National Falls Awareness Prevention Day September 23

Falls are the leading cause of fatal and non-fatal injuries for older Americans. Falls are costly, both in terms of dollars and quality of life. However, falling is not an inevitable part of aging. Through practical lifestyle adjustments, evidence-based programs and community partnerships, the number of falls among seniors can be reduced substantially. Every year on the first day of fall, the National Council on Aging promotes the celebration of National Falls Prevention Awareness Day to bring attention to this growing public health issue. (Excerpted from www.ncoa.org/healthy-aging/falls-prevention)

Here are 6 easy steps you can take to help your older loved one reduce their risk of a fall:

1. Enlist their support in taking simple steps to stay safe. As we age, most of us lose some coordination, flexibility, and balance—primarily through inactivity, making it easier to fall. Ask your older loved one if they’re concerned about falling. Many older adults recognize that falling is a risk, but they believe it won’t happen to them or they won’t get hurt—even if they’ve already fallen in the past. If they’re concerned about falling, dizziness, or balance, suggest that they discuss it with their health care provider who can assess their personal risk and suggest programs or services that could help.

2. Discuss their current health conditions. More than 90% of older adults have at least one chronic condition like diabetes, stroke, or arthritis. Often, these increase the risk of falling because they result in lost function, inactivity, depression, pain, or multiple medications. Find out if your older loved one is experiencing any problems with managing their own health. Are they having trouble remembering to take their medications—or are they experiencing side effects? Is it getting more difficult for them to do things they used to do easily? Also, make sure they’re taking advantage of all the preventive benefits now offered under Medicare, such as the Annual Wellness visit. Encourage them to speak openly with their health care provider about all of their concerns.

More than 90% of older adults have at least one chronic condition like diabetes, stroke, or arthritis. Often, these increase the risk of falling because they result in lost function, inactivity, depression, pain, or multiple medications. Find out if your older loved one is experiencing any problems with managing their own health. Are they having trouble remembering to take their medications—or are they experiencing side effects? Is it getting more difficult for them to do things they used to do easily? Also, make sure they’re taking advantage of all the preventive benefits now offered under Medicare, such as the Annual Wellness visit. Encourage them to speak openly with their health care provider about all of their concerns.

continued on page 6
see Falls Prevention Day
From the CEO...

By Jean Leonatti, CEO

“So long, farewell, auf wiedersehen, good-bye .....”
Do you hate “good-bye’s” as much as I do?

The time has come for me to write my final column for the SilverEclectic. I will be retiring on September 21st after 44 years at CMAAA. I could not be more grateful for the opportunities that have been provided to me at this agency.

Way back in 1974, I was looking for a summer job between semesters at the University of Missouri/Columbia. Any job would do – I just wanted to continue living the college life. As fate would have it, this brand new agency called the Central Missouri Area Agency on Aging had an opening for a secretary. As I was studying social work in college, it seemed like a good place to work, an opportunity to see what “social work” might really be like. As time passes, we can look back in life and identify decisions that changed the whole course of our life — this was certainly one of those times for me.

The agency hired me full time that summer, and then I worked part time during the fall semester. As luck would have it, during my final semester the agency received a special grant to hire a social worker to begin the work of establishing senior centers in our territory. I was in the right place at the right time with the right background. This was my first full time job!

I served as the Social Services Coordinator for several years and then became the Assistant Director. In 1981 I was hired as the Executive Director and have served in that capacity until now (with only a name change to Chief Executive Officer a couple of years ago).

Here I was, this naïve and idealistic young person, suddenly in a leadership position. I was so fortunate to have great mentors, Board members who really cared and supported me, and staff who were willing to give just about anything a try if it met better and more services for older people. We all learned together. We were privileged to be in the forefront of a revolution in new services for older persons. What a ride!

Many years ago (if truth be told, probably decades ago) I saw a play called The Quilters. It was about pioneer women and how they told their life stories through the quilts they designed and made. I still remember one of the lines from that play — “I am a part of all that came before me, and I will be part of all that comes after me.” In other words, I am a product of all the people who touched my life, and I will continue into the future to be a part of everyone whose life I have touched.

