When we are working and well, we would pay premiums like we do for car or health insurance. When we needed help, we could receive cash benefits to hire an aide, pay a family member who misses work to help us or order groceries to be delivered.

AAHSA has a reasonable and actuarially sound solution to this financial burden through a national insurance trust accessible to all adults. We would pay a small premium while working, and we all benefit if we become disabled through a daily cash benefit. We could decide what kind of care we need and use the funds for services we choose in place we call home. The plan would support caregiving, which already encompasses 80 percent of long-term care. Our plan provides choice, flexibility and fairness. Most potential crises are insured. Why shouldn't long-term care be insured for 250 million Americans? Our current predicament is unhealthy and unsustainable. We must, at last, make it affordable to care.

Larry Minnix is president & CEO of the American Association of Homes and Services for the Aging, which represents not-for-profit providers of long-term care.

An Almost Fatal Error

On a trip through the Loire Valley in France, my wife and I spent a night at a chateau. In the early morning, I went out for my usual jog through the countryside. Later, cooling off in the garden area in the rear of the chateau, through our large floor-to-ceiling bathroom window on the second floor, I could see my wife standing in the nude, although she was not near the window.

By throwing pebbles against the window, I got her attention and waved and gave her the "OK" to let her know she could be seen from the garden. She smiled and waved back.

Returning to our room I found my wife in bed. When I asked why she had returned to bed, she informed me that she had not yet risen. Only then did I realize that our room was actually on the third floor, not the second.

Don McKenzie



NATIONAL CONTINUING CARE RESIDENTS ASSOCIATION

FALL MEETING • OCTOBER 12, 2008

Pennsylvania Convention Center, Philadelphia, PA

CALL TO MEETING

In accordance with the provisions of Article VII, Sec. 1 of the Bylaws, the Fall Meeting will be held in the Pennsylvania Convention Center, Sunday 3:15 - 5:45 PM, Oct. 12, 2008. The AAHSA Residents' Luncheon is scheduled for 11:30 in a nearby room.

AGENDA: Combined Fall and Executive Committee Meeting (Draft)

Call to Order 2:30 PM.....	Charles Paulk	President	
Welcome – Introduce Guests.....	Charles Paulk	President	
Minutes of Last Meeting	Anne Winslow	Secretary	
Treasurer's Report.....	Robert Gault.....	Treasurer	
Install New President.....	Steve Maag	AAHSA	
CCRC Update	Steve Maag	AAHSA	
Advocacy Update	Susan Weiss	AAHSA	
Quality First Update	Maggie Flowers.....	AAHSA	
Grey is Green Update	Marleen Varaner.....	Vice President	
Membership Update.....	Charles Paulk	Executive Director	
Dues Structure	John Mathison.....	President	
Review / Change By-Laws	John Mathison.....	President	
State Association Reports - (4:30 PM – limit 3 minutes each, submit written reports to secretary)			
If a state is unable to send representative, secretary will read reports.			
California	Anne Burns Johnson	Massachusetts	Anne Swartz
Connecticut.....	Billie Alban	New Jersey.....	Gary Baldwin
Florida	Charles Paulk	North Carolina	Robert Wyatt
Maryland	William Root	Pennsylvania	George Tjiattas
		Virginia.....	Ronald Levin
Community Association Reports - (5:00 PM – limit 3 minutes, submit reports to secretary)			
Communities please advise president by September 15, 2008, if you will have a report.			
Legislative Issue Committee Report	Robert Negele	Chairman	
Vision for NaCCRA	John Mathison.....	President	
Unscheduled Speakers			
Unfinished Business			
Adjourn			

(continued from page 3)

Nostalgic Sounds of Summer

been a great help," Chauvette said. "He devised a way to know where to put the wickets without having to measure each time. He put red wooden plugs in the ground where the wickets go."

Sherman maintains that he is a "nasty player," because he doesn't hesitate, upon hitting another's ball, to send it as far away as he can. It's done by putting your ball next to another, stepping on your ball to hold it still, hitting it hard so that the other ball travels. Others are skilled at hitting one ball against another so that each travels in a desired direction and distance. Most are just concentrating on getting their own ball through a wicket (or two at a time if they're lucky) and going on to the next.

