Enhancing the Quality of Life of Nursing Home Residents with Late Stage Alzheimer's Disease and Related Disorders

Felicity Sluga, M.S.

Felicity Sluga, M.S. is the Director of Resident Services at The Hermitage, a non-profit Continuing Care Retirement Community located in Richmond's historic Ginter Park. She is responsible for the oversight of the activity programming which includes the management and supervision of the activity coordinators, Spiritual Services and the Creative Workshop. Felicity is also an adjunct faculty member at VCU Department of Gerontology where she co-instructs Long-Term Care Administration, a Sigma Phi Omega member and an Eden Associate.

Educational Objectives

1. Discuss the growing need for special programming and activities to improve the quality of life of nursing home residents with dementing illnesses.

2. Discuss program and activity options that have a positive impact on quality of life as measured by the resident's mood, behavioral symptoms, cognitive skills, physical condition and medication use.

3. Review the responses of a resident to our unit’s therapeutic interventions.

Background

Alzheimer's disease (AD), an irreversible deterioration of brain tissue, causes the progressive loss of nerve cells responsible for normal thought,
In 1998, approximately 4 million Americans had AD and related disorders. The direct and indirect costs of their care have been estimated at $100 billion annually. By 2050, AD may have as many as 45 million victims across the globe; 14 million will be Americans. With estimates as staggering as 4-8% of the population 65 and over and 37% of those 85 and older having symptoms of AD significant enough to impair their ability to live independently, the costs of providing care are formidable (Bengtson & Schaie, 1999).

Many long-term care facilities have developed special care units to enhance the quality of life for residents experiencing a dementing illness. The Hermitage, a Continuing Care Retirement Community in Richmond, Virginia, has a special care unit known as the Special Care Neighborhood (SCN-HC). Located in our Health Care Center, a 104-bed nursing facility, this unit concentrates its efforts on residents in the latter stages of the disease.

The Hermitage received a grant from the Jessie Ball duPont Fund in May of 1999 to expand existing programs and support new ones for residents on the SCN-HC unit. This funding enabled the unit to try interventions and individually-targeted programs, and to monitor them for success. The program options proved to be effective for this special population.

**Program Objectives**

The program philosophy is based upon the "best friends" approach used by the Helping Hands Day Program of the Lexington Bluegrass Alzheimer's Association. Our staff is committed to its philosophy, which requires staff members to become knowledgeable about each resident's background, traditions, personality, moods and problem solving style.

The program objectives are to “establish a structured daily program with an interdisciplinary team approach, which enables residents to be involved in their daily life to their highest potential... and to provide opportunities for successful, failure free individual and group activities that are stage specific according to the cognitive level of dementia.” These opportunities are “tailored to the needs of the the dementia resident and include basic programming elements such as Activities of Daily Living, meals, social interaction, and one-on-one interaction...”. Staff members are required to offer encouragement in every activity residents
embark upon throughout the day. We also seek to eliminate the use of chemical interventions to alleviate behavioral problems by the use of alternative therapeutic techniques, including inter-personal interaction between caregiver and resident, in a structured, nurturing environment. In addition, we want to keep families involved and informed of their loved one’s status and for them to play an active role in their care.

We begin by assessing each resident prior to admission to ascertain the resident’s cognitive level. The initial assessment is obtained from the resident’s primary care physician, a psychiatrist and a member of the Hermitage’s medical staff. From these assessments, an interdisciplinary team of professionals from Nursing, Social Services, Rehabilitation, Dining, Activities and Pastoral Care develop and tailor a comprehensive care plan to fit the resident’s individual needs and to determine which therapeutic interventions will best serve the resident. The interdisciplinary team also conducts assessments annually as well as in the event any behavioral changes are observed.

Furthermore, we encourage increased familial involvement by inviting them to attend and participate in the quarterly care plan meetings. We welcome families to call or visit at any time or to request a family conference to discuss their loved one. We also continue to host special programs for families to provide education and offer emotional support during frustrating and difficult times.

