



## VDA WEEKLY E-MAILING

February 19, 2019

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### ACL News & Information

Here is a link to news & information from the Administration for Community Living (ACL):

<https://acl.gov/>

### NASUAD Information

Here is a link to state technical assistance from NASUAD:

<http://www.nasuad.org/state-technical-assistance>



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## National Healthcare Decisions Day Information

*Kathy B. Miller, Director of Programs*

Dear National Healthcare Decisions Day Team:

We're getting close, again! Just two short months to National Healthcare Decisions Day 2019! I'm confident that it will be great.

**Ideas and Inspiration:** In this month's blog, we've assembled several successful initiatives to provide you some examples of NHDD activities that may inspire you with your own initiative: [NHDD blog piece](#). We're also hosting a FREE! "Community Call" on Wednesday, February 20, 3-4pm ET, where you can learn more about NHDD's origins, hear several additional success stories, and have the opportunity to ask questions of the entire panel (including me): [NHDD community call registration](#). Finally, please use the various NHDD resources we've assembled in the [NHDD Tool Kit](#).

**Expanding Our Scope:** As I mentioned last month, I challenge the entire NHDD team to expand the scope of activities from the traditional focus on end-of-life issues to include mental health issues and any other non-end-of-life issues that are important to people. This expansion is not something new with respect to advance care planning; it just hasn't been emphasized as much. I sincerely hope that the NHDD initiative can help advance the state of affairs with respect to *ALL* forms of advance care planning. For more information about Psychiatric Advance Directives, please see this [New York Times article](#).

**Two Sad Reminders of Why NHDD is So Important:** Two recent events highlight the importance of our work. First, on a recent visit to the ER for a kidney stone, the registration clerk dutifully asked whether I had an advance directive, but stating that my AD was filed in Virginia's Advance Directive Registry caused complete befuddlement. Despite being required to ask every patient about advance directives, the clerk had no clue-and presumably no training-about where to find mine. Moreover, although no one knew what condition I had when I walked in the



ER, neither the physician nor several nurses asked if I had an advance directive. Second, I have a friend whose mother is seriously ill and in the hospital. Over the course of just a few days, no fewer than six physicians have asked her about her advance care plan and DNR wishes. Although the frequent asks could be promising, in this case they're discouraging because they reveal a serious system flaw. In this case, each of the inquiries seem to be uninformed by any reference to the medical record or coordination with other physicians. We can and need to do better, people. These two experiences highlight the profound need for all the work we're doing with NHDD to improve advance care planning. Among other things, we need to ask about advance care planning in meaningful ways; we need to know where advance directive documents may be stored in our particular institutions/communities; and we need to provide care in a way that honors the advance care plans of those patients who have actually made an advance care plan.

**A Graceful Reminder of Why NHDD is So Important:** I am soon going to lose a friend to ALS, and the NHDD Team is about to lose a great champion of advance care planning. But there is a silver lining to this story: advance care planning works. My friend, a nurse, has a detailed plan for her death and, despite her terminal condition and decline, has found the last year to be her most rewarding year of her life. My friend is living proof that having a solid advance care plan can be a gift and a blessing to oneself, to loved ones, and to friends.

**Think Quality Not Quantity:** Every year, I hear from NHDD participants who are disappointed by the turnout to some NHDD event. I'm sorry to know that the numbers are not greater because I want NHDD to be the largest initiative it can possibly be. I don't, however, want any NHDD participants to lose sight of the value of smaller events/interactions. Indeed, some of the best advance care planning presentations I've ever done have been to very small groups. Please don't discount the impact of a few small, but immensely powerful, NHDD interactions to blossom into major events. By all means, please continue to aim high and go big with your NHDD activities, but please also take pride, rather than be disappointed, in the deeply personal and powerful interactions that often only occur in intimate settings.



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**Day vs. Week:** Since we've had a few inquiries, I wanted to mention that we're "officially" (read: at the NHDD national level) only honoring a **NHDDay**. Although we have twice tried a week-long set of events, the survey feedback indicated that a single day is preferred. Please, of course, feel free to host as many "NHD" events/activities as you please, whether they run an hour, a day, a week, or a month. It all counts!

### **NHDD Participation Ideas**

Looking for some inspiration from others as you plan for National Healthcare Decisions Day? Check out the below ideas for this month. In the coming months we will list more ideas from community members, coast-to-coast, who shared with us what they were planning for NHDD 2018. And, if you need more ideas, check out these [suggested activities](#). Or, listen to [The Conversation Project's Feb 2018 community call to hear more on what groups are doing to promote NHDD](#).

**Start Small! NHDD starts with You:** One community member noted she received encouragement on 'walking the talk' on The Conversation Project (TCP)'s NHDD community call and committed to completing her own advance directive and helping her family members to do the same. Another community member planned on running an article in her local newspaper. And, another community member in Rhode Island planned to present various resources to a local leisure learning group she was part of and lead a group discussion. You don't have to go big, one conversation can start a spark!

