Western Pennsylvania





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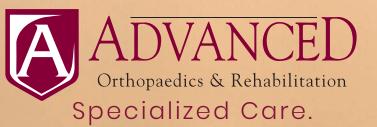
St. Clair Health Introduces New Walgreens Specialty Pharmacy and new GI Lab at Dunlap Family Outpatient Center See pages 8-9



Memory Loss and Aging Alzheimer's/Dementia

INSIDE: Living With A Disability

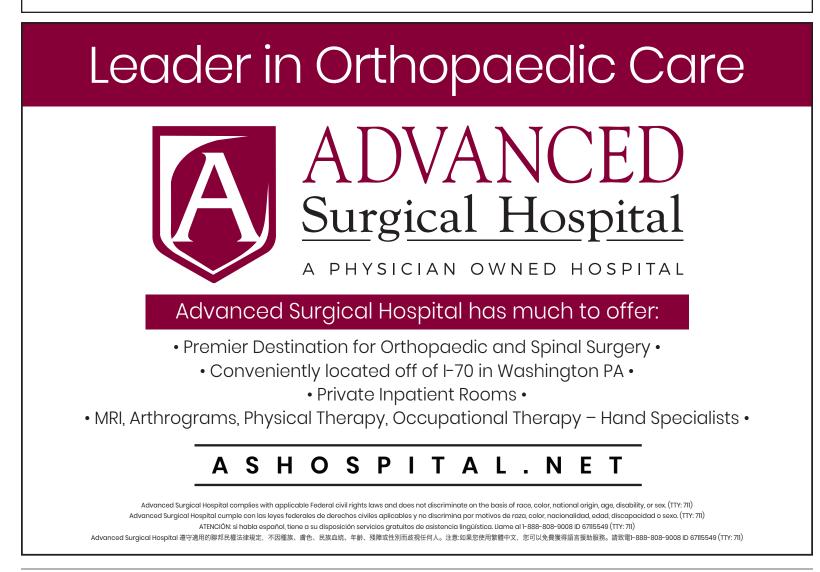
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PUBLISHER'S NOTE: With The Response of COVID-19 as a Blueprint, Why Can't We Tackle Drug Abuse Next?

You'll forgive me if this publisher's note has a decidedly personal side to it.

I have a niece who grew up in what most would call a nice, even affluent, neighborhood. There she attended a high school known for the quality of its academics, its facilities, and its ability to prepare its students for life.

Unfortunately, for my niece, that institution also was the place she was first introduced to drugs, specifically, heroin.

I'm not naming the school because, sadly, this situation is not unique to it; rather, it's an all-toocommon story played out potentially in every high school in America, whether rural, urban, suburban, affluent, or poor.

And it has reached pandemic proportions.

I chose the word pandemic intentionally. As I sit here thinking about the devastation heroin has wrought on the literally millions of individuals negatively impacted by addiction, I can't help but also think about the COVID-19 pandemic and massive, seemingly nonstop attention it has gotten from politicians, the medical community

and, of course, the media.

To be sure, I understand the seriousness of the COVID-19 pandemic. It's frightening to think how quickly it appeared on the scene and how quickly it took so many lives. But, as politicians often like to say, we are capable of "walking and chewing gum at the same time." So, I simply cannot understand the lack of media attention, school programming and government policy focus on the opioid crisis that is decimating our younger generation.

I've learned much just by talking to my niece. She shared with me that she would never have tried heroin in a million years if she had known anything about the drug.

I know. I can almost feel many of you rolling your eyes in disbelief. But I believe her, just as I believe so many alcoholics who took their first drink at an early age or those now suffering with cancer, breathing issues or physical infirmities because years ago someone offered them that first cigarette.

My niece can only speak to what she knows. Growing up in an affluent area, she said heroin was never discussed. Early on, she didn't see

firsthand the impact it could have on people. (Unfortunately, she now knows several young people, some of whom were her friends or classmates, who have passed away from a drug overdose.)

She also said she absolutely believes if schools placed more of an emphasis on educating students on the dangers of heroin and ALL drugs, it would make a big difference. (Here's where I'll get a little political: I'd rather see schools introduce curricula on this topic than some of the ideas they've introduced recently.)

Parents and grandparents should be most especially concerned about this. But in truth it should worry everyone who cares about our society. Drug abuse is an "equal opportunity destroyer". It destroys lives and devastates families across socioeconomic lines. No doubt every family in America has been negatively impacted by our drug problem.

My niece seems to be one of the lucky ones: her recovery appears to be working. She credits believing in something greater than yourself and, for her, that meant faith in God. Her family, especially her



mother, never gave up on her and helped instill in her the desire for a better life.

If the COVID pandemic has taught us anything it's that America is uniquely positioned and uniquely blessed to respond to seemingly insurmountable challenges - when motivated to do so.

So, my question is: when will we see the drug crisis for what it is: an insidious poison claiming too many of our young people and rotting away the foundation of our future society.

Could we possibly convince tech giants to use their platforms to educate our young on the dangers of drugs? Maybe CNN, Fox, ABC, NBC, and CBS can place more of an emphasis on the opioid epidemic and -on a more positive notefocus on medical, government and community efforts and successes toward eradicating this disease. I don't have all the answers. But my niece has provided me with lots of questions.

Questions we'd better answer before it's too late - next time it may be your child or grandchild.

Nancy Lammie, Publisher



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Addiction & Rehabilitation

Substance Abuse from a Religious Perspective

By Fr. Michael W. Decewicz

"My God, my God, why have you forsaken me, far from my prayers, from the words of my cry? O my God, I cry out by day and you answer not by night, and there is no relief for me."

These sentiments expressed in Psalm 22:1-3 have been on the lips and in the hearts of everyone who has or is suffering from a substance abuse disorder.

"My God, my God, why have you forsaken me," spoken by Jesus on the cross, expresses the anguish of addiction.

We have come to realize that a substance abuse disorder is a disease; a progressive, fatal disease that can be treated but not cured. However, even though intellectually we believe this, we still emotionally treat the sufferer as culpable for the disease. We still apply a moral judgment to the addict/alcoholic, which only nurtures and nourishes that sense of shame and inhibits the sufferer from seeking treatment because they are locked in a moral abyss of self-loathing. All of this diminishes a person's sense of selfworth that can lead to despair. This is the tragedy of moralizing substance abuse disorders.

Knowing that addiction is a dis-



nurtures and nourishes that sense of shame and inhibits the sufferer from seeking treatment because they are locked in a moral abyss of self-loathing. "

-Fr. Michael W. Decewicz

ease and is and can be treated on physical, mental, and emotional dimensions, it is imperative to understand that a substance abuse disorder is also a spiritual disease. The spiritual aspect of addiction must be treated to lead to remis-

I believe it is the obligation of religion, spirituality, and faith to combat the demon of shame that only speaks words of hate and death to the sufferer. It is faith's job to exorcise the demon of shame so that the sufferer can live and love.

Our job as people of faith is to be an ambassador of love, not an arbiter of judgment. We are commissioned to carry the message of love to all God's people, especially the hurting and broken. "Our Higher Power" is the essence or origin of life and love, calling us always to participate in the wonder and mystery of God's abundant, extravagant, and unconditional love.

So to answer the theme posed for this article, "Substance Abuse from a Religious Perspective," I would say that the cry, "My God, my God, why have you forsaken me?" is the universal prayer that comes from the very depths of the one who suffers from a substance abuse disorder and this prayer of anguish leads the sufferer who embraces recovery to also say from the depths of his or her being, "All the ends of the earth shall remember and turn to the Lord." (Psalm 22:28)

So religion, faith, and spirituality have a responsibility to embrace the sufferers, reminding them that they are sons and daughters of God, created in the Divine Image and entitled to a life that is joyful, happy, and free.

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Fr. Michael W. Decewicz is Director of the Addiction Recovery Ministry. The

Addiction Recovery Ministry provides support throughout the area, including the Bill Dixon Memorial Hope Fund benefiting patients of Gateway Rehabilitation Center and a brown bag lunch program for Light of Life Rescue Mission.

Final 2020 Overdose Numbers Provide Picture of County Opioid Problem

I believe that shame is the mani-

Shame shackles the sufferer in

self-pity and victimhood, causing

him or her to relive the past,

destroying any sense of self-worth,

and continuing to feed into the nar-

not worthy to be loved or healed;

you are evil, worthless. Look at

what you have done in your using

life; look at the people you have

Shame tells the sufferer, "You are

cissism of the sufferer.

festation of the spiritual wound that

infects the person of the sufferer.

Continuing its coordinated approach to the opioid problem in the county, the Allegheny County Office of the Medical Examiner (ACOME) and the departments of Health and Human Services released reports related to the opioid issue, and announced additional grant funding to assist in response for residents with addictions.

sion.

Dr. Karl Williams, Chief Medical Examiner, reported that the number of deaths from accidental overdoses during 2020 has been finalized. The 2020 number of 689 overdose deaths reflects an increase of 125 deaths over the final 2019 number of 564, a 22% increase.

"The epidemic of drug overdoses continues with a steady rise toward the peak year of 2017 when the widespread availability of Narcan resulted in a significant decline," said Williams. "A particularly troubling trend is the increasing appearance of methamphetamine and newer synthetic analogues of fentanyl and the benzodiazepine group of agents."

The data from the 2020 deaths indicates that more males died of drug-related overdoses (68%) with 75% of decedents having been identified as white. Nearly 43% of cases (294 deaths) fall into one of three age groups: 35-39, 30-34, and 40-44. The ages from 25 to 54 account for 74% of the deaths with white males the largest group.

The most frequent drug in the typical mixture of agents remains fen-

tanyl, with heroin and cocaine the second and

third most common, being found in 91% of the cases. The three zip codes with the most overdose deaths in the county: 15210, 15212 and 15216. In 2020, 51% of all accidental deaths were drug deaths. Drug deaths also made up 27% of all morgue and issue cases during the year.

Further details on the overdose deaths in the county for 2020, and prior years, can be found on the OverdoseFreePA website: https://www.overdosefreepa.pitt.edu.

Those seeking support or help with issues related to Substance Use Disorder for themselves or others, can call either of these 24/7/365 resources:

PA Get Help Pathway to Care & Recovery 1-800-662-HELP (4357) (412) 325-7550

For those who prefer to seek assistance in-person, walk-in services are available 24/7/365 at **Pathway to Care & Recovery** located at 326 Third Avenue, Pittsburgh.

Overdose deaths soared to a record 93,000 last year in the midst of the COVID-19 pandemic, the U.S. government reported this July. That estimate far eclipses the high of about 72,000 drug overdose deaths reached the previous year and amounts to a 29% increase.

Addiction & Rehabilitation



COVID + Addiction

COVID-19 Has Severe Impact on Those with Substance Abuse Disorder, But Help is Available

By Nancy Kennedy

The gradual resolution of the COVID pandemic is bringing relief, gratitude and a return to near-normalcy for most Americans. But for others, the impact has been severe and progressive, worsening with time rather than improving. That group includes persons who are struggling with addiction: those who are presently addicted to drugs or alcohol, those who have recovered and those who are at risk of starting to use and becoming addicted.

The pandemic and the resulting shutdown brought a lot of challenges for this population, says Carin Fraioli, LSW, CCDPD, vice-president for clinical operations, Gateway Rehab Center. "The isolation of the pandemic was especially difficult, and led to relapse for many who turned to drugs or alcohol for comfort and escape. The anxiety about contracting COVID was perhaps higher for this group, many of whom have chronic medical conditions that already raised their risk. They could not see their physicians or their mental health providers. There was grief for those who lost loved ones to COVID 19. The closing of businesses meant job loss and reduced income for many people, creating more stress. For persons struggling with substance abuse, the loss of their usual



"The isolation of the pandemic was especially difficult, and led to relapse for many who turned to drugs or alcohol for comfort and escape."

-Carin Fraioli, LSW, CCDPD

resources was a major difficulty: treatment centers, group support meetings, and 12-step meetings were suddenly unavailable. There was nowhere to turn, even as the stress worsened. With increased stress, there is a greater risk of using in order to cope."

Fraioli says that the COVID 19 pandemic took structure away – structure that persons with substance abuse disorder rely on. For many, their support networks disappeared and are still not back to normal. Another factor is the increased income that some people saw due to the increase in unemployment checks – "With more money in their pockets, some people began using a lot more. They could afford more. The majority of those we treat are using opioids, and they are using a lot more now than a year ago. Lots of people who have been here in the past have returned. Addiction is already a very isolating disease and the pandemic increased that isolation tremendously."

Alcohol use has greatly increased, the CDC reports. Social drinking increased during the pandemic and turned into addiction for many people, Fraioli says. "PCPS tell us that alcohol consumption has skyrocketed since the pandemic."

The National Institutes for Health reports that the pandemic brought about a surge of addiction to drugs and alcohol, and an increase in addiction-related overdoses and deaths. "We have a lot of anecdotal information on this but not data, not yet," Fraioli comments. "PCPs and front line workers - EMTs, paramedics, police and ER physicians - are reporting that opioid overdose deaths are peaking again. This is a setback for Pittsburgh, a region that has been making excellent progress in reducing OD deaths since 2017. The pandemic may have set that pattern into reverse."

how to do this safely. "We also had to protect our staff," Fraioli says. "We had to be flexible and creative, constantly re-configuring as things changed. We essentially created a new model of care, using the hospital model as a guide. I've been impressed by how well our team came together, communicating and doing the best we could for our patients. "One of the positive impacts of

people the services they need, and

"One of the positive impacts of the pandemic has been the increased use of telehealth, with virtual treatment sessions. It's been great but in person is still the ideal and we expect to offer a hybrid. ZOOM is great but it's not the same as being in a roomful of supportive people. With telehealth, we now have new ways to reach people so the help we offer goes further."