With that in mind, I won’t say good-bye.

Instead I will say a deep and abiding “thank you” to all the family, friends, co-workers, mentors, and clients who have made me who I am and I send my very best wishes to all those who will come after me.

With deep gratitude,
CMAAA Announces New CEO

The CMAAA Board of Directors is pleased to announce the hiring of Rebec- ca Nowlin as the new Chief Executive Officer for the Central Missouri Area Agency on Aging. She will replace retiring CEO Jean Leonatti.

The agency undertook an extensive and in-depth search and hiring process. Over 80 applications were received and reviewed. The field was narrowed to 12 top candidates. “We were most fortunate to have an excellent field of candidates and were able to choose the best from among the best,” said Bob Niebruegge, President of the Board and Chair of the Transition Committee.

Ms. Nowlin (or Becca, as she prefers to be called) has both a Bachelor’s and Master’s degree in the counseling field. She has 20 years’ experience in progressively responsible non-profit management serving vulnerable populations. During the interview process, she exhibited that rare combination of both technical management skills and “people” skills.

“I am honored to have been selected to join CMAAA and to take on this responsibility. Jean has been a wonderful CEO and I hope to be able to enhance her long-term and excellent leadership of CMAAA,” Becca said. “I promise to give my all to the organization and to all of the Missourians it serves.”

Becca lives in Columbia, MO. Her household includes her husband, two children and three of their children’s grandparents. Becca said “I feel an intense dedication to the aging population of our state and I look forward to getting to know each person connected to CMAAA.”

Medicare conducting survey of beneficiaries

by Rona McNally
Director of the Missouri Senior Medicare Patrol

An official survey of Medicare beneficiaries is underway, and the Missouri SMP (Senior Medicare Patrol) is offering some pointers to folks who may receive visits.

The Centers for Medicare and Medicaid Services (CMS) has contracted with NORC at the University of Chicago to conduct a national study to provide information on the health care experiences of Medicare recipients. As part of the effort, the NORC representatives are interviewing Medicare beneficiaries in Missouri.

Because the Missouri SMP has been vigilant in warning people against unwittingly answering personal healthcare questions, the SMP wants to make the public aware that this survey — titled the Medicare Current Beneficiary Survey — is an official research study of the U.S. government.

The data collected will be used to analyze health care policy issues and improve planning of health care services.

Interviewers will visit pre-selected households. While Medicare officials are seeking consumers’ cooperation with these researchers, participation is completely voluntary. Interviewers will wear photo ID, will adhere to strict professional standards, and will be trained and legally bound to pledges of confidentiality.

Individuals’ answers will be kept private, and answers will not affect a participant’s benefits.

Consumers will not be required to supply their Medicare numbers, credit card numbers or bank account numbers to these interviewers.

If you have questions, please call the Senior Medicare Patrol at 1-888-515-6565. If you have any concerns about privacy or confidentiality, visit http://www.mcbs.norc.org.

This project was supported, in part by grant number 90MP0204, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.
Senior Centers are rewarded with checks for their participation in the Evidence-Based classes this past fiscal year! Multiple partners, many volunteers, excited Center Administrators and you, the participant make Evidence-Based classes successful!

Evidence-Based classes are research based and certified as education that has been proven to offer a positive change for the participant and their changes in their lifestyle that is critical to their daily health and longevity.

Did you participate in a Fall Prevention class, a Chronic Illness class, a Stay Strong Stay Healthy class or a Diabetes Education class? Opportunities abound in the nineteen (19) counties that CMAAA serves. I would encourage you to be a part of learning about your health as you age and gaining new information that can create improved healthy habits that may increase your strength, reduce your blood sugar, improve your stamina and ultimately can add years to your life! Seek out your Senior Center Administrator of your local senior center and sign up. Let your Senior Center Administrator know you are interested.

Congratulations to those Centers who have led the charge and have offered classes this past year. Your efforts have contributed more than nineteen hundred (1,900) class hours to the health of the senior participants. It is with gratitude that State of Missouri funds are able to support certified evidence-based classes as a recognized investment in the health and welfare of Missouri seniors.