Our objectives are accomplished through the interdisciplinary team, a full-time Program Coordinator, and a full-time and a part-time Activity Aide who continually work with direct care staff to assure that resident needs are met.

**Program Activities**

Key components of the SCN-HC are therapeutic programs and techniques that aim to improve residents' quality of life. Our therapeutic programming includes seven main categories:

--Horticulture Therapy through the use of a Stand-Up Garden™ (a wheel-chair accessible gardening cart)
--Aromatherapy
--Edenization (bringing living things such as plants and pets into the facility to live)
--Interactive Artwork & Art Therapy
Program Evaluation

Evaluation begins after each activity. A staff member documents the resident’s response by answering the following questions:
--Did the resident participate in the activity?
--Does the resident appear to enjoy the activity, as indicated through smiles, attention span, reduced noise level, and decline in inappropriate behavior?
--Are the goals of the Care Plan being met?
These responses are discussed at the weekly Care Team and Care Plan meetings by the interdisciplinary team to determines whether activities are continued or modified for an appropriate fit.

We also complete a modified five-page assessment quarterly to determine the impact of the programming on the resident's mood, behavioral symptoms, cognitive skills, physical condition and medications. In addition, we conduct a brief, written family survey three times a year.

We regularly encourage further family participation. A member of our interdisciplinary team places a phone call to the family once a month to update them on successes and goals. One-on-one conferences are available at any time; and we hold two resident/family dinners or receptions a year.

Case Study

Mrs. Y., 84, a resident on the SCN-HC unit, has been diagnosed with Alzheimer's disease, osteoarthritis, hypothyroidism, and degenerative joint disorder. Once believed "unreachable" or "unable to communicate with staff or her family," she is now able to interact with people.

Upon admission to the SCN-HC unit, she was easily frightened and startled, and would not allow anyone to touch her. By becoming familiar with Mrs. Y’s background and personality, the interdisciplinary team initiated programming that emphasized several of the unit’s special therapies. Mrs. Y. was slowly introduced to touch and gentle contact over a period of weeks by the massage therapist. Now, she appears more
relaxed, and not only enjoys, but also initiates gentle hand massage, shoulder rubs, and arm strokes. Through the use of daily grooming programs and one-on-one interactions, Mrs. Y now actively participates in her personal grooming. Prior to this interaction and programming, she was unable to lift her hands or use a comb. Mrs. Y. also enjoys the Stand-Up Garden™ and has been observed digging, patting dirt around the plants, and weeding. In addition, a quarterly family conference revealed Mrs. Y’s love of solitaire. In order not to overwhelm her, she works with a ½ deck of cards, lining them up appropriately by suit and number sequence. She also enjoys looking through catalogs, magazines and the newspaper. She has begun to initiate conversation in her own way with eye contact, tracking with her finger and the phrase, "Come here."

The first time Mrs. Y’s son saw her playing solitaire he was overwhelmed with emotion and commented, "You just never know (what's going to touch them), do you?" Mrs. Y.'s family continues to be amazed at the activities with which she has again involved herself.

Our innovative programming continuously touches on "Finding the right key to unlock the door of memories."

**Study Questions**

1. What does the staff learn about each resident, and how is the information put into practice?

2. How can enhanced quality of life be measured in this special population?

**References**


As can be seen from the content of this quarter's newsletter, this has once again been a busy time for us. We just had our final celebration for the Geriatric Interdisciplinary Team Training (GITT) 40 and 50 hour participants. A picture of some of our GITT graduates appears on page 13. We have gathered some interesting data on how these and other GITT graduates are using their training, and the "trickle down" effect is amazing. Many have taken on substantive roles within their facilities working as trainers on issues related to aging and have initiated new and innovative intervention programs within their facilities. Several have chosen to continue their training in geriatrics through a number of training options. This has been very rewarding for all involved.