At Gateway, the goal has been to keep people healthy and safe, Fraioli says: "If you are concerned for yourself or a loved one, reach out now to professionals. There is help available and we see a lot of success. Get the help you need; don't try to go it alone. Pittsburgh is fortunate in having many agencies to help. Not sure where to turn? Ask your PCP, your church, or find resources online."

As an organization, Gateway Rehab has focused on how to get To learn more, visit www.gatewayrehab.org

"With more money in their pockets, some people began using a lot more. They could afford more. The majority of those we treat are using opioids, and they are using a lot more now than a year ago."

-Carin Fraioli, LSW, CCDPD



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As the Pandemic Wanes, Our Youth Cry Out for Help Suicide, Social Media Addiction, Mental Health Issues Result of Covid Isolation and Stress

By Nick Jacobs

As we as a society examine the negative impact of the past 15-plus months, one group that needs specific attention is our young people.

A recent article in *Becker's Hospital Review* helped sound the alarm as hospitals are inundated with kids attempting suicide. As stated by Jena Hausmann, CEO of Children's Hospital Aurora, Colorado, her pediatric emergency and inpatient units are being "overrun with kids attempting suicide and suffering from other forms of major mental health illness."

If that's not a societal and cultural statement, nothing ever will be. The article went on to explain there has been an increase of 90 percent in the demand for behavioral health treatment.

The combination of isolation and stress from the COVID pandemic has contributed to this phenomenon and turned what would have been lowlevel anxiety and depression into suicide attempts. The chief medical officer of this Aurora-based Children's Hospital went on to explain that the top reason for emergency room visits over the past several weeks has been suicide attempts. He went on to explain, "The kids have run out of resilience – their tanks are empty."

One of my long-time physician friends, Dr. Scott Shannon, a pediatric psychiatrist from Colorado, says, "We need to take action. Physical inactivity, deteriorating diet, lack of adequate sleep, and fraying of family relationships are similar threats pounding our kids. This has been a long train coming.

"We tend to ignore the issues of children and women in our culture and this is an example of that and what denial and avoidance brings when a synergistic crisis arrives to stress an unprepared, poorly funded and non-func-



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tional system."

Nor is this challenge limited to Colorado.

Not long after my contact with Dr. Shannon, another close friend and pediatrician, Dr. Matt Masiello, called me from Massachusetts where he said the challenges are similarly alarming. He indicated that young patients are sometimes kept in holding situations for days at a time before they can find psychiatric beds.

I then spoke with a local administrator from Southwestern PA and was informed they are seeing a situation that is also approaching the emergency level with the primary challenge of finding appropriate facilities and professionals to help these kids.

We have all become critically aware of the challenges this pandemic has created when it comes to the lack of socialization, required home schooling, and the loss of significant activities such as dances, sporting events, and recognition and celebratory ceremonies. Besides that, if you're a teenager challenged by living with parents who are insensitive, abusive, or just stressed from attempting to deal with the pressures of working all day from home, the level of isolation experienced can be overwhelming.

Beyond these first, most obvious causes feeding this wildfire of psychiatric challenges among our young people, can we point a finger at anything else? Maybe we should look at the addictive nature of social media as another potential contributor.

To quote a friend and Ph.D. Psychologist Gregory Rys, "Media is now deliberately designed to be addictive. Especially since we have entered the age of instant feedback via phone, table, PC, internet, and cable TV.

"Marketers are deliberately using principles of neuroeconomics and learning theory to economic decision making and consumerism at a macro and micro level. Social media platforms know how to effectively utilize these principles for advertising.

"Once you have someone addicted to a device and platform you can shape their emotional state and influence their behavior. There is a newly emerging disorder that psychologists are treating. It is called Social Media Addiction, and just like other addictions, you can use the addiction to weaponize its users. And it occurs on a daily basis: to suppress facts or to invent them. And the addicts will believe what they are told as long as the drug keeps being delivered.

"The ironic thing is, most of us don't believe these principles apply to us, just other more gullible people. That is exactly where the architects of social media drugs want us."

Of course, you don't have to be a physician, a scientist, or a behavioral health professional to realize we are in a time of significant turmoil where the primary societal infrastructure has been significantly disrupted, and it is time for serious change. Otherwise, we risk losing a whole generation to the residue impacts of the COVID-19 pandemic.

If that happens, we effectively can say goodbye to any chance we have of ever returning to "normal" – whatever that is.



Nick Jacobs is a partner with SMR, LLC, a senior leadership healthcare consulting firm. He is a founder of the Academy of Integrative Health and Medicine, former board member of the American Board of

Integrative Holistic Medicine. A former hospital CEO and founder of two genetic research institutes, Jacobs maintains a website, **Healinghospitals.com**.

WIC Provides Food and Nutrition Assistance for Women

By Lois Thomson

WIC – the Pennsylvania Special Supplemental Nutrition Program for Women, Infants, and Children – is a federal assistance program that provides supplemental food and nutrition education for lowincome pregnant and post-partum women, infants, and children up to the age of 5.

One of the services provided by the program is a focus on nutrition education, and its connection to good health. According to Lisa Matt of WIC, nutritional risks are a concern because they can have a negative impact on overall health if they are not addressed. Some of the risks are health problems, medical conditions, or poor dietary intake – ones that may be preventable or controllable through lifestyle change.

The risks are determined through a collection of medical information, anthropometric measurements, hemoglobin levels, and a nutrition interview. Once they have been established, the risk criteria can guide a WIC nutritionist to work with a participant on areas that need improvement; the results can help them with healthy birth outcomes, maintaining healthy weights, preventing iron deficiency anemia, and other concerns that are identified.

Other services and benefits of the program include supplemental food packages and farmers' market nutrition program vouchers. The vouchers provide checks to WIC participants to purchase locally grown fresh fruits and vegetables at their local farmers' markets. Some participants would not be able to eat a balanced diet or meet their dietary needs without the help of the WIC food packages.

Additional services provided by the program are referrals for other services or doctors, and breastfeeding support. Fully breastfeeding mothers and infants receive the most WIC foods.

To be eligible for the program, a person must qualify in three ways: (1) Financially – participants are eligible if they have an income of 185 percent of the poverty guidelines or lower. People who receive medical assistance, SNAP benefits, or TANF are adjunctively eligible to participate in the program; (2) Residentially – applicants must live in Pennsylvania to receive WIC benefits in Pennsylvania; and (3) Medically – applicants must meet medical or nutrition risk criteria as



According to Lisa Matt of WIC, nutritional risks are a concern because they can have a negative impact on overall health if they are not addressed.

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determined by the USDA.

There is no cost to participate in the WIC program, and in Allegheny County, applicants can apply for benefits by calling to schedule an appointment; filling out an application online; or having a doctor complete and submit the application. Someone from a WIC clinic will then call to schedule an appointment.

WIC participants are generally

A number of area stores are authorized to accept WIC coupons, including Kuhn's Markets, Giant Eagle, and Shop 'n Save stores, as well as local markets. The Pennsylvania Food List and Shopping Guide found on the WIC website provides a list of items that can be purchased with the coupons, including dairy and soy products, juice, cereals, breads, and fruits and vegetables, among others.

issued benefits, which are loaded onto an EBT card, for three months at a time. Benefits are available to spend on a monthly basis, and do not carry over to the next month.

The bottom line is that WIC helps the community by building strong, healthy families.







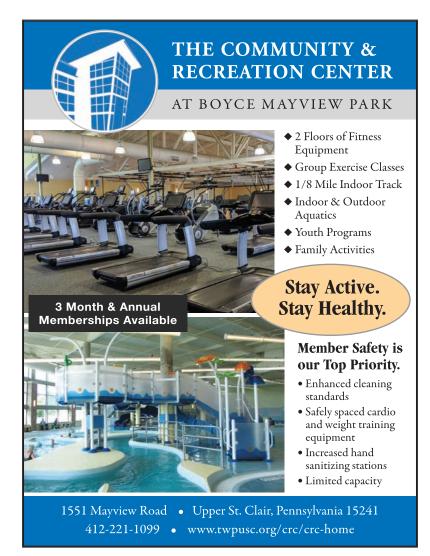
Innovation, Integration Delivering Results for First Patients in New GI Lab at St. Clair Health

By Nancy Kenne

On the sixth floor of Dunlap Family Outpatient Center, St. Clair Health's new facility, a state-ofthe-art GI Lab is easing the experience of diagnostic testing for patients undergoing colonoscopy, gastroscopy, endoscopic ultrasounds, manometry and other studies.

The Jack B. Piatt Center for Surgery and Endoscopy includes six suites where procedures are performed by St. Clair's Gastroenterologists and Colorectal Surgeons, including Mark A. Cedar, D.O., a board-certified Gastroenterologist, Chief of Gastroenterology and Director of the GI Lab at St. Clair.

Paul Shaw, 66, of Carnegie, was one of the first patients to experience a diagnostic procedure in the new GI Lab. The retired former manager of a convenience store, Shaw has been receiving treatment from Dr. Cedar for gastroesophageal reflux (GERD) and colorectal cancer screenings for the past ten years. GERD, also called acid reflux, is a common condition that can cause chest or abdominal pain, cough, trouble swallowing and heartburn-like symptoms. "Chronic GERD can advance to a condition called Barrett's esophagus, especially if the GERD has been untreated. Reflux most commonly occurs nocturnally, so the patient may not experience frequent heartburn," Dr. Cedar explains. "In a person with Barrett's esophagus, pre-cancer cells replace the lining of the lower esophagus. These cells can advance to dysplasia and eventually cancer. Typically, Barrett's produces no symptoms - the only way to make the diagnosis is with endoscopy."



Paul Shaw's Barrett's condition was initially diagnosed by Dr. Cedar in 2018 via a test called an esophagealgastroduodenoscopy, or EGD. An EGD is an outpatient procedure performed under light sedation. During an EGD, the gastroenterologist can examine the esophagus, stomach and duodenum. "Despite appropriate surveillance, Mr. Shaw's Barrett's had advanced to dysplasia, found via EGD in 2018," Dr. Cedar explains. "I treated it with a special procedure named radiofrequency ablation, or RFA, which completely eradicated the Barrett's tissue. This was confirmed by a follow-up EGD. Fifteen or so years ago, before RFA was available, a patient with Barrett's that progressed to dysplasia, particularly high grade dysplasia, would have been sent for surgery to remove the lower esophagus. This was a major surgery with significant morbidity.'

Mr. Shaw's GERD treatment included reflux medications and dietary modifications. On June 23, 2021, Dr. Cedar performed another follow-up EGD on him, along with colonoscopy and polyp removal, at the GI Lab. "No



"The GI Lab on the sixth floor is a beautiful space. It's a great improvement. One of the best features is the extraordinary privacy for patients and families; they remain in their own room, both preand post-op." Mark A. Cedar, D.O., Chief of Gastroenterology,

St. Clair Health

Barrett's tissue was seen," Shaw recalls. "I felt fine after the procedure. Dr. Cedar took good care of me and I recommend him." Shaw and his wife Mary Ellen were both favorably impressed with the Dunlap Family Outpatient Center: "Dunlap is clean, spacious and comfortable. I was nervous at first about going to an unfamiliar place, but it was easy to get around. Everything went perfectly."

Dr. Cedar is equally pleased with the new facility: "The GI Lab on the sixth floor is a beautiful space. It's a great improvement. One of the best features is the extraordinary privacy for patients and families; they remain in their own room, both pre- and post-op. This level of privacy is important because patients are likely to experience either great relief or occasionally shock when we speak to them post operatively. It can be very emotional and it's not an experience to share with strangers.

"Dunlap Family Outpatient Center is extremely well organized. I and many of the gastroenterologists and surgeons had input into that, in meetings with the architects and administration. The building is impressive looking and is attached to the hospital. This is a great benefit for the staff, to be able to quickly walk to the hospital and back."

Dr. Cedar is a Pittsburgh native who graduated from Brentwood High School and received his Bachelor of Science degree at Grove City College. He earned his medical degree from Lake Erie College of Osteopathic Medicine in 1998. Dr. Cedar is a partner in Pittsburgh Gastroenterology Associates and South Hills Endoscopy in Upper St. Clair. He lives in the South Hills with his wife, Dr. Maria Čirillo, and two children. In his spare time he enjoys golfing, skiing and fishing but most of all spending time with his family.

To learn more about Dunlap Family Outpatient Center or to schedule an appointment, visit www.stclair.org. To learn more about Dr. Cedar and Pittsburgh Gastroenterology Associates, visit www.pghgastro.com. To make an appointment, call (412)232-8014.

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Walgreens Specialty Pharmacy Provides Personal Care and Exceptional Service at St. Clair Health

By Nancy Kennedy

The transition to home is an important element of a patient's experience of hospital admission or outpatient surgery. Even when things have gone well and the outcome is favorable, a rocky discharge and transition to home can unravel the whole experience for the patient and family. At St. Clair Health, the transition to home has been simplified and enhanced through innovative approaches, including a new, patient-centered pharmacy service that is the first of its kind in the Pittsburgh region: Walgreens Specialty Pharmacy.