This next year is going to be just as successful as our partner agencies, Oasis, Arthritis Foundation, Primaris and multiple regions of Missouri University Extension Offices are providing instructors that compliment CMAAA certified volunteers.

Take advantage of the evidence-based class opportunities in your local Senior Center. Take charge of making a few changes that last a life time by enjoying the comraderie of fellow seniors who are never too old to learn and are ready for self-empowered improvement!

Smiles Abound!

by Beth Busseau
County Services Director
Balancing Privacy & Protection: Surveillance Cameras in Nursing Home Residents’ Rooms

Fact Sheet provided by: The National Consumer Voice for Quality Long-Term Care

by Donna Wobbe
Ombudsman Program Director

You and your family members might have considered installing a surveillance camera in your room to help determine that you are receiving appropriate care and being treated with dignity and respect, or to be a deterrent to abuse. Surveillance cameras can record video only, audio only, or both video and audio. While surveillance cameras and other devices can offer information about the type of care you are receiving and how you are being treated by nursing home staff, other residents, and visitors, they can be invasive and may violate your or your roommate’s right to privacy. They are also no substitute for personal involvement and monitoring.

Questions to consider before installing a surveillance camera

Given the privacy concerns surveillance cameras present to residents and their roommates, you should consider the following questions before installing a surveillance device into your room:

1. Does your state have a law or guideline? Are there required forms that must be completed?
2. Do you want to record both audio and video, or only one or the other?
3. Does your facility have policies around camera use?
4. Do you have consent from your roommate? If the resident or her roommate do not have capacity to give consent, do you have consent from their family or legal representative?
5. If you install a camera, who needs to be notified? This can include the facility administration and staff, other residents, and visitors.
6. Do you need signs notifying others that there are surveillance cameras in the facility and/or outside the resident’s room?
7. Are there times when you want the camera turned off? Such as while dressing or bathing, or visits with certain individuals?
8. Who will be able to access the camera? Start/stop recordings? View recordings?
9. Who is responsible for the costs and maintenance of camera installation, operation, and removal?
10. What will you do with the information that has been recorded?

Federal regulations give nursing home residents the right to be treated with dignity and respect. This includes while receiving care and during any interactions with nursing home staff, other residents, and visitors. In addition to showing good care being provided, surveillance cameras may record incidents of poor care, neglect, aggression or abuse. Residents are also guaranteed the right to privacy. This right to privacy includes the right to privacy in your resident rooms, personal care, and in any communication during visits. A surveillance camera would be recording you and your roommate (if you have one) all the time when you are in your own room. It would be video recording you while you are receiving help getting dressed, during your visits with family members and friends, and even recording when you may want to talk to your physician to discuss confidential health issues. Some surveillance cameras may even record audio, which may mean that your conversations may no longer be private.

If you would like to read the entire article “Balancing Privacy & Protection: Surveillance Cameras in Nursing Home Residents’ Rooms”, you can find this FACT SHEET by going to www.theconsumervoice.org

If you or someone you know would like information about choosing the right level of care or any other questions about Long Term Care, please contact your Ombudsman.

Please consider gifting a few hours each week and become an Ombudsman Volunteer advocating for residents in Assisted Living and Skilled Nursing Homes!

For additional information call, email or visit us online.

Your Regional Ombudsman Coordinators

Donna Wobbe, Linda Daugherty, Ronda Giger, Margaret McGeehon

Central Missouri Area Agency on Aging
Long Term Care Ombudsman Program
573-443-5823 or 800-369-5211
Email: dswobbe@cmaaa.net
3. **Ask about their last eye checkup.** Are hearing and vision changes becoming problematic? In the aging eye less light reaches the retina—making contrasting edges, tripping hazards, and obstacles harder to see. New research suggests hearing loss can also contribute to the risk of falling. If your older loved one wears glasses, make sure they have a current prescription and they’re using the glasses as advised by their eye doctor. Remember that using tint-changing lenses can be hazardous when going from bright sun into darkened buildings and homes. A simple strategy is to change glasses upon entry or stop until their lenses adjust. Bifocals also can be problematic on stairs, so it’s important to be cautious. For those already struggling with low vision, consult with a low-vision specialist for ways to make the most of their eyesight.