Croquet has long been featured in art and literature. Many famous painters, including Norman Rockwell, pictured ladies and gentlemen playing the game in the stylish costumes of

their day. But the game is not just a leisure time activity. St. Johns College and the U.S. Naval Academy engage in a yearly croquet match – an Annapolis tradition of rivalry. There are numerous varieties of croquet, both "backyard" and the seriously competitive, including bicycle croquet.

In Lewis Carroll's *Alice in Wonderland*, a hedgehog was used as a croquet ball, a flamingo as a mallet, and playing cards as the wickets. But here at Greenspring, we have plain old wooden mallets, wire wickets, and hard plastic balls that make a splendid crack when one hits another. Is croquet something you'd like to try? Call Eloise Chauvette. See Channel 8 for information.

Reprinted with permission of The Villager, The Voice of Greenspring Residents, June, 2008



Machaba Balu and Birds, Too!

(A Natural Treasure in Our Own Backyard)

By Marian Derfer

In February 2006, The Nature Conservancy officially opened the 10,000-acre Machaba Balu Preserve, a collection of islands, salt marshes, and uplands located between the St. Johns River and Nassau Sound. The name Machaba Balu, Timucuan for "saved" or "preserved" marsh, honors the cultural and historical significance of the preserve's location. The preserve, which is managed in partnership with the National Park Service, also protects 77 maritime hammock, pine, and shell islands ranging in size from less than a half acre to 30 acres.

When the opportunity to see part of Machaba Balu came our way, Bill Pickens and I were elated! So at noon on March 30, Erica La Spada, Donor Relations Manager for The Nature Conservancy, took us aboard her Toyota for a trip to Mayport and a ride on the *Jean Ribault* ferry. After disembarking at Fort George, we drove to the Kingsley Plantation, where we were greeted by Richard, a National Park Ranger. In a 1920's building we hastily ate the tasty sandwiches which had been prepared for us by the Fleet Landing kitchen staff. Hallie Stevens, Director of The Nature Conservancy site, welcomed us and briefly spoke about the goals of the organization. Next, Richard, driving a golf cart, gave us a speedy ride through the woods of the plantation, coming to a halt at the boat landing.

At this point of our adventure, we were faced with a real challenge – we had to navigate about 20 feet of a very steep ramp in order to get aboard the water taxi. With the aid of the rangers, we were able to accomplish our goal and soon we were seated right up front. But the weather that day was

REALLY cold and the chilly wind made it miserable. Dave, the taxi's captain, and Hallie loaned me their jackets. Soon the taxi was underway and Hallie announced that the first guest who spotted a dolphin would be given a prize. A few seconds later Bill spotted one just ahead of the taxi, and Hallie presented him with a Nature Conservancy tee shirt as his prize. Yep, he beat the dozen other passengers! Hallie then presented more information about Nature Conservancy programs.

Even though the weather was yucky and gray, we saw cormorants, pelicans, and other water birds as the trip progressed through the backwaters and into Sisters Creek. The tidal salt marsh acts as a nursery for the region's important fisheries and serves as spawning ground for commercial and recreational fish species. As the taxi progressed on its course back to the boat landing, Bill and I tried to gather up steam to get us back up the steep ramp – but we made it and got into Richard's golf cart again for a trip around the historic Kingsley Plantation.

After the return trip via the *Jean Ribault*, we were soon home and marveling at the remarkable natural wonders that we had seen. But we were also very grateful that there is an organization such as The Nature Conservancy that will continue strategies to preserve coastal resources in the midst of Jacksonville's rapid growth. Our helpful host Erica told us that the organization is planning more trips to Machaba Balu.

Reprinted with permission from Fleet Beat, Vol. 18 No. 4, Fleet Landing, Atlantic Beach, FL

We Must Build Emotional Resiliency

by Harry L. Mills, Ph.D.

The immune system has been called our liquid nervous system. With our growing knowledge of the human body has come an increasing conviction that stress and the negative emotions it produces, like depression and anger, may be a factor in susceptibility to colds, flu, mononucleosis and other infectious illnesses. It appears that some of the hormones secreted in the presence of stress emotions impair or weaken the immune process by reducing the number of disease-fighting components such as lymphocytes, thus leaving us more vulnerable to infection.

A study at the University of Minnesota indicated that patients who were seriously depressed before their bone marrow transplant were significantly more likely to die in the first year following their transplant than non-depressed bone marrow transplant recipients. A University of Montreal study found that patients treated for a first heart attack who were seriously depressed were five times more likely to have a fatal second attack than a comparable group of patients who were not depressed.