On the main floor of Dunlap Family Outpatient Center, St. Clair Health's beautiful new outpatient facility adjacent to the hospital, this highly specialized pharmacy recently opened, bringing new options, amenities and personalized care to patients and families. Walgreens Specialty Pharmacy is a full-service, retail pharmacy offering a range of services that make it possible for patients to experience exceptional convenience, including the ability to immediately fill prescriptions in the same building where they have just had outpatient surgery, a diagnostic procedure, or cancer treatment.

According to Robert B. Reynolds, Pharm.D., director of pharmacy services for St. Clair Health, Walgreens Specialty Pharmacy is an integral element of the Dunlap Center's emphasis on an improved patient experience. "This pharma-

cy is a collaboration between St. Clair Health and Walgreens and it offers many advantages for patients, caregivers and the community," he states. "It has been designed to improve health care in our community in several important ways: It eases the transition to home, as you no longer have to stop at a neighborhood pharmacy after having a test or procedure. You simply stop by the Walgreens pharmacy here and then continue directly home. This is important because if you don't feel well after a procedure, you may be tempted to skip the stop to fill your prescriptions. Postponing medications may lead to complications."

Postponing a prescription or failing to adhere to the prescribed medication regimen can lead not only to complications, but also to ER trips or even re-admission to the hospital. At St. Clair, Walgreens will offer a "Meds to Beds" program, which consists of bedside delivery of medications along with individualized patient or caregiver education, prior to discharge. The Meds to Beds program reduces the risk of re-admission and will be offered to both inpatients and outpatients.

Another advantage, explains Ashley Blazewick, Pharm. D., Walgreens Specialty Pharmacy manager, is a telephone follow-up program to make certain that things are going smoothly at home. "We make sure that there are no gaps between the pharmacy and home. Our specially trained pharmacists call each patient within 48 hours. We make sure they are taking their meds correctly and that they understand them."

Patient feedback about the services has been highly positive. "People love the convenience," says Reynolds. "They appreciate the chance to speak with a pharmacist and ask questions as they learn about their medications. We solve problems for them."

Walgreens provides additional services to patients through a unique program for those with rare, complex and chronic conditions. Elizabeth Bauer, MBA, Strategic Account Manager, Walgreens East, explains that Walgreens collaborates with national patient advocacy organizations, such as the PAN Foundation, to identify needs and resources. "Help is also available through Walgreens to help people solve problems with prior authorization, co-payment challenges and insurance verification. Walgreens is part of a global parent company, with exceptional access to limited distribution, hard-to-find drugs for patients," Bauer says.

"What we are doing, essentially, is making everything easier for the patient," says Reynolds. "The physicians will like this service and will be eager to have their patients use Walgreens Specialty Pharmacy because they will see that it prevents patients from falling through the cracks. What makes the collaboration successful is that Walgreens and St. Clair Health are on the same page in terms of our values. We both set the bar very high on quality, safety and patient satisfaction."

Ashley Blazewick adds: "The relationship between St. Clair and the community is outstanding. We exceed industry standards already and we will continue to grow and enhance our services and quality. We listen to



Elizabeth Bauer (left), Robert Reynolds (center), and Ashley Blazewick (right) welcome the community to Walgreens Specialty Pharmacy at Dunlap Family Outpatient Center.

our community, learn what they need and work to provide it. We welcome everyone to visit the Walgreens Specialty Pharmacy at Dunlap Family Outpatient Center, to fill prescriptions or purchase over-the-counter products. You don't need to be a patient."

> To Fa

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HEART HEALTH



Post-COVID Syndrome and Your Heart: An Expert Explains Persistent Cardiac Symptoms in COVID Survivors

By Nancy Kennedy

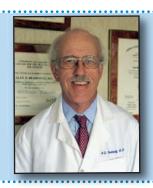
In the early months of the COVID-19 pandemic, the nation quickly learned that persons with pre-existing heart conditions were at higher risk of developing serious illness and complications. Now, with millions of Americans having had COVID, we are learning that the virus has potentially impacted the heart health of COVID survivors - not only those with preexisting cardiac conditions, but even those with healthy hearts.

According to data provided by Alan Bramowitz, MD, a board-certified cardiologist with Jefferson Cardiology Association, the majority of those who have had COVID-19 will recover and do well, but for some, there are lingering symptoms that persist long after resolution of the initial, acute infection. "This can be true even for those who had mild illness and were not hospitalized," Dr. Bramowitz says. "These persistent symptoms are sometimes referred to as 'post-

COVID syndrome.' Post COVID syndrome can affect anyone who has had the virus, even young, healthy people. Post-COVID heart symptoms may include fatigue, shortness of breath, chest pain, palpitations and tachycardia - an abnormally fast heart rate."

Although COVID -19 is a respiratory infection that directly impacts the lungs, it is now known that it can cause systemic illness and may damage other organs in addition to the lungs - particularly the heart. "COVID has been known to invade the heart muscle and create inflammation – this is called myocarditis. Myocarditis can range from minimal inflammation to severe damage. COVID may also take the form of abnormal blood clotting and blood vessel problems," Dr. Bramowitz says.

Assessment of post-CÓVID heart health may include an EKG, echocardiogram and blood work to evaluate the level of Troponin. An elevation in Troponin levels is an indication of damaged heart tissue.



If any of these tests are abnormal, a

cardiac MRI is to be considered.

Cardiac MRI is a valuable diagnos-

tic technology that provides excel-

lent, accurate images of internal

structures and helps cardiologists

manage heart failure, valve prob-

lems and other heart conditions.

"The question is, should post-

COVID patients have cardiac

imaging studies? It isn't cost-effec-

tive to get a cardiac MRI on every-

one," Dr. Bramowitz explains.

"There have been studies in which

cardiac MRI showed muscle dam-

"COVID has been known to invade the heart muscle and create inflammation - this is called myocarditis. Myocarditis can range from minimal inflammation to severe damage."

> -Alan Bramowitz, M.D., Jefferson Cardiology Association

age that was not seen on the routine tests. Even with this finding, is the muscle damage long term? Will it resolve? We simply do not have the answers yet. It's too soon to know."

Short-term follow-up on athletes with myocarditis often reveals complete recovery. Late cardiac complications have not been seen to date.

These post-COVID symptoms can also be a consequence of lung injury, or they may simply be the Continued on following page



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HEART HEALTH

Dr. David Haybron Set to Lead WHS' Cardiothoracic Surgery Program

"Proper diet, exercise and good

mental health are important for good health, and a sedentary

lifestyle has long been associated

with bad heart health,"said Dr.

Haybron, who earned his medical

degree from Ohio State Univer-

sity, did his residency at Ohio

State University and the Uni-

versity of California, and a fellow-

ship in cardiothoracic surgery at

the Cleveland Clinic. "But during

the height of the pandemic, in

many ways, people were limited in

extreme stress that the world has

lived through during the past year

and a half. Dr. Havbron said that he

believes he has seen sicker patients

recently, and thinks it is related to

people being afraid that they may

contract COVID by going to a

hospital or sitting in their doctor's

be something people are afraid of,"

he said. "Early treatment of any ill-

ness - particularly a viral illness -

"Seeking medical care shouldn't

While he understands the

what they could do."

waiting room.

By Andrew Wilson

One of the new faces at Washington Health System (WHS) is cardiothoracic surgeon David Haybron, M.D., who comes to WHS with more than 25 years of surgical experience at tristate hospitals and health systems.

"The administration at WHS has been very astute in its construction of the structural heart program here," said Dr. Haybron, who applauds this as a positive step forward for a community hospital's staff and patients. "I've witnessed a palpable enthusiasm within the operating room and intensive care unit staff for this program, and we have the opportunity to get a vigorous program going and provide a great continuity of care for our patients."

He said that further establishing this program at WHS will benefit the community greatly because patients will be able to get high quality cardiac care without having to travel far from Washington, Pa. Getting care closer to home may be increasingly important during a pandemic when so many travel restrictions were in place.



He said that further establishing this program at WHS will benefit the community greatly because patients will be able to get high quality cardiac care without having to travel far from Washington, Pa.

-David Haybron, M.D, cardiothoracic surgeon, WHS.

results in better outcomes."

For a surgeon, deciding to perform surgery should be about getting the best outcome possible for each patient that will result in the best quality of life. While not every patient is a good candidate for surgery, Dr. Haybron said that typically a patient who is referred to him has exhausted the available medical options and surgery is the only route to improved health.

He said that he has had the opportunity to "reinvent" himself several times during his surgical career. Heart surgery used to always require big incisions in the chest to repair the heart. As technology has improved, mini-incisions – also known as keyhole surgery – provided an option for certain types of surgery. Now, certain surgical procedures can be done through a catheter, a tube that is inserted into a vein or artery in the patient's groin, neck or arm and threaded through the blood vessels to the heart.

"I'm in a unique position



because I can offer both procedures," said Dr. Haybron, who lauded the fact that WHS has instituted a true collaborative approach between cardiologists and cardiothoracic surgeons. "When I am standing at the OR table with a cardiology colleague so we can determine the best course of care for a patient, that is a true collaboration."

Dr. Haybron practices what he preaches when it comes to diet, exercise, and good mental health, too. He has read some of Michael Pollan's books about nutrition and good health, and sees the value of "micro-greens" or small home gardens, farmer's markets for a source of healthy, fresh food, and in general "becoming conscious of the food chain." As for exercise and mental health?

"I'm an avid bike rider. The Montour Trail is one of my favorites," he said. "I also like to ski, snowboard, and play the guitar. Plus, if I have the opportunity to get to the ocean, I also love to get on a sailboat or go fishing."

But until he can get to the ocean, he plans to be caring for his patients at WHS.

"With a program like this, you are going to get good doctors who are intent on providing good care for our patients," he said.

> To make an appointment with **Dr. Haybron**, call (724) 225-6500 or visit whs.org for more details.

Post-COVID Syndrome and Your Heart

Continued from previous page

long term effect of serious illness. "It's not unusual to be weak and fatigued for months after any serious infection, due to deconditioning. Additionally, the fatigue and shortness of breath may due to other causes such as lung fibrosis," Dr. Bramowitz explains. "It can be difficult to know which symptoms are COVID-related and which are due to something else."

Dr. Bramowitz says that studies done in Europe, China and the U.S. have found that inflammation and scarring of heart muscle may be present on CMRI even when symptoms are absent and EKG and echo are normal. "In general, the numbers look small and clinically insignificant at this point and the long term significance is unclear. If you had COVID and are having symptoms, don't ignore them – see your primary care provider. Most people will slowly get better and will eventually have a full recovery. Inflammation tends to resolve. Studies on athletes have shown this to be the case."

More time and more research is essential, Dr. Bramowitz says. A major

study by the NHLBI was launched in June and will conclude in December. The CDC is tracking long COVID cases and the impact of COVID on heart health.

Dr. Bramowitz emphasized that it's important to recognize that post-COVID symptoms include not only physical symptoms but also psychological symptoms. "The combination of serious illness plus the social isolation and stress of the pandemic combined to produce significant emotional illness for many people. Anxiety, depression, cognitive changes and sleep disturbances are common among those who are recovering from COVID, especially for those who were hospitalized in the ICU. These symptoms should not be ignored either – if you are experiencing this, tell your PCP."

To contact Jefferson Cardiology, call **(412) 469-1500** or visit the web site, **www.jeffersoncardiology.com**.



HEARING HEALTH

Untreated Hearing Loss: You Are Losing More Than Just Your Hearing

By Megan Myers-Auria, Au.D., CCC-A

Aging is inevitable, growing up is optional, and staying cognitively sharp is mandatory. At a certain age, people begin to become bombarded with mail and fliers for hearing exams and hearing devices. But why? Why is it so important for a person to keep their ears healthy? It is not so much keeping the ears and hearing healthy, as it is keeping the brain functioning. Many people do not realize the true link between our hearing and cognitive function.

Hearing loss is the third most common health condition occurring in adults 65 and older. Age-related hearing loss, also known as presbycusis, is a gradual hearing loss affecting both ears. This change can be so gradual overtime, that many people who have hearing loss are unaware. Some of the symptoms of hearing loss may be: speech sounds may be muffled or blurred, high pitched sounds are hard to distinguish, conversations may be difficult to understand - especially in the presence of any type of background noise. Because the typical hearing loss is mostly affecting the higher frequencies - men's voices are easier to understand, women and children's voices are more difficult.

My patients are surprised when I go into detail about hearing with our brain and not our ears. They often crack a joke "so that's what's wrong with me?" or look at me so intently like they want to know more. Well, the truth is, our ability to hear comes from our ears, our ability to understand and process sounds comes from our brain.

Multiple studies have been and continue to be conducted showing a link between untreated hearing loss and cognitive decline (i.e. Dementia/Alzheimer's). Our ears are responsible for collecting the sound,





A study conducted at Johns Hopkins Institute found that people with hearing loss are more likely to develop dementia and/or cognitive deficits than those who retain their hearing as they age.