4. **Notice if they’re holding onto walls, furniture, or someone else when walking or if they appear to have difficulty walking or arising from a chair.**

These are all signs that it might be time to see a physical therapist. A trained physical therapist can help your older loved one improve their balance, strength, and gait through exercise. They might also suggest a cane or walker—and provide guidance on how to use these aids. Make sure to follow their advice. Poorly fit aids actually can increase the risk of falling.

5. **Talk about their medications.**

Some prescriptions and over-the-counter medications can cause dizziness, dehydration, or interactions with each other that can lead to a fall.

If your older loved one is having a hard time keeping track of medicines or is experiencing side effects, encourage them to discuss their concerns with their doctor and pharmacist. Suggest that they have their medications reviewed each time they get a new prescription. Also, beware of non-prescription medications that contain sleep aids—including painkillers with “PM” in their names. These can lead to balance issues and dizziness. If your older loved one is having sleeping problems, encourage them to talk to their doctor or pharmacist about safer alternatives.

6. **Do a walk-through safety assessment of their home.**

Most seniors have lived in their homes for a long time and have never thought about simple modifications that might keep it safer as they age. There are many simple and inexpensive ways to make a home safer. For professional assistance, consult an Occupational Therapist. Here are some examples: Increase lighting throughout the house, especially at the top and bottom of stairs. Ensure that lighting is readily available when getting up in the middle of the night. Make sure there are two secure rails on all stairs.

Install grab bars in the tub/shower and near the toilet. Make sure they’re installed where your older loved one would actually use them. For even greater safety, consider using a shower chair and hand-held shower.

For more ideas on how to make the home safer, the Centers for Disease Control (CDC) offers a home assessment checklist in multiple languages. Visit [www.cdc.gov](http://www.cdc.gov) and search “falls checklist” to download a copy. Partner with your older adult loved one to do a home assessment and discuss opportunities to improve safety.

The National Council on Aging, U.S. Administration on Aging, and U.S. Centers for Disease Control also promote a variety of community-based programs, like A Matter of Balance, Stepping On, and Tai Chi, that can help older adults learn how to reduce their risk of falling. Contact your Area Agency on Aging (AAA) to find out what’s available in your area. To learn more visit [ncoa.org/FallsPrevention](http://ncoa.org/FallsPrevention)

---

**Falls Prevention Day**

*Continued from page 1*

Live Facebook event on September 20: join NCOA on Facebook at 3:00 p.m. ET for a talk with a pharmacist about medication management tips and strategies to avoid medication misuse and abuse.
H E L L O
from H O L L I E

Hollie Spencer
Medicare Education & Outreach Counselor
573–443–5823

Medicare Prescription Drug Open-Enrollment

Can you believe that we are half way through 2018, and it is just about open-enrollment time again? We here at Central Missouri Area Agency on Aging, (CMAAA), is providing the following as a reminder for all Medicare Insurance Beneficiaries in the Central Missouri area.

WHAT: Medicare Open-enrollment time is October 15 through December 7, 2018.

FOR WHOM: All Medicare Beneficiaries that wish to compare their current Medicare Prescription Drug coverage to what will be available in 2019.

WHY: Compare plans to possibly save money, and see if you would qualify for any extra help with the costs of your Medicare insurance.

WHERE: Check with the local CMAAA Care Coordinator for your county, listed on the back page of this paper.

HOW: Call your CMAAA Care Coordinator; make an appointment to visit with her/him about your Medicare/Part D options for 2019, during open-enrollment.


You can always give the office a call and set up a time to talk with me about your Medicare/Part D options.

We will be happy to help you better understand your Medicare options.