We are completing the pre-taping segments for our upcoming national video-conference: Beyond the Barriers: Effective Breast Cancer Early Detection Strategies for Older Women. It is being presented with funding from the Virginia Health Quality Center (under contract from Health Care Financing Administration) and is co-sponsored with the Cancer Information Service (see announcement and information on page 15). If any facility is interested in having the videoconference presented in their local area, please contact Angela Rothrock at (804) 828-9060. Also, log on to our website for more information (http://views.vcu.edu/sahp/gerontology/vgec/).

We are also working on additional training for the Virginia Department of Social Services and just completed assisting the Virginia Guardianship Association with their annual conference. We have also set into motion all of the 10 objectives of the newly funded Virginia Geriatric Education Centers grant that began July 1st. These include work on our "Kids into Health Careers" initiative that is being completed with the cooperation of many entities including the Virginia Area Health Education Center and faculty from the Department of Psychology here at VCU. Additionally, our certified nursing assistant career ladder initiative is being developed jointly with the Virginia Department for the Aging, the Jefferson Area Board for Aging's Nursing Assistant Institute, the Virginia Center on Aging, and the Alzheimer’s Association of the National Capital Area (see...
related article in this newsletter). The next newsletter issues will contain additional information on these and the other initiatives.

Lastly, we have had some new staff added to the VGEC family and welcome these fine individuals: La'Quina Fulton, Sean Bates, Tracey Gendron, and Adrienne Martin. Two of these individuals have our M.S. in Gerontology degree and the other two are completing their degrees here in the M.S. in Gerontology program. One (Sean Bates) is also completing the Ph.D. in Health Related Sciences in the Gerontology specialization. Sadly, we say farewell to Wendy Boggs and Erica Motley who are graduating with their M.S. degrees in Gerontology and moving on to other positions, Wendy locally at Brighter Living Assisted Living and Erica in North Carolina. We will miss both of these excellent staff persons but know they will continue to make substantive contributions to the well-being of the elders whom they serve.

From the Director, Virginia Center on Aging

Edward F. Ansello, Ph.D.

I have recently returned from a visit to central Louisiana, sponsored by a consortium of churches and a hospital, where I spoke to a group of family caregivers one day and a group of physicians, nurses, and other healthcare workers the next. Between the two, I visited the adult day care center that the consortium maintained downtown in a handsomely refurbished former grocery store. A racially mixed group of some 20 older adults with various impairments was singing and keeping time with Gospel music being played on a piano. When this ended, there was a lull in activity before lunch, so I visited individually with several of the older participants.

A well-dressed, color-coordinated man (the word "dapper" comes to mind) scooted his wheelchair by his heels over to where I was sitting. I learned from the staff who introduced us that in the previous week's Academy Awards at the center he had been elected by everyone to win the Best Dressed Award. I introduced myself and we began to talk. His speech was articulate but hesitant, coming at times with the erratic rhythm of someone learning to work the clutch on a manual transmission. I don't know if he had had a stroke, was suffering early dementia, or what. Soon, by starts and stops, our conversation got around to woodworking, and he pointed to a picture in the center's newsletter of himself and some wooden trains he had carved and exhibited at the center. He discussed locomotives. He would stop at times with his mouth poised to say...
something and nothing came out. I would wait and eventually he'd complete the thought of the sentence. Near the end of our conversation (lunch had been announced) he stopped again in the middle of what he was saying. He seemed to be working his thoughts and trying to prime his speech, but nothing came. He looked at me with a look that said he expected me to jump in. I said nothing. He watched me. Eventually, he got his words and slowly he said, "People don't like to wait for me to finish. They don't have the patience. I can see in my mind the words I want to say, but I can't get them out fast enough." I had waited and his face said an unspoken "thank you."