-Dr. Megan Myers-Auria, Swift Audiology

and our nerve of hearing sends the sound to our brain. The brain is responsible for processing the sound and interpreting the message. If damage occurs to the nerve of hearing, the sound is not fully processed and the message is not interpreted as intended. With hearing loss, as it worsens and remains untreated, the brain is deprived of normal auditory messages and forgets how to understand speech properly; much like when muscles atrophy when a person stops using them. A study conducted at Johns Hopkins Institute found that people with hearing loss are more likely to develop dementia and/or cognitive deficits than those who retain their hearing as they age. They also state that hearing loss can lead to dementia, and the isolation of people socially. Many researchers believe that auditory deprivation and social isolation with untreated hearing loss can put that individual more at risk for deterioration of the brain, leading to a lower cognitive function.

The relationship between hearing loss and cognitive decline is quite interesting. Many studies suggest that people 65 and older with an untreated hearing loss (example - not wearing hearing aids/amplification when needed) are more likely to develop Alzheimer's disease and dementia, and hearing loss can be associated with a faster rate of cognitive decline. Researchers have several theories as to why: one has to do with cognitive load. With untreated hearing loss, the brain gets overworked by constantly straining to understand speech and sound. An overworked brain doesn't work efficiently. Another has to do with brain structure. Brain cells can shrink from lack of stimulation, including the parts of the brain that receive and process sound. That theory can be associated with "you don't use it, you lose it". The last theory is social isolation. When a person has trouble hearing conversations and socializing, they may prefer staying home instead. However, the more isolated a person becomes, the less stimuli their brain receives.

Sergei Kochkin has stated that "When hearing loss is left unaddressed, it can significantly compound the challenges that people with Alzheimer's and their caregivers already face; but in many cases, the appropriate use of hearing aids can benefit people with Alzheimer's." The Better Institute of Health (BHI) states that there is strong evidence that hearing impairment contributes to a progression in cognitive decline in adults. Untreated hearing loss can decrease the cognitive processing in spoken language and sound. BHI also states that research has shown that the use of hearing aids has helped reduce the symptoms of depression, passivity, negativism, disorientation, anxiety, social isolation, feelings of helplessness, loss of independence and general cognitive decline in people with known cognitive deficits.

As a Doctor of Audiology, I find that a patient's loved ones typically become frustrated by hearing loss long before the actual patient acknowledges that he or she is experiencing any loss. As we age, hearing loss gradually declines, which allows many adults to ignore their hearing loss for years. If you or a loved one are noticing a decrease in memory or cognitive ability, have your hearing checked. Schedule an appointment today with Swift Audiology for a comprehensive hearing evaluation to check for hearing loss; the outcome helps more than just your hearing.



Dr. Megan Myers-Auria is Doctor of Audiology at **Swift Audiology**. The practice provides hearing loss services, hearing protection, and medical hearing aid devices to patients throughout the Pittsburgh region. For more information, visit **swiftaudiology.com** or call **(412) 274-7285**.



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Valley Brook Dental Provides Advanced Dental Implant Treatment



Dental Implants are a great way to replace missing teeth and offer a fixed solution for removable partial or complete dentures. Implants are artificial roots surgically placed into the upper or lower jaw bone that provide excellent support and stability. We place a custom restoration on top of the implant, and your final result is a crown, bridge, or denture that genuinely looks and feels natural. Dental implants are strong and durable and will last for many years with proper care. Reasons for dental implants include:

Replace one or more missing teeth without affecting adjacent teeth.
Resolve joint pain or bite problems caused by teeth shifting into miss-

ing tooth space.

- Restore a patient's confident smile.
- Restore chewing, speech, and digestion.
- Restore or enhance facial tissues.
- Support a bridge or denture, making it more secure and comfortable.

The Implant Treatment Process – Impressions, Placement and Restorations

Impressions: Valley Brook Dental uses Digital Impression Images - Xrays and impressions are taken of the jaw and teeth to determine bone, gum tissue, and spacing available for an implant. Here at Valley Brook Dental we avoid the traditional icky goop and use a high-speed intraoral scanner that delivers high-definition, full-color 2D and 3D images. These images produce an extremely accurate HD 3D digital model that is electronically sent to the lab for immediate CAD/CAM fabrication. With this technology, we can produce precise, customized implants, crowns, and bridges in less than a week. **Placement:** Next, the implant will be surgically placed into the bone and allowed to heal and integrate itself for three to six months. Dr. Joseph Gurecka utilizes some of the most advanced techniques for dental implant placement and bone regeneration to achieve lasting results while simplifying the procedure and increasing the reliability of the treatment. Sometimes a patient with a broken tooth or a fractured root can even have the tooth removed and the implant placed at the same time.

Improved extraction techniques which preserve bone at the removal site and newer implant designs make implant procedures successful, even for patients who have been unable to receive implant treatment before.

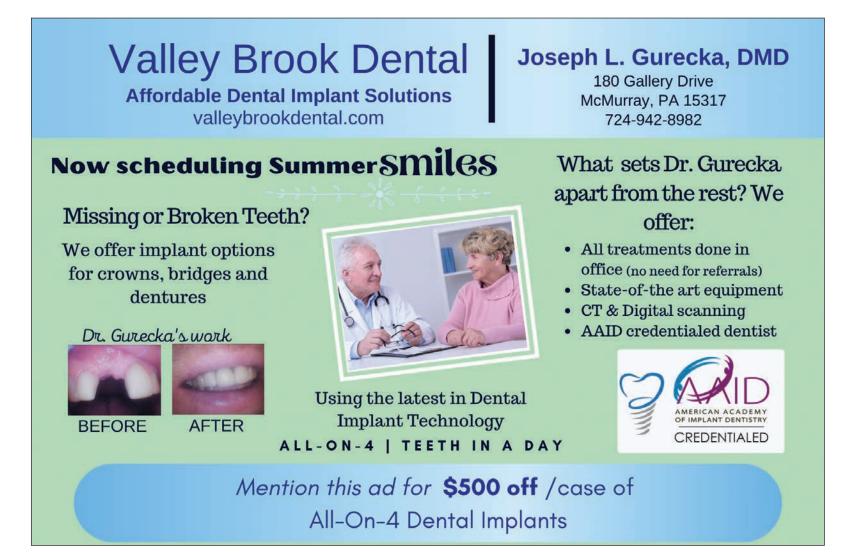
One of the most advanced techniques Dr. Gurecka offers is advanced bone grafting techniques using Platelet Rich Plasma (PRP), or Platelet Rich Fibrin (PRF). This procedure involves using a by-product of your blood, platelets, to initiate and accelerate the healing process. The treatment can be used to accelerate bone growth in the jaw where an implant can then be placed.

About PRF/PRP:

Platelet Rich Fibrin and Platelet Rich Plasma for use in extraction and implant procedures use the body's own growth factors and stem cells to provide the following benefits:

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- •Less pain reported.
- •Faster healing of surgical sites.
- •Lower incidence of dry socket after tooth extraction.
- Better healing after bone grafts and dental implants

Continued on following page



Ask The Experts

Health Enhancing Thermography

What is Thermography?

Thermography is a cutting edge technology that has been available throughout the United States for 30 years. Digital infrared thermal imaging, also known as thermography, is a non-invasive test of our bodies' physiology. In short - thermography studies how our body is functioning. Unlike standard medical imaging tools, thermography doesn't look at structure in the body i.e., lumps, breaks, etc. Instead, thermography analyzes temperature and vascular patterns that provide an early indication of dysfunction and a unique look at how your body is functioning overall. Not only does thermography provide medical analysis outside of other diagnostic tests, but it is a radiation-free, painless, and requires NO contact with the body.

The detection of dysfunction, diseases, and physical injury is achieved by displaying thermal abnormalities and patterns present in the body. The visual image that is created from a thermography screening is a thermogram. Thermograms are used to evaluate and monitor thermal abnormalities present in a number of diseases and physical injuries. All thermograms are interpreted by medical doctors (M.D.'s) and should be further evaluated by a medical professional who can then plan accordingly and lay out a program to further diagnose and monitor your health.

Thermography is a valuable procedure for alerting your doctor to changes that can indicate early stage dysfunction or disease.

Thermography screenings can be utilized for any area of the body, but has particular sensitivity to aiding in the detection of subtle physiologic changes that accompany breast pathology, whether it is, fibrocystic disease, an infection, or a vascular disease.

We invite you to visit **Health Enhancing Thermography** at our location in South Park. Call Health Enhancing Thermography at **(855) 254-4328** or visit us online at **www.heat-images.com**.

ADVANCES IN MEDICINE

MVH Introduces Proven Procedure to Minimize Prostate Cancer Complications

Monongahela Valley Hospital now offers a proven surgical procedure designed to protect the quality of life for men undergoing radiation therapy for prostate cancer. MVH uses hydrogel SpaceOAR to reduce the radiation dose delivered to the rectum which can cause bowel side effects. The hospital's physicians inject the hydrogel SpaceOAR in the space between the prostate and rectum to temporarily position the rectal wall away from the prostate. Local or general anesthesia is used for the outpatient procedure.

"Not only will the Hydrogel SpaceOAR allow us to reduce the radiation dose to the rectum and reduce side effects, but patients can now receive a shorter course of radiation therapy making treatments easier for the patient," said Mohsen Isaac, M.D., Monongahela Valley Hospital's medical director of Radiation Oncology.

Valley Brook Dental Provides Advanced Dental Implant Treatment

Continued from previous page.

Restorations: For the fabrication of dental prosthetics, artificial teeth, and orthodontic appliances we use PMMA – Poly (methyl methacrylate). This transparent glass substitute has many uses, from giant aquarium windows to intraocular lenses implanted in the eye. It is highly biocompatible, reliable, has low toxicity, and can be easy manipulated for a more natural looking restoration. Using CAD/Cam digital design technology we can create a single crown or a whole set of perfect dentures. Our restorations are fabricated using sophisticated technology with custom artistic and natural touches done by hand. This advanced technology allows for heightened control of aesthetics, easy adjustments, and minimal wear against opposing teeth. All of this means that Dr. Gurecka offers superior flexible dentures for a better, more comfortable fit.

With extensive post-graduate training and education, Dr. Gurecka combines digital accuracy with an artistic aptitude to provide highquality professional implant restorations. Our entire team stays current about the latest in dental innovations, from digital impressions, and guided implant placement to the highest quality restoration material available.

Dr. Gurecka lives in Upper St. Clair with his wife Helen and daughter Diana who attends Seton LaSalle High School where she plays Lacrosse. Helen works at PNC Financial Corporation in town. Dr. G can often be seen on the Montour Bike Trail with his yellow lab "Murphy" who loves fishing.



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Health Enhancing Thermography

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By Kayla Phillips at blog.encompasshealth.com (article adapted)

It didn't take long for Francine Johnson to catch Joe Pender's eye some 30 years ago. The pair worked in different departments of the same company when Pender asked Johnson if she wanted to join him to get fried shrimp for lunch her favorite. They hit it off and soon began dating.

In the early days of their relationship, the two would lie in the floor of Pender's apartment listening to music. "Slow Jam" by Midnight Star became the song that defined their relationship they danced to it for the first time in Pender's apartment and continued to dance to it throughout their 32 years of marriage.

"That song was our first dance. It said how we felt, and how we still feel today," Pender said. "That song was special to both of us. She'll hear it in her sleep and wake up with a smile."

After Johnson suffered a stroke that left her unable to walk or speak, Pender chose Encompass Health for his wife's rehabilitation. While there, the couple learned that rehabilitation, like dancing, works best when you choose the right partner.

Surviving a stroke

On a Tuesday morning, Johnson complained of sinus issues, but nothing severe. Pender went outside to pressure wash the driveway, and when he came inside, he found Johnson in deep prayer.

"When I walked back in the room, she was pacing and kept saying, 'Jesus help me,'" Pender said. "I told her, 'Say my name,' and she couldn't. She just kept looking at me with those eyes. I can still see those eyes right now."

Pender recognized that Johnson was having a stroke—she'd had a previous stroke many years ago and called 911. Paramedics rushed her to a local hospital, but due to COVID-19 visitor restrictions, Pender wasn't able to go inside.

"I sat in the parking lot and just boohoo cried," he said. "I talked to God and said, 'You've got to do something.""

Johnson was transferred to another hospital for further treatment. Doctors told Pender that the stroke was causing a midline shift in her brain, and she likely had only a 1 percent chance of survival. They could give her medication, but it was a waiting game, and Johnson was unlikely to survive more than 24 hours.

A day later, Johnson was still stable. The following day, doctors told Pender that the bleeding had subsided and Johnson exceeded their expectations, but she was still in critical condition and facing severe deficits.

"The doctor called me and said, 'I don't know what God you prayed to, but I'm going to start praying too, because this is truly a miracle," Pender said. "She is the woman that has prayed for everybody, except for herself. I know that she's God's angel. She didn't ask for a blessing for herself, but I did."

Choosing the right rehabilitation partner for stroke recovery

Although Johnson had beaten the odds and survived her stroke, doctors told Pender that she still faced a long, difficult road to regaining her independence that would possibly not be successful.

Pender knew that he would do what it took for his wife to have the best chance at recovery, whatever that might look like. Doctors gave Pender a list of rehabilitation providers in the area, but he was unfamiliar with the options.

"I told the doctor, 'Let me ask you a question. If it was your husband, son, daughter, mother, father, where would you send them?' She said Encompass Health," Pender said.

Pender asked other trusted friends for their thoughts, and even received a recommendation from a stranger in line at the



Walmart checkout when the topic somehow came up. It was a consensus—Johnson's best chance for recovery was at Encompass Health.