Hollie Spencer
Outreach & Education Counselor, CMAAA
1121 Business Loop 70 East, Suite 2D
Columbia, MO 65201
573-443-5823

SUBSCRIPTION FORM
Suggested contribution - $10.00

Mail to: CMAAA, 1121 Business Loop 70 East, Suite 2A, Columbia, MO 65201

Name: ____________________________
(Please type or print)

Complete: ____________________________
(street or box # - please include apt. # or route #)

Complete: ____________________________
(city) (state) (zip code)

PLEASE MARK ALL THAT APPLY TO YOU:
( ) ADD MY NAME to the mailing list. (I am not receiving one by mail at this time)
( ) I HAVE ENCLOSED my tax deductible contribution to help support SILVER ECLECTIC.
( ) CORRECT MY ADDRESS on your mailing list. (Please include current mailing label)
( ) REMOVE MY NAME from the mailing list.
( ) I am receiving more than one copy of SILVER ECLECTIC. (INCLUDE ALL MAILING LABELS FROM NEWSPAPER AND INDICATE WHICH ONE SHOULD BE DELETED).

NOTE: If you are requesting an address change or stopping a subscription, include your mailing label from the page 8 of SILVER ECLECTIC.

SILVER ECLECTIC is published by the Central Missouri Area Agency on Aging and is edited by Carol Kmucha. Funds for this project were made available through the Division of Senior and Disability Services of the Missouri Department of Health and Senior Services under provisions of the federal Older Americans Act. The total project is in compliance with Title VI of the Civil Rights Act of 1964 and all requirements imposed pursuant to the Regulation of the Department of Health and Human Services issued pursuant to that Title to the end that no person shall, on the grounds of race, color or national origin be excluded from the benefits of this project.
Need Help? Call Us.

SENIOR CENTERS

Boonslick Senior Center (Boonville) (660) 882–2344

Bourbon Senior Center (573) 732–4268

California Nutrition Center (573) 796–4240

Callaway Senior Center (Fulton) (573) 642–2458

Camdenton Senior Center (573) 346–2776

Conway Senior Center (417) 589–2079

Crocker Senior Center (573) 736–5405

Cuba Senior Center (573) 885–2909

Dixon Senior Center (573) 759–6313

Eldon Senior Center (573) 392–6102

Fayette Senior Citizens Center (660) 248–3733

Glasgow Senior Center (660) 338–2975

Hughes Center (Iberia) (417) 532–3040

Jefferson City Centers (573) 634–8828

West Point Senior Center (573) 635–4120

Macks Creek Senior Center (573) 363–0153

Mexico Senior Center (573) 581–7743

Moniteau Nutrition Center (Tipton) (660) 433–2715

Senior Meal Program (Columbia) (573) 449–8000

Owensville Senior Center (573) 437–3096

Osage Beach Senior Center (573) 348–2909

Rolla Elderly Highrise (573) 341–2929

Salem Senior Center (573) 729–2373

Sayers Senior Center (Potosi) (573) 438–3237

Stoutland Senior Center (Richland) (573) 765–5414

Vienna Senior Center (573) 422–3834

Waynesville/St. Robert Sr. Center (573) 774–2668

Westside Senior Center (Laurie) (573) 372–3588

REGIONAL OMBUDSMAN COORDINATORS

Long Term Care Ombudsman Program

Donna Wobbe, Linda Daugherty, Ronda Giger and Margaret McGeehon 573–443–5823 or 800–369–5211 dswobbe@cmaaa.net

CARE COORDINATORS

Audrain County
Carol Senor (573) 581–7678

Boone County
Steve Dopp and John Heller (573) 443–5823

Callaway County
Karen Elwood (573) 642–6772

Camden County
Mary Ann Matthews (573) 346–1834

Cole County
Tina Phelps (573) 634–8828

Cooper County
Karen Wright (660) 882–3444

Crawford County
Tanya Johnson (573) 885–2922

Dent County
Wendy Baker (573) 729–5697

Gasconade County
Tonya Zelch–Wagner (573) 437–2532

Howard County
Karen Wright (660) 882–3444

Laclede County
Janet Moore (417) 588–4300

Maries County
Kathleen Humphrey (573) 422–3322

Miller County
Kathleen Humphrey (573) 392–7229

Moniteau County
Melissa Blackburn (573) 796–4051

Morgan County
Melissa Blackburn (573) 378–9980

Osage County
Tonya Zelch–Wagner (573) 437–2532

Phelps County
Scott Shaffer (573) 265–0616

Pulaski County
Mary Ann Mathews (573) 774–3390

Washington County
Robin McElrath (573) 438–5962