I recounted the story later that day at my talk with the healthcare providers. The lesson seemed so relevant. How often do we take the time to listen? If the "exchange" cannot be accomplished in some specified time, do we increase the time allotted or go on to the next? Mine is not a profound message. It simply struck me that some of us have lived a full "Gift of Time," accumulating years of experiences that are uniquely our own, and yet we may not get the minutes of patience from others to tell our stories.

**From the Commissioner,**
**Virginia Department for the Aging**

Ann Y. McGee, Ed.D.

I want to encourage you to attend the upcoming Governor's Conference on Aging scheduled for September 17 and 18, 2001, at the Radisson Fort Magruder Hotel and Conference Center in Williamsburg, Virginia. The Department has partnered with the Virginia Polytechnic Institute and State University Cooperative Extension Family and Consumer Sciences to sponsor Virginia's first Governor's Conference on Aging since 1993. The goal of the Conference is to promote a positive and upbeat message about the aging process and identify and examine creative solutions for an aging society. This goal is reflected in the title of the Conference: Touching Lives with Creative Solutions.

The Governor's Conference on Aging will have four broad tracks which are designed to be inclusive of the many issues related to developing creative solutions for an aging society:

1. An intergenerational track that will include issues related to bringing
older and younger persons together for mutually beneficial activities, issues related to grandparents caring for their grandchildren, and issues related to multi-generational families.

2. A successful aging track that will feature a holistic approach to successful aging that blends the physical, mental, emotional, spiritual, and social aspects of the aging process. This track will include activities related to the safe management of prescription and over-the-counter medications, proper nutrition, exercise, and other activities that promote a long and healthy life.

3. A work and retirement track that will include the implications of an aging workforce for business and industry, changes in attitudes about work and retirement, the steps to achieve a financially secure and fulfilling retirement, and the potential impact on communities of older persons serving as volunteers and mentors.

4. A long-term care track that will include family and informal caregiving, consumer issues including fraud and scams, elder rights, and the identification and examination of creative solutions for assuring independence, dignity, and security.

The Conference will be targeted to health care and human services professionals, business leaders, state and local government officials, policy makers, older citizens, and others interested in examining creative solutions for addressing the impact of an aging population on the Commonwealth and the nation. Williamsburg is a location that will attract participants from Virginia and around the country who may choose to spend the weekend enjoying the historic district and other nearby attractions and then attend the Conference. The Conference will be limited to 500 participants.

Registration materials will be available in early Summer. If you would like to have your name added to the mailing list to receive registration information, please contact Jane Todd, Virginia Tech Division of Continuing Education, at 540-231-2014 or send her an e-mail message at janetodd@vt.edu. You may also visit the conference web site at www.conted.vt.edu/aging.htm.
La'Quina Fulton

La'Quina Fulton joined the Virginia Geriatric Education Center in February as a Research Specialist. She is responsible for various projects connected to the 2000-2005 grant and assists other VGEC staff members as well.

La'Quina is a native of South Carolina, and received her Bachelor of Arts degree in Psychology from the University of South Carolina in May 2000. She is currently a master's student in the Department of Gerontology at Virginia Commonwealth University with a concentration in Public Policy and Administration. La'Quina's interest in the elderly and aging studies developed through personal family experiences, being reared by her maternal grandparents, as well as through undergraduate coursework related to the field of aging. Once she has received her master's degree, La'Quina hopes to pursue a career in public policy at the federal level and to advocate for elder rights.

In her free time, La'Quina enjoys being with friends and family, traveling, collecting antique toys, and listening to various types of music.

Adrienne Martin

Adrienne Martin joined the Virginia Geriatric Education Center in March as a Research Specialist. Adrienne will be working part-time, assisting with projects connected to the 2000-2005 grant.

Adrienne received her Bachelor of Arts in Sociology from the University of Connecticut (UCONN) in 1996. She then worked at a work-life consulting company for three and a half years. Adrienne's responsibilities included providing eldercare and disability resources and referrals to employees of client companies and managing a team of research specialists. She is now a full-time student in the Masters of Gerontology program at VCU.