Beginning with the basics

Johnson arrived at Encompass Health unable to speak, swallow or sit up on the edge of the bed unattended as her brain continued to heal following the stroke.

"I remember going into the room and she was laying in the bed, and she was hard to rouse," said Van, therapy manager. "She was unable to speak and was moaning. I tried to use a communication board to communicate with her, but she couldn't even point to it. I knew she had significant impairments and that it was going to be a long road to recovery."

Therapists started slowly, meeting Francine where she was in her recovery.

"We started with bed mobility," said Bridget, physical therapist. "We needed to work on sitting balance and just staying upright. That big aspect affects a lot of other mobility. You have to have balance to move into the chair, to stand and to walk, so we started with the basics."

In addition to her physical impairments, Johnson was also struggling to speak and swallow. Speech-language pathologists worked with her on the basics of language, starting with vowel formation. As she progressed, they implemented singing and other familiar actions. Electrical stimulation helped her improve her ability to swallow.

Dancing together again

Throughout her rehabilitation stay, Johnson was very emotional—

a common side effect of a stroke. Fortunately, Pender was able to be by her side as visitation rules allowed one family member to be present for caregiver education.

When Johnson seemed particularly upset during therapy one day, Pender knew exactly what to do. He grabbed his phone and asked his bride to dance to their song.

Using a bodyweight support system, Van helped Johnson stand. Together, Johnson and Pender danced to their song and cried while those in the therapy gym cheered them on.

"I knew that that song would do something to her and kick start her psyche," Pender said. "I wanted her to remember my love for her. I wanted her to know that she was safe with me and that I was there."

That moment was a turning point of sorts for Johnson, who continued to make small but substantial strides in her rehabilitation.

"They saw that there were glimmers here and there, and they went after the little glimmers—the little lights—that she responded to and focused on those," Pender said. "The little things they were doing were changing her. She wanted to get better. She wanted to be my Francine again."

At the time of her discharge, Johnson still struggled to walk on her own and communicate, but the glimmers that sparked at Encompass Health continued to burn brighter. Now, Johnson is completely independent. While she cannot read as she once did and still faces some lingering effects of aphasia, she is able to communicate her wants and needs. Most importantly, she and her husband are dancing to "Slow Jam" once again.

"I can see into our future, and it's fabulous," Johnson said. "It's good. It's all good."



For more information about **Encompass Health Harmarville**, call **(877) 937-7342** or visit **www.encompasshealth.com/harmarvillerehab** For more information about **Encompass Health Sewickley**, call **(412) 749-2396** or visit **www.encompasshealth.com/sewickleyrehab**

DRINK UP! HOW TO STAY HYDRATED





by Sydney Bonds, B.S. Exercise Science

Summer is here and that means tempera-

tures will be rising and the sun will be blazing. Although there are so many fun outdoor activities to enjoy during this nice weather, the summer heat can cause some individuals to fall victim to dehydration. Consuming enough water throughout the day is extremely important and vital in our bodies functioning properly.

Why is hydration important?

Believe it or not, water makes up anywhere from 50-70% of the adult human body, 73% of the brain and heart and 83% of the lungs. These are only a few of the many organs that are mainly made up of water in the body and depend on it to operate efficiently. We naturally lose water throughout the day and we lose even more when we sweat. Sweating or perspiration allows the body to control body temperature and is increased during exercise or in hot, humid environments. Due to the increased water loss that may occur during hot, summer months, it is especially important to keep yourself hydrated to avoid dehydration. Dehydration can result in lightheadedness or dizziness, fatigue, headaches, muscle weakness and possible fainting. Not only does consuming water help us avoid dehydration, but it also lubricates and cushions shock on your joints, flushes out waste, as well as transports oxygen and other nutrients throughout the body.

How much water should I be drinking?

The total amount of water that an individual should consume daily varies based on age, gender and physical activity level. According to the U.S. National Academies of Engineering Sciences, and Medicine, males should consume 3.7 liters of fluids and women should consume 2.7 liters of fluids per day. However, being in a hot environment, exercising, being pregnant or breastfeeding as well as any other health conditions may cause a need for more than that. This may seem like a lot, however, this number includes all sources of fluids throughout the day which can come from the foods we eat in addition to beverages.

Tips for staying hydrated!

Consuming an adequate amount of water during the day may be easier than you think! A popular strategy for beginners trying to increase their water intake is the "8 glasses a day" rule. This goal is very reasonable and a great place to start. Setting a specific goal and tracking it throughout the day can be a great way to stay motivated. Aqualert, Hydrocoach and Daily Water Track Reminder are free apps that you can

use to monitor your water intake. Another way to stay hydrated is to consume hydrating foods along with fluids. Water rich foods can make up about 20% of your daily intake. According to the USDA National Nutrient Database for Standard Reference, some foods that contain 80-99% water include spinach, watermelon, strawberries, celery, cooked squash, pickles or cucumbers, oranges and cooked broccoli. Adding these hydrating foods to your meals or snacks can be an easy way to beat the summer heat. Lastly, finding a reusable bottle that you like and will actually use can be a game changer. A stainless, steel bottle to keep your drink hot or cold or a bottle with a built-in straw are very popular.

> Sydney Bonds is a fitness intern at Community & Recreation Center at Boyce Mayview Park who is finish-

ing her degree in exercise science. For more information, visit www.twpusc.org.

https://www.mayoclinic.org/healthylifestyle/nutrition-and-healthy-eating/indepth/water/art-20044256

https://www.usgs.gov/special-topic/water-science-school/science/water-you-water-andhuman-body?qt-science_center_objects=0#qtscience_center_objects

Barry M Popkin, Kristen E D'Anci, Irwin H Rosenberg, Water, hydration, and health, Nutrition Reviews, Volume 68, Issue 8, 1 August 2010, Pages 439–458, https://doi.org/10.1111/ j.1753-4887.2010.00304.x

Rehabilitation, **like dancing**, works best when you choose the right partner.

After his wife suffered a stroke, Joe knew she needed the right rehabilitation to dance again. That's why he did the research and chose Encompass Health, where an experienced team used personalized therapy and advanced technology to help Francine return to the life she loved.





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Are You Getting the Calcium You Need?

By Lois Thomson

If you believe that taking calcium supplements is all you need to promote good bone health, you might want to talk with Jackson O'Connell. O'Connell is the supplements buyer for the East End Food Co-op, purchasing such products as vitamins, minerals, nutritional oils, probiotics, herbal supplements, protein powders.

Regarding calcium, he said that for the past 50 years it has been highlighted as the main source for promoting bone health, and added, "It has been marketed in many different ways, but the form that is calcium carbonate is really cheap and poorly absorbed." Absorption is important or the supplement won't provide much benefit.

To augment the calcium, O'Connell emphasized the value of good drinking water, which is not the kind that comes out of a faucet. "You want to make sure you have good drinking water, along with the hydration minerals – magnesium, potassium, chloride, sodium, lithium, boron – that make the water wetter or serve more purpose." He explained that "wetter water" is vital, because the wetter it is, the more quickly cellular hydration will happen. That is significant, as larger minerals in the system will then be more easily transported throughout. "Calcium can be broken down by magnesium and potassium, which is good because deposits of calcium in the wrong places can turn into kidney stones, gall stones."

He further explained that when people consume large amounts of soda, phosphoric acid can build and create imbalances, so that, "the body is mining calcium from wherever it can get it – which means if it has to, it will take it from the bones to get the balance right in the stomach."

The importance of calcium can therefore not be overstated, and O'Connell said his preference is to get it from diet – dark greens, legumes, the nut family, organ meats, and vegetables – and then prioritize vitamin D and vitamin K through supplementation. "Those help with the transportation of calcium, to get it from the digestive tract absorbed and distributed to bone tissue."

O'Connell said, therefore, "I have to be mindful of bringing in products that are either food-based or another good absorbable form of the particular vitamin or mineral. Great calcium sources in the Coop, food-wise, are most of your cheese family, sesame seeds, which would also mean tahini, sardines, kale, broccoli, salmon, liver, and most of the bean family."

He said when people come into the Co-op to discuss their diet, he can deduce if they are getting adequate calcium, and, if so, focus on vitamins D and K. "Or, if they're dehydrated they may not be getting adequate magnesium, potassium in their drinking water, and that could to be an issue for bone density as far as calcium absorption."





Jackson O'Connell has always been interested in nutrition.

He has worked at the East End Food Co-op for 10 years, but the decade prior to that he was a touring musician. "I had to figure out how to keep myself healthy while being on the road. The order in which you ate food, the time you ate food, and the quality of the food, would directly affect your health. I need my supplements and my diet to have substance for me."

East End Food Co-op is the last natural foods Co-op left in Pittsburgh from those original, back-to-nature stores. The Co-op offers all of the products of a full-service grocery store, but with a natural and local touch. For more information, visit **www.eastendfood.coop**.

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Careers In Healthcare - Travel Nurse



For Alyssa McCuistion, Neonatal Flight Nurse, Nursing is a World Class Career

By Nancy Kennedy

A nursing career offers such plentiful professional options that, for highly motivated nurses, the sky is the limit. One nurse who is flying high in her career – literally - is neonatal nurse Alyssa McCuistion, BA, RN, BSN. When she heads to her job every day, Alyssa goes, not to a hospital, but to Phoenix International Airport, where she is based as a Neonatal Flight Nurse with AirEvac Medical Transport. Alyssa is a member of an elite, superbly skilled team who stabilize and transport critically ill infants from Birth Centers and outlying hospitals to Level 3 medical centers where they receive lifesaving intensive care.

Alyssa loves her job. Every work day, she flies on a helicopter that is essentially a Level 3 NICU in the sky. Upon arrival at the referring facility, she and her partners assess and stabilize the infant, intubating to establish an airway, and providing oxygen, fluids and medications. This demands exceptionally high level skills and clinical decision-making abilities that Alyssa acquired while working right here in Pittsburgh, her hometown, in the state-of-the-art NICU at UPMC Magee Womens Hospital.

A native of Bethel Park, Alyssa first set her sights on a career in medicine, earning a degree in biology at St. Vincent College. But she reconsidered that decision following a series of international trips that opened her eyes to the pervasive suffering and harsh realities of lives in other cultures. She knew that the education she most sought was one that would be acquired through travel. Alyssa wanted to learn about other cultures, touch lives in direct ways and have the freedom to travel extensively. Nursing seemed to her to be the best path to fulfilling that dream. She enrolled in Duquesne University's Second Degree BSN Nursing Program, an intense, 16 month accelerated program for those with a bachelor's degree in another discipline. After graduation in 2016, Alyssa accepted a position in the ICU at UPMC Presby. "I wanted a solid foundation in an adult care setting before I chose a specialty," she explains. "I felt prepared after that to work almost anywhere."

She joined Traveling Nurses, a company that sends qualified nurses to places throughout the country with staffing vacancies. Traveling Nurses provide jobs as well as opportunities to experience new cities and regions. As a Traveling Nurse, Alyssa worked in Seattle and North Carolina, then returned to Pittsburgh to Magee. "Magee is a top-ranked hospital able to treat every type of high risk condition of mothers and infants," she explains. "I was on the NICU Triage team; we went to the Delivery Room to resuscitate and stabilize infants who were premature or had problems, and on transports. At Magee you get incredible experience."



That experience prepared Alyssa for her current role as a neonatal flight nurse with AirEvac in Phoenix. "I moved to Arizona and was looking for a job. I saw a Flight Nurse ad and applied. Flight nurses must have both NICU skills and flight experience, so I was qualified by my NICU and Triage experience," she says. AirEvac is a nurse-owned air ambulance service, and neonatal transporting is one of their specialties.

Alyssa describes her job as dynamic, challenging and deeply rewarding. "In Arizona, there are many freestanding birth centers; they're licensed but don't have the capacity to care for high risk infants. We often go to the native American White River Reservation, a 90 minute flight. I enjoy the action as a flight nurse. Our team of a neonatal nurse and a respiratory therapist provide a very high level of care, getting to the infant as quickly as possible. In the air, we're strapped in with the baby; the space is tight so we make certain the baby is stable before we leave. Two teams are always on – a maternal team and an infant team."

Alyssa loves the diversity in nursing. "Nurses are never bored, because we're always learning," she claims. "Nursing requires ongoing training, to learn new techniques and keep skills sharp. The possibilities for nurses are plentiful and there is a specialty for everyone."

For Alyssa McCuistion, her professional nursing license is a ticket to the world. "I'm curious about cultural differences and I love learning about various customs and beliefs. Through travel and my work, I have gained an awareness of how vulnerable so many people are, throughout the world. Because I am a nurse, I can impact the lives of others and make a difference."

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Summer 2021



Washington Health System's Medical Assistant Program Helps to Fill Local Vacancies

By Daniel Casciato

A medical assistant (MA) training program is a program designed for people to learn appropriate skills and behavior when it comes to assisting, supporting, and caring for people who have medical problems.

It is helpful for people to learn how to correctly record medical information in databases or on paper. Some of the duties involve helping a physician during a visit

by making sure supplies are in order such as gowns, gloves, instruments and trays with specimens. Another duty would be fulfilling administrative tasks such as transcribing doctors' notes into their specialties, organizing charts and records of patients whom they have seen previously so they can help find out what treatment has been completed or what problems may exist that need further action from the doctors.

"Medical assistants are vital to our physician practices," says Judy Devenney, Director of Operations at Washington Physicians Group. "They support our providers and patients across all aspects of life."