At Mt. Sinai Medical School in New York City research indicated that seniors who are not depressed were three times more likely to walk again after breaking a hip and nine times more likely to regain their previous state of health than those who were depressed. Stress is a factor in producing and prolonging depression. We all get sad from time to time but stress helps keep us that way.

One of the most important things any of us can do for our health is to improve our stress management and emotional resiliency skills. They can be learned by anyone who wants to do so. Also we must take depression very seriously. Should you be experiencing depression or know someone who is, please discuss with your doctor. Other tools to treat depression may be to consider counseling, exercise, socialization, talking about it, diet adjustment, meditation, or medication adjustment.

Reprinted with permission from Editor, John Knox Village Life, Orange City, FL – April/May, 2008



Florida Caregiver of the Year Award

Mr. Paulk,

Ray Johnson, Executive Director and CEO, asked that I send you an email about our employee, Doris Gill, RN, and her receipt of the Caregiver of the Year award from the Florida Association of Homes and Services for the Aging. Doris is our Wellness Clinic and Home Health Manager. She is the first health care contact for all of our residents and tracks everyone's care while they live at Vicar's Landing. Doris has worked at Vicar's Landing since 1991. Below is the write-up from her recommendation for the award. If you need any further information, please let me know.



Doris Gill, RN, began working for Vicar's Landing on June 3, 1991, and has been an invaluable team member and resource ever since. She currently works as the Manager of the Wellness Clinic for our independent members and as the Manager of the Vicar's Landing Home Health Agency. Doris is joined each day by her dog, Cami, who is just as happy to see the members as Doris.

Doris graduated from Georgia Baptist School of Nursing in Atlanta in 1955 and knew that she had found her calling. She worked in various settings during her career and always showed the same compassion for her patients and passion for her work. She is key to the health care provided to the Vicar's Landing membership. She meets with every new member when they arrive and follows their care closely through the years. Doris' skill and position allow her to see when someone is getting close to needing the assisted living or skilled nursing areas. She is the first to respond to emergency calls to assess the situation and lend a hand. Doris also does a great deal of "sidewalk nursing" as she walks through campus. The members have the utmost trust in her skills and value her as a friend. In addition to her work with the members, Doris is a help to the employees here. She does the annual physicals on all employees, provides first aid and is the first face employees see during orientation.

Doris' passion is the health of the members of Vicar's Landing and will frequently identify needs and pursue solutions. When she noticed a need for health information among the membership, Doris organized a Health Fair. She

had representatives from various organizations including Hospice, foot care, respiratory care, mental health counseling, therapeutic touch and more. While the representatives were available with information in the auditorium, Doris had mini-seminars set up throughout the day on timely topics, such as balance, memory and alternative medicine. She diligently worked to have lunch donated for the representatives and door prizes donated for the membership. A solid 1/3 of the membership took part in the Fair and was very appreciative and complementary.

Another example of her commitment is her strong desire to be a part of our "culture change" team. Doris always has great ideas to ensure the highest quality of life for members at each point in the continuum.

Personally, Doris is the consummate professional. At the same time, she embodies southern hospitality and friendliness. Those two traits help to make Doris a confidant to the membership. She shows great compassion to those she serves and ensures that all their needs are met.

Doris is now a contemporary of many of the members of Vicar's Landing, but shows no signs of slowing down. When asked about retirement, she says, "Ya'll will probably have to pick me up off the sidewalk before I retire."

D. Bruce Jones, NHA, Director of Health Services
Vicar's Landing, 1003 York Road
Ponte Vedra Beach, FL 32082

Skilled Nursing Report

Progress on restraint reduction

The use of physical restraints in nursing homes declined nearly 40% nationally in recent years as the federal government, states and nursing home providers placed greater emphasis on eliminating what once was a common practice.

California was reported to be at a 13.4 percent average in 2006. Current 2008 data on the Centers for Medicare and Medicaid Services nursing home compare website shows California to be at an 11 percent average so far this year.

In the past, restraints were seen as something that kept a person safe. It was thought that by restraining the frail, elderly person, they wouldn't fall or be injured. This belief is still held by some caregivers and family members. However, research has shown that restraints not only do not necessarily prevent falls, but that injuries from falls are much more prevalent when a person is restrained.