**JOIN US on February 20th for our next Community Call in preparation for NHDD!** Register [here](#).

As always, thanks for all you do for NHDD and advance care planning as a whole.

GO TEAM!



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News & Events

February 13, 2019

### **[Announcing the Minority Aging Statistical Profiles](#)**

The older population is becoming more racially and ethnically diverse as the overall minority population experiences greater longevity. Racial and ethnic minority populations have increased from 6.9 million in 2006 (19% of the older adult population) to 11.1 million in 2016 (23% of older adults), and are projected to increase to 21.1 million in 2030 (28% of older adults).

The [2017 Minority Aging Statistical Profiles](#) is an annual summary of the most recent statistics on older adults within the African American, American Indian and Alaska Native, Asian American, and Hispanic American populations. Compiled primarily with data from the U.S. Census Bureau, the summary includes topical areas such as centenarians, residence, education, marital status, living arrangements, income and poverty, self-rated health status, chronic conditions, disability status, health insurance, and participation in Older Americans Act (OAA) programs.

Please also see the 2017 [Profile of Older Americans](#), an annual summary of the most recent statistics on the older population, including 15 topical areas (such as population, income and poverty, living arrangements, education, health, and caregiving). Previous years' publications and data are also available on the website.

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Notes:

1. Principal sources of data for the Profile are the U.S. Census Bureau, the National Center for Health Statistics, and the Bureau of Labor Statistics. The Profile incorporates the latest data available but not all items are updated on an annual basis.
2. This report includes data on the 65 and over population unless otherwise noted. The phrases “older adults” or “older persons” refer to the population age 65 and over.
3. Numbers in this report may not add up due to rounding.



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News & Events

February 14, 2019

### **American Heart Month**

Cardiovascular disease is prevalent in our society, disproportionately impacting older Americans. According to the American Heart Association, more than 85 million American adults have one of more types of cardiovascular disease. Of these, more than 43 million (approximately half) are age 60 or older.

Across the country, ACL partner organizations are hosting educational events in recognition of American Heart Month. In Georgia, Open Hand Atlanta offers a tailored nutrition-focused heart health class at local senior centers throughout the month of February. In Utah, Salt Lake County Aging and Adult Services is promoting American Heart Month by providing opportunities for blood pressure screening and a heart health presentation in each of their 16 senior centers. Additionally, the senior centers are encouraging older adults to attend at least three physical activity programs, including evidence-based interventions such as EnhanceFitness, Tai Chi for Arthritis, and the Arthritis Foundation Exercise Program. And in New Jersey at the West Windsor Senior Center, older adults can participate in carotid artery and blood pressure screenings, as well as ongoing physical activity programs.

ACL also supports the delivery of evidence-based [chronic disease self-management education programs](#) (CDSME) in communities across the country. CDSME programs provide older adults and adults with disabilities with education and tools to help them better manage chronic conditions, including cardiovascular disease. More than 383,000 individuals have participated in these impactful interventions since 2010. The most common chronic condition reported by program participants is hypertension (41%), and one-third of participants reported having



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high cholesterol. Further, 13% of participants reported a diagnosis of heart disease, and 5% indicated having had a stroke.

Finally, the Carter Burden Network, one of ACL's [Innovations in Nutrition Programs and Services](#) grantees, is addressing the high cardiovascular risk of uncontrolled hypertension among older adults by testing a multi-component intervention that includes the [DASH Eating Plan](#).

Visit [healthfinder.gov](http://healthfinder.gov) to learn how you can spread the word about American Heart Month.



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## ACL Seeks Public Input on EJCC Priorities

ACL wants to hear your best thoughts and ideas for the future activities of the Elder Justice Coordinating Council (EJCC). The EJCC coordinates activities related to elder abuse, neglect, and exploitation across the federal government. We want to know what issues you think the EJCC should prioritize over the next two years.

You can submit comments electronically to [ejcc@acl.hhs.gov](mailto:ejcc@acl.hhs.gov) with “Thoughts and Ideas” in the subject line through September 30, 2019.

### What we are looking for:

Comments, thoughts, and ideas about any aspect of the Elder Justice Coordinating Council. Examples of questions you can address include:

- How have the EJCC’s past activities benefitted you or your affiliated programs?
- What activities, tools, resources, or components could most effectively advance elder justice at the state and local levels?
- How could the EJCC benefit the larger elder justice community?
- What is the best way to measure the EJCC’s impact and effectiveness?

### What we are *not* looking for:

Please do not use this mailbox to report suspicions of abuse, neglect, or exploitation. Any suspected abuse, neglect or financial exploitation should be reported to your [state’s Adult Protective Services](#). ACL is also not authorized to receive personally identifiable information **beyond the contact information of the person submitting input**. We will not review any comment that includes any other personally identifiable information such as names, addresses, phone numbers, or Social Security numbers.

[Read the full public input invitation.](#)



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**Link to DARS Independent Living Monthly Newsletter**

*Rhonda Jeter, MS, CRC, Director of Independent Living*

Past issues of IL News Notes are available on the DARS Intranet:

<https://intranet/docrepo/DARSCILDocViewer.html>