Recently, though, the MA profession has had a significant decrease in recent years and it's been difficult to fill jobs. One reason for this is the time commitment for training.

The normal training program for Medical Assistants (at an accredited commercial school) ranges from 12 to 18 months of classroom education, depending on the depth of the program. This is a Monday through Friday, 8 hour a day, commitment. The clinical portion ranges from 200 to 300 hours. The cost is typically \$24,000.

"When they graduate the starting pay rate for a medical assistant is approximately \$14-15/ hour range," says Devenney. "Many students choose to go the LPN avenue: same time commitment and cost, but higher starting wage after completion. Enrollment has decreased at these career schools over the past two years."

At Washington Health System (WHS), an MA in-training program was created to address the ongoing problem of medical assistant vacancies within the health system, specifically the Washington Physicians Group (WPG) and Family Medicine outpatient office settings.

"We looked at the feasibility of having a program sponsored by Washington Health System with a commitment of employment by the participant," says Devenney. "Our recommendation was to initially iden-tify 4 to 5 participants and then hire them into the WHS Medical Assistant Clinical Externship Program."

The program consists of online course work via Career Step and on site clinical training at the WHS medical practices. Career Step is an online training solution that provides the didactic education which can be completed in a consolidated period of time (4-6 months) online. This online program is self- paced and costs approximately \$2,400 per participant. This cost is absorbed by the employer.

"We use the WHS Simulation lab, WPG and WHS Residency sites for onsite education and clinical internship training and we require 300 clinical hours," adds Devenney. "We have teamed up with Southwest Training services. They assist us with the recruitment of applicants and provide on the job training reimbursement for successful candidates that meet SW training qualifications."

Devenney noted that they offer this program to five applicants with the hopes that at least four, if not all five, would successfully complete the program and become employed by WHS. Each successful candidate will be guaranteed a full time position after completion of the program, and will also agree to work for WHS for a commitment of 2 years.

Some of the skills and responsibilities of medical assistants include:



"The opportunity to get the required training for becoming a Medical assistant is paid for by us, we supply all the clinical internship requirement. We pay for all of the schooling costs-\$2,400.00. We pay you a wage during your schooling—\$12.00 an hour. So basically you are getting paid for going to school!"

-Judy Devenney

· Renders care as directed by the physician/extender, including administration of injections, procedures and providing treatment according to office standards

• Perform ancillary test such as but not limited to: phlebotomy, lab procedures, suture/staple removal, vision and hearing screen, pulmonary function test, assist with Pap smear processes, urinalysis, EKG set up and administration, steril-

ization techniques, hemoccult collection and processing, NST, urine catherizations and casting as applicable in the practice.

· Schedules ancillary tests and hospital admissions. Receives authorization for ancillary testing. Verifies insurance coverage.

• Orders appropriate labs based on office protocols

 Monitor and maintain clinical supplies for exam rooms and medication storage room, while ensuring they are stocked, neat, and in order at all times.

• Enters vaccine information into PA SIIS registry system.

• Manages the clinical environment with attention to safe, efficient, and timely care of patients.

• Maintains complete and accurate documentation on all patients.

· Communicates calmly and accurately with patients, physicians, students, and co-workers.

• Participates in a team approach to patient care by accepting all assigned job duties, rotating to other offices as needed, and serving as a resource to patients.

· Performs clerical and clinical duties in accordance with WPG policies and procedures.

· Monitors expiration dates of emergency kits, vaccines, medical products etc., and replaces accordingly.

• Assists in quality initiatives, closing gaps, and education patients on preventive medicine appointments and tests

According to Devenney, becoming a medical assistant is a great way to start a career in health care.

"Health care workers are in such need and demand right now," she says. "This could lead to advancement in the health care field. This gives people the opportunity to help and care for others that need help, and work in a professional office setting."

What makes the training program at WHS unique compared to similar programs is that they make it easy for the applicant to go to school and work at the same time. They also guarantee a full time position upon completion.

"The opportunity to get the required training for becoming a Medical assistant is paid for by us, we supply all the clinical internship requirement. We pay for all of the schooling costs—\$2,400.00," says Devenney. "We pay you a wage during your schooling—\$12.00 an hour. So basically you are getting paid for going to school!"

She adds that the students actually get to work in their many office sites, and have the opportunity to rotate through Primary Care Provider sites as well as specialty sites to get a better overall experience as how a medical assist works in different areas of health care.

"This is an accelerated time frame," says Devenney. "Our students complete the entire course in 5 months, compared to the 18 month commitment."



The next class will begin in September. Apply at www.whs.org/careers. Class will be posted by end of July.

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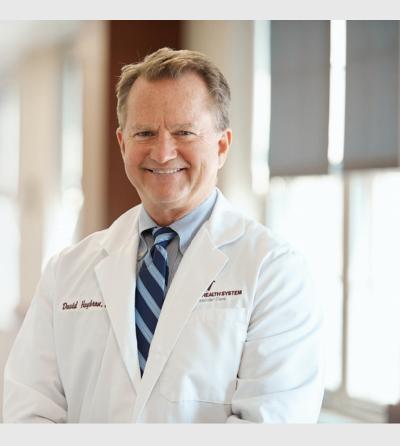
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Accepting New Patients

Dr. Haybron performs cardiothoracic care and surgery out of the Washington office location. He has worked for several major health systems, including West Penn Allegheny Health System, Reading Hospital in Reading, PA and Wheeling Hospital in Wheeling, WV.

Dr. Haybron completed a clinical associate fellowship at the Cleveland Clinic Foundation in cardiothoracic surgery. He completed residencies at Ohio State University (thoracic surgery) and the University of California (surgery) after earning his formal medical education at Ohio State University.

Dr. Haybron has shared his medical expertise and research with published articles in many different medical journals and by conducting presentations at medical conferences around the world.





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24 GUIDE TO GOOD HEALTH

Careers In Healthcare - Phlebotomist



Washington Health System's New In-House Program Trains Students to Become Phlebotomists

by Daniel Casciato

Phlebotomy technicians, or phlebotomists, are an essential position in the healthcare industry. A phlebotomist is an invaluable member of the healthcare team who draws blood from a patient's vein for the purpose of performing a medical test to diagnose an illness.

Phlebotomists are essential to the medical field, notes Kim Lonich, senior human resources partner with Washington Health System (WHS). Without phlebotomists and the expertise they provide for patients, doctors and laboratories, patient care would not be as helpful or as accurate.

It takes a skilled person who is able to draw blood quickly, efficiently, and with minimal discomfort to the patient. A phlebotomist will also sterilize and prepare lab equipment, label and ship samples, and enter patient information into electronic health records. They need to be able to create an atmosphere of trust and confidence with patients to ensure the process goes smoothly.

However, it has been a challenge for many local health systems, such as WHS, to hire and retain quality phlebotomy staff members due to a shortage of qualified candidates in the region.



(I-r) Kim Schramm, Michelle Anderson, Misty Carter-Beard

To address this shortage WHS started a paid training program in the fall of 2019 for phlebotomy, and has since trained 12 phlebotomists through three programs. The program requires 80 hours of classroom training and 80 hours of clinical training at WHS Washington Hospital and/or Washington Health System Greene.

"There weren't a lot of programs in the region producing phlebotomists," says Lonich. "We had to think outside of the box to get phlebotomists in here."

Students will learn about anatomy, medical terminology, and simple laboratory procedures, adds Kimberly Schramm, Manager of the Phlebotomy Lab. The courses they will take prepares them for a phlebotomy certification exam.

"WHS will pay for the full cost of the training program and certification exam, which is a big plus," says Schramm. "After four weeks of online coursework, you will spend two to three weeks in an externship at the hospital where you will perform lab draws."

Additionally, all of the individuals selected for the program will be hired by WHS as students and will be compensated for the time spent completing the classroom and clinical training.

"The fact that they pay for this program is amazing. I've never seen this offered anywhere else," says Misty Carter-Beard, Phlebotomy Supervisor, who got started in the field 20 years ago. "It's a great opportunity for someone who's looking to start in their first professional job. I was a single mother at a young age when I started. I needed to get an honest decent earning pay while I took care of my son. This career was a fast way for me to make a decent earning in a decent amount of time."

All students who successfully complete the training program and have demonstrated a commitment to the mission, vision and values at WHS, will then be placed in a regular position at one of the WHS facilities, as a phlebotomist.

In return, Schramm adds that they require that the applicant must commit to working at WHS for a minimum of one year post certification exam.

"The benefits of becoming a phlebotomist is that you can get your foot in the door if you want a career in the healthcare field," she says. "Also, if you like caring for people, you are also doing a great service to your community."



To learn more about the next phlebotomist scholarship program, which will begin by early fall, visit whs.org/careers.

Social Skills Coaching for Teens and Adults With Special Needs



By Wendy Halley

I worked for over twenty years in both the Special Edu-

cation and mental health fields. During this time, I learned some unfortunate realities which prompted me to open Social Skills Coaching's (SSC). First, most support services are for those who are severely challenged and not for the functionally challenged. In addition, the majority of state funded services end when the individual graduates high school. This is what struck me the most. It is at this critical transitional juncture into adulthood when support services are needed the most and yet they end.

I found myself working fulfilling tasks in unfulfilling positions. This lack of professional fulfillment motivated me to explore the social component of these two fields. I moved away from the more clinical/research/academic educational positions and gravitated toward the social/behavioral positions.

I was excited to be hired part time as the Yachad Pittsburgh Coordinator, a Special Needs division of the national Jewish organization, The Orthodox Union. This position gave me the opportunity to empower challenged young adults with the expected social skills to "fit into" the greater Pittsburgh Jewish community. I wanted to support the intellectually challenged, by helping coach the mystifying missing piece(s) to "fitting in".

This professional journey propelled me to start my own social skills practice, Social Skills Coaching by Wendy, LLC. My passion is to be a transitional service provider, providing personalized support to individuals with differences as they bravely find their way of fitting into our shared social world. I have found that for all individuals to feel like they "fit in" there are three critical areas where social skills coaching, if not acquired yet, then at this stage, is needed:

• Learning and applying the unwritten social rules which (unfortunately) society expects everyone to know and conduct oneself accordingly, • Reading and responding appropriately to others non-verbal messages, as well as awareness of one's own non-verbal messages,

• Learning to appropriately tolerate day-to-day discomforts of life.

SSC's skill Empowerment model consists of two main steps. First, giving a space for young teens and adults to be coached in a one-onone manner to learn the skills, and second, the client applies the newly learned skills with customized support out in the social world. I am happy to be a support in an area where there used to be a void.

"...because fitting in is something we all want to do."

For more information, visit **social-skills-lessons.com**.

www.guidetogoodhealth.com

Living Well With A Disability

VFI/TRPIL: Enriching People's Lives



By Lois Thomson

The message at VFI/TRPIL is, "We're opening back up!" Steve Johnson could barely contain his enthusiasm as he talked about the Transitional Paths to Independent Living (TRPIL) and Voices for Independence (VFI) organizations re-opening after the pandemic to provide more services to people with disabilities. However, his excitement is directed not just at the services offered in the past, but also at those that are to come.

Johnson, director of marketing, talked about the Phase I work that has already been done for TRPIL to transform the former YWCA Building in Washington, PA, to allow it to house services already in place at VFI headquarters in Erie; but he added that more is to be done in Phase II.

Much of that, however, is based on the success of the capital campaign that is underway. He said TRPIL currently maintains an adaptive fitness center at its old building on Beau Street, but once the renovations take place at the YWCA, everything will be moved there. Along with a fully accessible

VFI/TRPIL Washington Office

kitchen where consumers can learn how to cook independently, the building will also have a newly revamped fitness center, and its historic auditorium will be restored.

Johnson said that until that takes place, "We're trying to get creative with events we can hold to let people know that more than just your standard services are provided here; there are things to truly enrich people's lives." A golf outing will be held Sept. 13 at Lone Pine Country Club in Washington, with the proceeds benefiting the capital campaign.

TRPIL will also be holding its first annual consumer picnic Aug. 19 for anybody who is a consumer, along with their caregiver and a guest. "We have music, activities, and a picnic planned. That's going to be a good introduction to consumers and the community at large, to show them that we're a lot more than in-home health care."

TRPIL provides five core services: Information and Referral, Advocacy, Peer Support, Independent Living Skills Training, and Transition Services, but Johnson



Individuals meeting with a fitness coordinator in the Erie fitness center

noted that all centers for independent living offer those. "We want to go above and beyond to help be the difference between surviving and thriving. We want people to enjoy all aspects of life."

He said that is what's on the heart of Shona Eakin, CEO of both VFI and TRIPL. The organizations were born out of the idea that more has to be available, that they can close the gap between "I'm out of the nursing home – now what do I do," and "I'm living a great life, and here's why."

why." TRPIL's old location didn't have room to host a lot of activities, but that will change with Phase II. "Consumers receiving our services in Washington may not be used to what we have planned. When the time comes that we can introduce everything that's available – I think it's going to go over very well."





An adaptive Zumba class in Erie, a regular part of the fitness activities

One of the activities that has re-opened at the Washington facility is the internet café. Steve Johnson described it as a "computer hub," where visitors can come in and utilize the internet, familiarizing themselves with technology they may not have available at home. "There are people on staff who are familiar with computers and with assistive technology. A consumer may come in and say a goal of theirs is to use a computer at home, and we're there to meet with them and help them along the way."