Nursing homes, QIOs, and enforcement agencies have pooled their resources through a program called Advancing Excellence in America's Nursing Homes. The goal of the organization is to reduce by 30,000, nationwide, the number of nursing home residents who are physically restrained.

The timeline for reaching the goal is September. Technology, greater anticipation of patients' needs, increase activities and strength training are some of the methods that can be used to reach this goal.

The Skilled Nursing Report for agenda is prepared by Lori Costa, regulatory and clinical consultant for Aging Services of California. She can be reached at Aging Services at 916-932-1277 or lcosta@aging.org. Reprinted with permission of Aging Services of Calif.



Doctors Use Wii Games for Rehab Therapy

by Lindsey Tanner,
Chicago Associated Press Medical Writer

Some call it "Wiihabilitation." Nintendo's Wii video game system, whose popularity already extends beyond the teen gaming set, is fast becoming a craze in rehab therapy for patients recovering from strokes, fractures, surgery and even combat injuries.

"The usual stretching and lifting exercises that help the sick or injured regain strength can be painful, repetitive and downright boring. Using the game console's unique, motion-sensitive controller, Wii games require body movements similar to traditional therapy exercises. But patients become so engrossed mentally they're almost oblivious to the rigor," said Osborn, Southern Illinois Healthcare.

"In the Wii system, because of the game format, it does create this kind of inner competitiveness. Even though you may be bowling or playing tennis against some figure on the screen, it's amazing how many patients want to beat their opponent, and when people can refocus their attention from the tediousness of the physical task, often times they do much better."

Nintendo Co. doesn't market Wii's potential use in physical therapy, but company representative Anka Dolecki said, "We are happy to see that people are finding added benefit in rehabilitation."

The Hines Veterans Affairs Hospital west of Chicago recently bought a Wii system for its spinal cord injury unit. PFC Matthew Turpen, 22, paralyzed from the chest down in a car accident last year while stationed in Germany, plays Wii golf and bowling from his wheelchair at Hines. "A lot of guys don't have full finger function so it definitely helps being able to work on using your fingers more and figuring out different ways to use your hands and arms," Turpen said.

At Walter Reed Army Medical Center, the therapy is well-suited to patients injured during combat in Iraq. "They think it's for entertainment, but we know it's for therapy," said Lt. Col. Stephanie Daugherty, Walter Reed's chief of occupational therapy. Come sample the Wii at JKV for entertainment and to exercise your fine motor skills. Refer to Village Weekly for dates and times.

*Reprinted with permission from Editor,
John Knox Village Life, Orange City, FL April/May, 2008*

News from Tennessee

While Tennessee does not have a state residents association, working with the Tennessee Association of Homes and Services for the Aging, through attendance at its recent annual conference in Nashville, is giving some impetus for some of our newest NaCCRA members to explore more ways for residents at CCRCs across the state to dialogue. Doug Pace who now serves AAHSA as a Vice President, previously for five years was the TNAHSA executive and his support of these efforts is much appreciated.

Keynote Speaker for the August 2008 event in Nashville was Larry Minnix, the AAHSA President and CEO. He included in his remarks the need to involve residents in these meetings and challenged each participant to bring a resident, a resident's family member or friend to next year's conference. He especially welcomed by name Marleen Varner, NaCCRA Vice President, and John Morris, newest TN NaCCRA member and Resident Association President-elect at Richland Place in Nashville. The program also included a panel of residents who gave discerning and sometimes humorous insight into what residents want.

Melissa Sharp, AAHSA's SouthEast representative, gave a splendid presentation of AAHSA's Long Term Care Initiative. The Minnix article on this topic appears elsewhere in this issue of *Life Line*, and describes the reasonable and actuarially sound solution to this financial burden through a national insurance trust accessible to all adults.

Of special interest to the over 200 attendees was the announcement of the state's first Eden Alternative facility which will be added at Uplands Retirement Village in Pleasant Hill, TN. Uplands also has an excellent piece entitled *Where Do I Start: Things to think about when researching retirement communities*, which represents resident's Sharron Eckert's work in collaboration with Uplands director of marketing and public relations. It is thorough and worthy of consideration by all prospective CCRC prospects, as well as CCRC managers.

Attendees also had a wonderful introduction to one of the real treats of the upcoming AAHSA Conference in Philadelphia, recording artist Jana Stanfield who had everyone in stitches in her short presentation.