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need of caring support, and adults with intellectual disabilities or autism, achieving those goals presents an array of challenges. That's where PathWays helps.

To respond to those challenges, we offer programs and resources to unlock potential, celebrate ability, defy obstacles, overcome odds and embrace the exceptional. This is our way. Each year we serve more than 1,600 children, adults and families in Allegheny, Fayette, Greene, Lawrence, Washington and Westmoreland Counties, and meet them where they are in their journeys to self-fulfillment. Our programs include:

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• Adult Training Facility – a day program that helps people with intellectual disabilities and autism contribute their talents to the community and enhance social, physical, and emotional needs, as well as provide life



skills training. This program emphasizes individualized teaching and training, so that every individual can lead a successful life and connect to their community in meaningful ways.

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• Early Intervention – a program that helps children with developmental delays reach their true potential. Highly specialized and individual therapies enhance each child's learning and growing.

• Agency With Choice – provides in home & community supports including health maintenance, decision making, home management, supported employment, and more.

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No matter what the program, we recognize potential, celebrate milestones, and exude hope for every future. For us, each person is our compass, guided by our team's recommendations on a path that leads to the ultimate destination — a life that is more fulfilled.

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Living Well With A Disability Promoting Growth and Independence -

Community Living Care, Inc.

By Kevin Brown

"You can't give care, without caring," was a familiar expression of Hayes E. Treasure, the founder of Community Living Care, Inc. (CLC). It perfectly sums up the mission and vision of CLC, a Greensburg-based provider of residential and support services to those with intellectual and developmental disabilities (I.D.D.). Mr. Treasure founded the non-profit in 1987, envisioning a long-term dedication to promoting and enabling community membership for those with I.D.D. Sadly, Mr. Treasure passed away earlier this year, but his vision and dedication to serving others lives on in CLC.

The reins of CLC are now in the hands of Sharon Roskovich, CEO, Jason McIntosh, CAO, as well as the rest of Mr. Treasure's strong administrative team.

"We provide the individual with the support necessary to establish and continually expand a lifestyle that promotes individual growth, independence, autonomy, and community integration," Jason said in describing the CLC mission. "And it's our vision, that we are a company that's passionate about the success of the people that we serve, and the development of our employees," he added.

CLC serves about 330 individuals with home-based supports, residential services, two day programs, transportation, behavior support, and medical environment support in longterm care facilities. The services are goal-oriented and tailored to each individual's needs, skills, and desires.

Home-based support includes services such as Companion, In-Home & Community Support, Family Aide and less than 24-hour Respite Care for family members caring for an individual with I.D.D. "Our home-based waiver director and our staff will meet with that family along with

the support coordinator and they will determine what services that person needs to be successful," Sharon said.

Residential services are provided by CLC

for adults who do not live with family. CLC

provides 24-hour supervision and assistance

with daily living skills, medical appointments,

relationship development, and meaningful

community experience. CLC operates 24

group homes in the Greensburg area, accord-

"We strive to provide as much as possible, a

family setting in a non-traditional family circumstance," Sharon said.

The day programs serve approximately 75

people Monday through Friday and are located

in Greensburg and New Florence. "The day

program provides services to all different levels

of support, so you can come to our programs

from your family home, from a personal care

home, or from other residential providers,"

Sharon explained. "The service is open to

everybody across the community, as long as

you meet the appropriate diagnostic require-

ment, which is that you have to have an intel-

transportation services to assist individuals in

getting to their day or employment program.

CLC operates a fleet of vehicles to provide

lectual or developmental disability."



"The day program provides services to all different levels of support, so you can come to our programs from your family home, from a personal care home, or from other residential providers."

> -Sharon Roskovich, CEO





"You can't give care, without caring," Hayes E. Treasure, founder Behavior support services are provided by CLC to support the emotional well-being of individuals as well as training and education to the support teams providing services to individuals.

Finally, CLC provides Support Medical Environment in long-

term care facilities to assist individuals with I.D.D. residing in those facilities. This service is designed to provide additional support based on need.

CLC has weathered the pandemic and its programs are becoming fully active again.

"The pandemic has affected us in so many ways," Sharon said. "Each day, throughout the pandemic, when you came into work your job duties could be different. We ask ourselves every day, 'What do we need to strategically put in place to keep people safe?""

CLC has a number of open positions. Jason stressed key qualities about CLC for attracting new employees include their family atmosphere and a generous benefits program.

"When Hayes founded this company back in 1987, he did so as a family man, and he was always a huge proponent of family," Jason said. "Family is so important and that carried over into everything he did and the way he ran this place. He always made it a priority for our benefits package to be the best in town. That's a huge thing that sets us apart from some of the other service providers. Our benefits package is phenomenal."

As a testament to that family atmosphere at CLC, Jason added that 91 of their 216 employees have been with CLC for longer than 10 years.

To learn more about **CLC's services and employment opportunities** and become part of the CLC family, visit their website at **www.communitylivingcare.com** or call directly at **(724) 836-8747.**



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28 GUIDE TO GOOD HEALTH





"He always made it a priority for our benefits package to be the best in town. That's a huge thing that sets us apart from some of the other service providers. Our benefits package is phenomenal."

Jason McIntosh, CAO





- Hayes E. Treasure, Founder 1987

COMMUNITY LIVING CARE, INC.

What is CLC's core service?

Residential supports for individuals with intellectual or developmental disabilities was the first service started by CLC founder Hayes E. Treasure in 1987. It remains at the core of CLC's services today. CLC provides 24hour care and supervision to the residents in their homes. Each home provides the opportunity for people to live independently and participate in community activities. CLC operates 24 residential homes in the Greensburg area.

What is a waiver program?

A waiver program allows individuals covered under Medicaid to receive services in a home or community-based setting rather than in a long-term care or institutionalized setting. The federal government "waives" medical assistance rules for institutional care to allow Pennsylvania to use these funds for home and community-based services (HCBS). Those covered under the waiver program must meet eligibility requirements and diagnostic criteria. CLC offers a home and community-based waiver program that enables individuals to live at home and continue to receive covered services to support their care and development.

Why is goal-setting important?

Goal-setting provides individuals with the support necessary to establish and continually expand a lifestyle that promotes individual growth, independence, autonomy, and community integration. Working with CLC support staff and a team of family members and friends, each individual participates in setting goals that take into account his or her needs, skills and desires in order to maximize life-fulfilling potential. Goal-setting is important whether the individual participates in the home- and community-based waiver program, residential services or the day program.

How do teams impact the care that CLC provides?

Teams are essential to the individual's growth and development. The team functions as a support for the individual to develop goals that will enable him or her to achieve the fullest potential. Team members include family, friends, supports coordinators and anyone the individual deems important in their life. The team members are familiar with the individual and his or her needs, skills, and desires. The team also serves as a partner with the CLC support staff to identify opportunities for the individual's growth.

What sets Community Living Care, Inc. (CLC) apart from other service providers?

CLC treats its employees like family, and offers a generous benefits program. Hayes E. Treasure stressed the importance of family when he founded CLC in 1987. That carried over into everything he did and in the way that he built CLC. Staff treat each other and their service recipients as family. One result of this is that 91 of 216 employees have been with CLC for ten years or longer.

Does CLC offer career opportunities?

Yes. CLC has many career opportunities for those interested in working for an organization that provides a valuable service in the community. CLC offers all training and education necessary to be successful in providing services to its service recipients.

For more information about career opportunities with CLC, visit their website at www.communitylivingcare.com or call the Greensburg office at (724) 836-8747.

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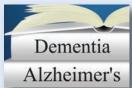
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Alzheimers... Dementia... Memor

Memory Loss and Aging

By Deborah S. Allen, MSW, CDP



What is the difference between Dementia and Alzheimer's?

Dementia is a broad term that describes illnesses or conditions that result in irreversible

brain failure/brain death. Over 80 different conditions can lead to brain failure/brain death. The most common causes of dementia include: vascular accidents (strokes), Parkinson's disease, Lewy Body dementia, Frontal temporal dementia, mixed dementias and Alzheimer's disease. Treatment of these varying conditions is not uniform, but depends upon the cause, medical conditions, and the individual.

Alzheimer's disease is the most common and well-known cause of dementia. Approximately 60% - 80% of individuals diagnosed with dementia have dementia from Alzheimer's disease.

What is the difference between normal memory loss and **Dementia-related memory loss?**

Primary differences are:

With Normal/Age-related Memory Loss, the individual:

- Is not disabled.
- · Functions well with work, activities, relationships, hobbies.
 - Makes an occasional poor decision or mistake.
 - Forgets words, but continues to hold conversations.
 - Functions independently.
 - Uses recall and describes incidents of forgetfulness.
 - Exercises normal judgment and decision-making abilities.

With Memory Loss from Dementia, the Individual:

 Has disabling declines in two or more areas, including: memory, language, judgment, abstract thinking, recall, learning and reasoning.

- Experiences disruptions in work, activities, and relationships.
- Has difficulties performing routine tasks.
- Regularly repeats words and stories.
- Displays poor judgment and/or inappropriate behaviors.

What are some Examples of Normal Memory Loss in Older Adults?

· Forgetting dates and names, but often remembering them later. Usually, efforts are made to find the missing information.

• Losing or misplacing things, but makes efforts to locate them.

• Forgetting a key word or phrase, but finding other ways to express him/herself.

What impact does Mild Cognitive Impairment (MCI) have on memory?

MCI for some persons is the stage between the expected decline of normal aging and the more serious decline of dementia-related memory loss. Persons with MCI may forget key appointments or events. Written or verbal information may be forgotten. Not all persons with MCI develop dementia.

What are Some Effective Ways to Communicate with Individuals with Dementia?

- Treating the individual with dignity and respect.
- Communicating as one adult with another adult.
- Re-directing the individual to something positive.
- Using gentle touch and friendly voice tone.
- Giving genuine compliments.
- Limiting choices to two.
- Explaining to the individual what you are doing, or what you are going to do.
- Using short, simple sentences, with the most important word LAST.
- Being "in their reality"
- Providing the individual ample time to respond.
- Never interrupting or asking detailed questions.
- Cueing the individual with topic reminders.
- Initiating conversations with "Tell me about....", "I'm interested in knowing....".
- Never arguing or correcting.
 Never saying: "Remember", "I already told you.", "You can't."
 Knowing the individual, His/her interests, and abilities.

How can caregivers improve their skills to positively engage with individuals with Dementia?

- Using positive communication skills.
- Being patient with both the individual and themselves.
- Never personalizing negative comments or behaviors.
- Remembering that negative comments and behaviors are the result of the individual's disease/condition.
 - Taking breaks.
 - Requesting help from family and friends.
- Obtaining professional help from day programs, in-home care, or placement.
 - Giving yourself credit!



Deborah Allen is the Executive Director of PennCares. She is a Certificated Dementia Practitioner and a Certified Master Trainer for AGE u Cate Training Institute and conducts Compassionate Touch and Dementia Live trainings monthly to audiences of caregivers, professionals, AAA's, D&A facilities, and family members.

About PennCares

PennCares has grown to a regional leader for resources, advocacy, and services for individuals with a broad range of intellectual, developmental, and physical disabilities and their families.

We also provide educational, professional hot topic trainings. Many of our trainings focus on cognitive issues, dementia, hoarding, grandparents raising grandchildren, and caring for the caregiver just to name a few. One of our most popular trainings is our simulation training-Dementia Live. Check out website for our current training offerings at www.PennCares.org.

Upcoming trainings • 8/12/21 and 9/21/21 -

Transitioning: Preparing for a Change training.

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10/14/21 and 12/14/21 from 10 - 11:30 is Trauma Informed Care Parenting trainings











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Alzheimers... Dementia... Memory Care...

Life Enrichment Programs Key to Keeping Artis Senior Living Residents Engaged During Pandemic and Year-Round

By Vanessa Orr

Last year was rough on everyone, especially those taking care of seniors and those most at-risk during the pandemic. By following strict protocols while making sure that residents remained comfortable and safe, Artis Senior Living of South Hills not only survived, but thrived.

"We did very well this past year; we partnered with Johns Hopkins University, which helped us implement strict protocols. We were very fortunate that our cases were minimal with mild symptoms," said Artis Director of Community Relations Mary Jo Greene, LSW.

"On June 14, we opened for family visitation; families and friends are welcome to come visit with their loved ones," she continued. "We are happy to welcome everyone back to our community!"

During the pandemic, no visitors were allowed, and the senior living community also halted new admissions for two months. It gradually



introduced 'porch visits' with social distancing, and then moved to studio in-person scheduled visits, before allowing visits in residents' rooms this summer.

Even at the height of the pandemic, Artis continued to offer the same high-level programming for which it is known to keep residents engaged. "Because our residents are living with dementia, it is difficult to have them stay in their suites all day; they don't understand," said Greene, adding that they continued to allow residents to walk freely throughout the com-



munity. "We followed COVID restrictions and protocols, providing small group programming and maintaining social distancing."

Life Enrichment programming is very important at Artis, and a Partnership Profile accompanies every new move-in. "We find out about their hobbies, their occupations, how they like to celebrate holidays, if they're veterans and more," said Greene. "We want to know what is and was important to them and we use this to create individualized and group programs; it's our bible."