Special thanks to Carrie Ermshar, TNAHSA Executive, for her very cordial welcome to the CCRC resident contingent at this meeting and for special registration rate consideration she extended. We look for more participation of residents in future conferences and regional meetings.

*Marleen Varner,
Vice President*



15 Very Good Reasons for Becoming a Member of NaCCRA

1. NaCCRA is the only national organization dedicated to residents of Life Care Retirement Communities.
2. NaCCRA played a major role in defeating the federal tax on imputed interest, thus preventing major cost increases for CCRC residents.
3. NaCCRA played a major role in delaying implementation of therapy caps which would have increased costs for many residents.
4. NaCCRA is the only national organization that actively and exclusively promotes the CCRC industry.
5. NaCCRA is the only national organization that promotes including residents as equal *voting* members on CCRC Boards of Directors.
6. NaCCRA is the only national organization that provides a forum for residents to exchange ideas on best practices.
7. The American Association of Homes and Services for the Aging (AAHSA) views NaCCRA as a strong voice for residents and has a NaCCRA member serving in its House of Delegates, its policy making arm. A NaCCRA member also serves on the AAHSA Quality First Task Force.
8. NaCCRA is an advocate for excellence in Nursing Homes and Assisted Living Care.
9. NaCCRA is taking a lead role with AAHSA in developing and promoting a Residents' Bill of Rights.
10. NaCCRA actively supports AAHSA's efforts to prevent the reduction of Medicare / Medicaid payments for the elderly.
11. NaCCRA facilitates dialogue with management, serving as the residents' watchdog and the industry's friend.
12. NaCCRA has been successful in securing 55% of CCRCs having residents on Boards of Directors.
13. NaCCRA currently has four standing committees to facilitate widest possible membership participation: legislative; social action; public relations and publicity; and membership recruitment.
14. NaCCRA holds its annual meetings concurrently with AAHSA, thus providing opportunities for attendees to participate in a large number of activities, learning opportunities and idea exchanges. Next meetings are in Philadelphia 10/12-15/08 & Chicago 11/8-11/09.
15. Through its regular publication of NaCCRA *Life Line*, NaCCRA provides members with opportunities for idea exchanges on best practices and new initiatives, such as the nonsmoking efforts in NC.



Now You'll Agree...

...English is a Very Difficult Language!!

See if you can read these correctly the very first time.

- The bandage was wound around the wound.
- The farm was used to produce produce.
- The dump was so full that it had to refuse more refuse.
- We must polish the Polish furniture.
- He could lead if he would get the lead out.
- The soldier decided to desert his dessert in the desert.
- Since there is no time like the present, he thought it was time to present the present.
- When shot at, the dove dove into the bushes.
- I did not object to the object.
- The insurance was invalid for the invalid.
- There was a row among the oarsmen about how to row.
- They were too close to the door to close it.
- The buck does funny things when the does are present.
- A seamstress and a sewer fell down into a sewer line.
- To help with planting, the farmer taught his sow to sow.
- The wind was too strong to wind the sail.
- Upon seeing a tear in the painting, I shed a tear.
- I had to subject the subject to a series of tests.
- How can I intimate this to my most intimate friend?

~ copied from an email ~

Aging Americans Unsure They can Afford to Retire

A third of Americans 50 and over are not confident they will have enough money to retire, and more than two-thirds expect to keep working well into old age, according to a survey published in March. The report, commissioned by retirement services firm SecurePath by Transamerica, suggests the surge in companies offering defined-contribution 401 (k) plans has not displaced Social Security as the ultimate safety net for retirees. Sixty-one percent said the program would provide them with their main source of income in retirement.

Encouragingly, 65 percent of respondents *said* they feel in control of their life in retirement, and seven in 10 said they were well-equipped to handle the *uncertainties* associated with big life transitions like leaving the workforce. Yet this confidence comes at a cost. "Seven in 10 workers aged 50 and older have already faced a period of financial difficulty that shook their confidence and created stress," the study found. (*excerpted from Reuters, 3-12-08*)

Reprinted with permission of Aging Services of California.





New Members since July 08 Life Line... Welcome!

California

Paradise Valley Estates
Arthur L. Child

Connecticut

Edgehill
Susan Miller
Norman L. Wholley

Florida

The Estates at Carpenters
Bill and Gerry Fraker
Oak Hammock
Edward C. Hutchinson

Louisiana

No Community -
New Orleans
Frank H. Walk

Maine

No Community -
Kermebunkport
Richard Dubrowski
Ed Keough
Doug Leonard
Michael Severance
Lawrence Soule, Jr.
Nancy Spooner
Piper Shores
Mary Davis
Jane Nelson
Edwin J. Pingree

Maryland

Collington
Agnes G. Hatfield
Maplewood Park Place
Gerry Bass

Massachusetts

No community
Charles J. O'Brien

North Carolina

Belle Meade
Robert K. Wyatt

Tennessee

Alexian Brothers
Virginia Vollmer
Richland Place
John W. Morris
Shannondale
Ellen Brahams
Boydson Baird
Grace Goertz
Cecelia Felknor
Ethel Kintner
Lillian Lyle
Ellie Morrow
Bobilee Proffitt
Juanita Morton
Jean Rokes
Jean Smith

Washington DC

No community
Bruce Rosenthal
Thomas House
Mary A. Barnett
Esther W. Jubilee
Doris A. Rich
Ingleside at Rock Creek
Sinclair Winton (Life)
Charles Rozier
Jackie M. Smith

Wisconsin

No community
Duane W. Thorseen

The last *Life Line* had
Dixie Lee Fadey as a new
member from Ingleside at
Rock Creek...
...it should have been
Dixie Lee Falvey.
Mrs. Falvey, please accept
our sincere apology.

***This is a great addition to our membership.
Join me in extending a warm welcome to all.
Together we can do great things.***

Did You Know...

A hummingbird's egg is smaller than a Tic-Tac.
Isn't nature marvelous?

~ from an email ~

Sleep Needs May Decline With Age

THURSDAY, July 24, 2008 (HealthDay News) -- The reason healthy adults sleep less in their 60s than they did in their 20s might simply be because people need less sleep as they age, new research suggests.

If true, the observation could mean that what many elderly people interpret as insomnia could be a completely normal reflection of an age-related shift in their internal clock.

"Older people may simply need less sleep than younger people," said study author Dr. Elizabeth Klerman, an assistant professor of medicine in the division of sleep medicine at Brigham and Women's Hospital in Boston. "It could turn out to be that they have more trouble falling asleep. But it could also, in fact, be that they get what they need in less time. We just don't know the reason yet."

Klerman and her colleague Dr. Derk-Jan Dijk, of the University of Surrey in the United Kingdom, reported the findings in the July 24 online issue of *Current Biology* and were expected to be published in the Aug. 5 print edition of the journal.

To gauge the relationship between sleep and age, the researchers compared sleep behavior between a group of 35 men and women between the ages of 18 and 32 with that of 18 men and women between the ages of 60 and 72.

All the participants were healthy and had no prior sleep disturbance issues. All were required to remain in bed for 16 hours a day -- 12 hours at night, and four during the day -- for three to seven days.

The younger group ended up sleeping more during the study than during their normal routine.

That said, the older group was found to sleep 1.5 hours less per day on average than the younger group: nearly 7.5 hours versus nearly 9 hours. The authors noted that the sleep dip among the elderly was equally split between time spent dreaming (called REM sleep) and non-REM sleep.

"The older patients did take longer to fall asleep than younger people," she noted. "And it could also be the case that they have an unrecognized sleep disorder interfering with their restful sleep at night. But we just can't tell yet whether it's a question of inability to sleep or capacity to sleep."

Yet, even as Klerman and her colleagues continue their efforts to unravel the mystery, Dr. Gregg Jacobs, a sleep specialist with the Sleep Disorders Center at University of Massachusetts Memorial Medical Center, is already describing the study as "the best I've seen to date on the physiology of older people's sleep."

"This study addresses a real need, because most of the research on sleep debt is focused on college students, but most people with sleep issues are middle-aged and older adults," he observed. "And, in terms of older people, this study seems to indicate that our drive for sleep goes down as we age."

"Part of it is that older people don't expend as much energy as younger adults," Jacobs said. "And also, older

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Elderhostel Joins AAHSA

Elderhostel has joined AAHSA and to celebrate its membership, Elderhostel is sponsoring a program exclusively for AAHSA members "Live from Mount Rushmore: The Wisdom of Our Fathers". Featured is a webcast seminar on October 23-24. To reserve a front row seat for your community, visit elderhostel.org for more information.