Artis residents can take part in the I CAN (Community Assistance Network) program, for example, that enables them to participate in community-oriented projects. "During Police Week in May, the residents made treat bags for the Bethel Park Police Department; residents also made stepping stones for a community beautification project in Bethel Park," said Greene. "They love to help us and to give back to our community."

to give back to our community." Artis also offers "Time to Dish" where residents meet with Chef Raymond once a month to discuss the menu. "For example, Chef Raymond met with our dads to see what they would like for Father's Day dinner," said Greene. "This gives them a voice and they get to choose their favorite foods."

One of the things that sets Artis Continued on page 37



The Difference 'Why Not?' Makes.

Memory Care guided by positivity, purpose and passion.

As we look back over our lives, it's our experiences that define who we are. While dementia may slowly erode a person's memories and cognitive skills, the core of a person's identity and passions remain and the ability to be genuinely happy and purposeful in the moment are everpresent. So, when it comes to memory care in a community setting,



the delivery of daily care must be as one-of-a-kind as the people receiving it.

That's the foundation of *The Artis Way*—the unwavering philosophy of Artis Senior Living, who offers a refreshingly different approach to memory care.

"When you change the way you operate from 'we can't do that!' to 'why not?,' amazing things happen!" Artis care partners collaborate with families to learn every detail about their residents to find opportunities for meaningful experiences as often as possible.



When presented with a request from residents or families, instead of saying 'no,' Artis care partners say, 'why not?'.

We are thankful for our Artis care team, who genuinely loves to make the seemingly impossible possible and prides itself on the moments they've been able to create for memory care residents and their families. Care partners at Artis ensure that the disease doesn't define a person, their indomitable spirit does.

Learn more about The Artis Way by calling 412-229-7925 or visiting TheArtisWay.com/GoodHealth

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Alzheimers... Dementia... Memory Care...

Understanding Dementia and Learning How You Can Help Those Living With It

We aren't born knowing how to communicate with a person living with dementia — but we can learn. Caring for a person who is living with dementia poses many challenges for families. People living with dementia from conditions such as Alzheimer's and related diseases have a progressive biological brain disorder that makes it more and more difficult for them to remember things, think clearly, communicate with others, and take care of themselves.

In addition, dementia can cause mood swings and even change a person's personality and how they may interact. Improving your communication skills and learning the early signs of dementia can help make caregiving less stressful, as well as likely improve the quality of your relationship with your family member. Here are a few things you can do to help understand dementia and what your family members are experiencing.

1. RECOGNIZE THE SYMPTOMS.

You can often recognize the early symptoms if a family member is struggling to participate in or complete everyday activities — such as paying bills, using terms of endearment instead of specific names, changes in their vision, isolating themselves or refusing to leave their homes.

2. UNDERSTANDING WHAT YOU DON'T KNOW.

As cliché as this sounds, trying to understand what your family members are going through is an important part of providing them with the best care possible. It's also beneficial to learn how to communicate with them in ways that are supportive, understanding and empathetic.

3. SIGN-UP FOR A DEMENTIA EDUCATION VIR-TUAL SEMINAR.

Free e-learning workshops through the Alzhei-



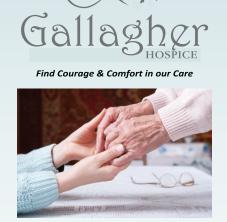
mer's Association are available at https://training.alz.org/. Additionally, Presbyterian SeniorCare Network is offering a free series of virtual seminars to help educate the local community on how to provide care for those living with dementia. To learn more, visit **www.srcare.org/dementia-education**.



As a Network tions bein

As a Dementia Care Center of Excellence, **Presbyterian SeniorCare Network** is committed to sharing its deep expertise to provide educational support that can improve dementia care, particularly for persons being cared for in their home by family members. To learn about services available to family caregivers, visit **www.PSCNDementia360.org**.





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SENIOR GUIDE

Senior Healthcare Program Demonstrated Safer Than Nursing Home Care

The COVID-19 pandemic has demonstrated that PACE/LIFE Programs, with their focus on keeping participants at home and in the community, are safer and more effective than nursing home care. The Senior LIFE healthcare program is a provider of the Program of All-Inclusive Care for the Elderly (PACE) called LIFE in Pennsylvania.

Senior LIFE is a Medicare and Medicaid approved long-term care program that provides complete medical care and supportive services for persons 55 years and older so they can remain in their home.

According to the National PACE Association, the rate of LIFE/PACE residents that have died from COVID is one third lower than for nursing home residents. The rate of cases among PACE participants was also one third lower than nursing home residents.

There are no costs for services for Medicaid eligible persons for the LIFE Program. Senior LIFE's services are customized to meet the specific needs of each individual and include physicians and specialists, nursing care, physical, occupational and speech therapies, personal and home care, medications, meals and nutritional counseling, eye, dental and foot care, durable medical equipment and more.

During the pandemic, the LIFE/PACE model has demonstrated resiliency and increased potential for the future by continuing to provide all the care and services necessary to keep their participants safe in the community. In response to COVID-19, Senior LIFE has substantially and swiftly adapted to continue to meet all members' care and services needs:

• Maintained existing homebased services for members and shifted provision of most of their center-based services into members' homes to minimize the risk of infection and help protect the extremely vulnerable from COVID-19.

• Expanded Use of Telehealth

· Continued routine and non-

routine assessments

• Care plans modified on an individual basis to accommodate long-term closure of day centers, offering additional services where necessary.

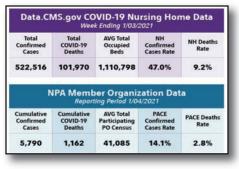
• Increased communication and coordination with the Senior LIFE network of providers regarding their COVID-19 policies.

Benefits of LIFE/PACE over traditional nursing home care

LIFE/PACE organizations serve approximately 1 in 10 of those that could benefit from their care in their communities; of the 2.2M lowerincome older adults estimated to need long-term services and support (LTSS), PACE organizations serve just 2.5% approximately.

LIFE/PACE was proven safer and more cost-effective even prior to the pandemic:

• LIFE/PACE employs strong financial incentives for PACE organizations to avoid duplicative or



unnecessary services while encouraging the use of appropriate community-based alternatives to hospital and nursing home care. Care decisions are provider-led through the interdisciplinary team in consultation with the participant and his or her family. This construct empowers the PACE model of care to achieve better care and patient experience, better population health and lower costs.

• Lower out-of-pocket costs for participants with no Medicare or Medicaid deductibles or copayment

• Better care leads to lower costs - 13% lower cost for state Medicaid programs

- Comparable Medicare costs

- Reduced Hospital Admission-: 24% lower hospitalization rate than *Continued on following page*

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Senior LIFE (Living Independence for the Elderly) is state and federally funded Medicare and Medicaid Program that provides long-term care for seniors so that they can remain living at home and out of a nursing facility.

- Transportation to
- medical appointments
 - & home delivery
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- Telehealth & wellness checks
- Medication management · Ac
- ent Access to the LIFE Health and Wellness center

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SENIOR GUIDE

Senior Healthcare Program

Continued from previous page

dually eligible beneficiaries who receive Medicaid nursing home services

- Decreased Rehospitalization-: 16% less than the national rehospitalization rate of 22.9% for dually eligible beneficiaries age 65 and over.

- Reduced ER Visits: Less than one emergency room visit per member per year.

- Fewer Nursing Home Admissions: Despite being at nursing home level of care, LIFE/PACE participants have a low risk of being admitted to a nursing home.

- LIFE/PACE participants have fewer unmet needs and receive better preventive care, specifically with respect to hearing and vision screenings, and the flu.

• LIFE/PACE incorporates many of the reforms the Medicare program seeks to promote, including personcentered care, delivered and coordinated by a provider based, comprehensive system, with financial incentives aligned to promote quality and cost effectiveness through capitated financing

• LIFE/PACE provides care to older Americans in their preferred environment— home.

• LIFE/PACE and other alternatives to nursing homes will be in great

demand. About Senior LIFE

Senior LIFE is an alternative to nursing home placement and is designed to help seniors live their best lives at home. Through Senior LIFE services, members are able to access the health care and support they need-and still have the independence they want. Each member of the Senior LIFE Program receives an individualized care plan. The program is a great option for families who want to keep their elderly loved ones home, but can't stop working to care for them full-time.

There are no costs for services for those who qualify for the program. The ideal Senior LIFE member is 55 or older who may need additional support to live independently in his or her home. Members must live in a Senior LIFE service area, qualify for a nursing home level of care, and be able to live safely in the community. All care and services are personalized and coordinated by an interdisciplinary team of medical and social service providers.

For a SeniorLife location near you, visit www.SeniorLIFEPA.com

Life Enrichment Programs Key to Keeping Artis Senior Living Residents Engaged

Continued from page 32

apart is that it is not as structured as many other senior living communities. "If a resident wants to sleep in until 10 a.m., that's okay," said Greene. "We live in their world, so we'll have a hot breakfast waiting when they are ready."

Artis also has a Director of Artis Way Experience, Elizabeth Morian, who serves as a liaison between residents, families and associates. "This is really unique because Liz not only keeps families informed with clinical and socialization updates, but she provides education to our associates, offering lessons on a daily basis to help them better communicate with residents living with dementia," said Greene. "Families reach out to us

"Families reach out to us because they want their loved ones to be happy, safe and engaged," she added. "We are honored to care for them, and have them as part of our Artis family."

> To schedule an in-person tour, visit **Artis Senior Living of South Hills** at www.artisseniorliving.com or call (412) 595-8917.

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SENIOR GUIDE

Staying Safe at Home with LIFE Pittsburgh

What is LIFE Pittsburgh?

LIFE Pittsburgh is an allinclusive, comprehensive program that helps seniors (55+) maintain their independence in the community through supportive services. The program is known nationally as PACE, Program of All-Inclusive Care for the Elderly. For over 21 years, LIFE Pittsburgh has been

serving the elderly population in Allegheny County.

What Does LIFE Pittsburgh Provide?

LIFE Pittsburgh is a nonprofit program that provides comprehensive and integrated care to seniors who may not otherwise be able to live independently at home. There is a coordinated plan of care that includes medical, social and daily living support. At LIFE Pittsburgh, older adults are treated with the respect and dignity they deserve. They receive the very best care from dedicated geriatric care professionals without sacrificing their independence. Primary care and community services are provided through the Day Health Center and through the inhome program based on an individual's needs. The continuous coordination of care sets the LIFE program apart from any other care model, which ensures quality of life to its Participants.



Who is Eligible for LIFE Pittsburgh?

Eligible participants are 55 years old or older, live in the designated service area, meet the state's medical requirements for nursing facility level of care, are able to live safely in the community, and be financially eligible as determined by the Allegheny County Assistance Office or be able to privately pay.

LIFE During Uncertain Times

We are dedicated to continuing to provide care to keep our Participants safe and healthy during this time. While we are adapting our process, we are also committed to continuing to enroll new Participants into our program at this time, as we are a valuable resource to those that need our help.

How Can I Learn More About LIFE?

To learn more about eligibility and/or the process of enrolling, please contact (412) 388-8050 TTY: 711 and ask for the Enrollment Department or visit www.lifepittsburgh.org.

Please reach out if you need extra support, we are here for you. Stay safe, stay well.

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LIFE Pittsburgh is an all-inclusive program for individuals 55+ who want to stay in their home, but need supportive services to do so. Our coordained plan of care includes medical, social and daily living support. At LIFE Pittsburgh, seniors are treated with the respect and dignity they deserve. LIFE Pittsburgh goes beyond simply "treating medical problems" to actually improving the quality of life for most of our Participants. There is no cost to receive LIFE Pittsburgh services for those who qualify.



www.lifepittsburgh.org

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HOSPICE

Near the End of Life, a Bedside Salute Means So Much to Veterans



By Evalisa McClure

As the family of patient José Pacheco gathered at his home for a veteran's recognition ceremony, the elderly veteran began talking about his service during World War II.

Some of Mr. Pacheco's family members had never heard his stories, including a grandson who had asked to be excused from school that day to be at his grandfather's side.

"Everybody knows how few and far between our WWII veterans are," VITAS nurse Nancy explains. "It's almost like you're witnessing something indescribable. You know each veteran's time will be short, yet here we are in the presence of an American hero. It makes everyone really emotional."

Driven by duty

VITAS Healthcare honors veterans every day. Driven by a sense of duty and empowered by veteran-specific care, we help America's treasured service members navigate their final days, weeks, and months in comfort and dignity.

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VITAS also supports the families of veterans by helping them secure benefits from the Department of Veterans Affairs, arranging military funerals and burials, and recording the details of their loved ones' lives in touching Life Biographies.

Well-deserved honors

To recognize Mr. Pacheco and his family, Nancy presented the veteran with a certificate of appreciation, a pin, and a red-white-andblue volunteer-crocheted afghan. She read lines from one of her favorite poems, "It Is the Soldier.'



"It is the soldier, not the minister, who has given us freedom of religion... It is the soldier, not the reporter, who has given us freedom of the press... It is the soldier, not the lawyer, who has given us the right to a fair trial... It is the soldier, not the politician, who has given us the right to vote ... '

Then she saluted her patient, gave him permission to stand down, and thanked him for his service.

"His family kept saying that no one ever honored him the way we did," Nancy says, "and that always makes me feel good."



Evalisa McClure is general manager for VITAS Healthcare in Pittsburgh. For more information about end-of-life care services, call the nation's leading provider at (866) 759-6695 or visit VITAS.com.

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