Since this is available only to AAHSA members, perhaps in some cases the management would have to make the request, but no doubt many Resident Councils enjoy a good working relationship with management and would find this an informative offering.

*Information courtesy of
AAHSA future Age, July/August 2008*

(continued from front page)

President's Message

at Carpenters, my home, is a great supporter of NaCCRA and he has been my advisor and encourager these past four years. I know that I have overlooked some individuals but space just won't permit any more. My sincere thanks to all.

The cornerstone of the NaCCRA board is and has been Secretary Anne Winslow, MA. She has boundless energy, a great sense of humor and strong desire to serve the residents of MA as well as NaCCRA. Bob Anderson was an outstanding Treasurer who served NaCCRA well until he had to move into the health center in his community. John Olson from FL replaced Bob and continued the excellent service of Treasurer until his death. Bob Gault of FL replaced John and he is an excellent custodian of NaCCRA funds. Marleen Varner, VP from TN is a good ambassador for NaCCRA. She is willing to travel, an excellent speaker and totally supports the CCRC life style. George High of VA is our newest VP and a quality addition to our board. Last, but by no means least, is John T. (Jack) Mathison, President Elect scheduled to take office October 12, 2008. Jack is my right arm and he has provided wise counsel and steadfast support. I know he will be a great president and take NaCCRA to the next level.

As Past President, I pledge my total support and loyalty to Jack and the NaCCRA board. I think it is fitting that the residents elected one of the VP's to serve as president and I know that either Marleen or George will be an excellent president when Jack steps down.

I urge as many residents as possible to attend the AAHSA meeting in Philadelphia October 12-15, 2008. The NaCCRA meeting will follow the Resident/Consumer Luncheon on October 12, 2008. Be there and show your support for Jack as he starts his new adventure as your President

Charles D Paulk

A Community of Widows

It's a fair bet that in any retirement community there are many more women residents than men. Sad but true. We survivors are mainly a community of widows.

To get to be a survivor, most of us have had our share of romance, marriage, career, and the raising of children. Okay, been there, done that, now what? What do you do when there is leftover life to live? Where once the core was perhaps a husband and children, friendships were important but not the primary bond. Now friendships take center stage, and the friends we make are usually with other women. These bonds have become central.

We all know there are other ways to live without marrying or raising a family. But most of us born in the first half of the last century followed a track laid down by the culture we were raised in, going from the parental roof to marriage, always living in tandem with another. We are well versed in accommodation.

Then came widowhood. Perhaps for the first time in our lives we are on our own, responsible to no one but ourselves. No more accommodating. We can eat, go, do, spend, just as we please. It's a new life, a different life, a phase of our journey that like any adolescent facing life ahead, we may be unprepared for. There is a lot to be learned. Money stuff for instance, and food shopping for one person, and taking over chores and responsibilities once shared.

We learn pretty quickly how to maneuver our solitary self around the rocks. In time many of us in the community of widows may find that there is a lot to be said for living alone. There's a kind of freedom, not to be had when living with a spouse. Some I suppose would say, you can take that freedom and shove it. But it's out there and available nonetheless for those that can learn to enjoy it. Freedom, aloneness, and friends. That's the new life, and life is change as well we know.

Jan Slepian

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Editor of Community Chronicle – Aug, 2008*

(continued from front page)

Sleep Needs May Decline With Age

people tend to nap more and tend to spread their sleep out more over the course of a 24-hour period. So, maybe they just don't need as much sleep at night."

"So, the idea that we need eight hours of sleep at night may be more relevant to younger people," he added. "And if so, we shouldn't automatically be telling older people to take sleeping pills or seek medical attention if they're sleeping less than eight hours. Because getting less may be the natural consequence of aging."

For details on sleep and the aging, visit the U.S. National Institute on Aging – *Article received in e-mail.*

Charles D. Paulk, President
National Continuing Care Residents Association
1001 Carpenters Way, C117
Lakeland, FL 33809

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NaCCRA Membership Application

Date _____

Name of Individual: 1st Person _____
2nd Person _____

Address: _____

Telephone _____ E-mail _____

Name of Community Resident's Association _____

Annual Dues Per State Association **\$400.00**
Annual Dues Per Community Association **\$150.00**
LIFETIME MEMBERSHIP **\$ 150.00**
ANNUAL DUES PER (EACH) INDIVIDUAL..... **\$ 15.00**
Total Enclosed.....**\$** _____

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