Her interest in aging began while spending time with grandparents as a child. She also participated in volunteer activities at local nursing homes as a teenager. She then completed an internship while at UCONN that
allowed her the opportunity to spend time with elderly patients in a small rural hospital under the direction of the hospital social worker. Although unsure of which path she would take, she knew a goal in her professional life would be to contribute to addressing the needs of the aging population.

After researching Gerontology degree programs, Adrienne relocated from Boston, Massachusetts to Richmond to attend graduate school at VCU. She is studying Gerontology with a focus in Healthcare Organization and Planning. She would like to be a long-term care administrator following her anticipated graduation in May 2002. She now lives in the Fan Historic District of Richmond. She especially appreciates the southern weather and hospitality. When not busy with school and her part-time jobs, she likes to spend time with family and friends, traveling, running, rollerblading, spinning, and reading.

**Focus on the Virginia Center on Aging**

**Jason Rachel**

Jason Rachel is the Public Relations Assistant Specialist for the Virginia Center on Aging (VCoA). He joined the VCoA in November 2000. As the Editor of Age in Action, Jason strives to create newsletters that are informative, interesting, and attractive. These same goals apply to his work on VCoA's web page (http://views.vcu.edu/ vcoa), which features current Elderhostel course listings, detailed information regarding the Alzheimer's and Related Diseases Research Award Fund, a complete listing of videos available for lending, sources for age-related data, and information about other VCoA projects. Jason also manages VCoA's film library, assists in the promotion of VCoA's Elderhostel and lifelong learning programs, and represents VCoA at public awareness and education functions.

Jason graduated from Virginia Commonwealth University in December 2000, earning a Master of Science in Gerontology. Before arriving at VCoA, he worked in assisted living facilities as both a marketing counselor overseeing the marketing efforts and also as an assisted living coordinator overseeing the staffing for the community. Currently, Jason is an adjunct faculty member of the VCU Department of Gerontology, co-instructing in Long-Term Care Administration, a member of the Gerontological Society of America, the Southern Gerontological Society, and Senior Networking.
Jason grew up in Northern Virginia and has made his home in Richmond since 1992. In his spare time, he enjoys sailing the Chesapeake Bay, tasting new wines, and spending time with family and friends.

Statewide, Dementia-Related Training Initiative Involves Many Collaborating Partners

Constance Coogle, Ph.D.

The Virginia Geriatric Education Center (VGEC), the Virginia Center on Aging (VCoA), and the Virginia Department for the Aging (VDA) have converged in partnership with the Alzheimer's Association network of Chapters and the Nursing Assistant Institute to provide dementia-related training across the Commonwealth of Virginia. A remarkable confluence of events gave rise to this collaboration. First, VDA received funding from the US Administration on Aging, as part of the Alzheimer's Disease Demonstration Grants to States Project, and contracted with the Nursing Assistant Institute to provide training for nursing assistants (NAs) working in residential facilities. At the same time, Virginia's General Assembly provided an appropriation (through the Virginia Department of Social Services) to the Alzheimer's Association of chapters for the delivery of a program that provides hands-on, dementia-specific training to 1,000 long-term care providers and state inspectors. This seemed like a natural partnership. Finally, when the VGEC decided that Alzheimer's disease would be the first-year focus of its Case Management Initiative (funded under a million dollar grant from the Bureau of Health Professions, HRSA, DHHS), the stage was set for a three-way partnership that would be of immeasurable benefit to the State. Moreover, since my own passion is Alzheimer's disease education, I jumped at the chance to evaluate every aspect of the training that was being planned.

Essentially, long-term care organizations will be given the opportunity to take advantage of three jointly coordinated training programs. First, they are encouraged to register their staff for 12 hours of training developed by the National Capital Area Chapter (formerly the Northern Virginia Chapter). A training curriculum, The Person Centered Care: Skill Building for Caregivers of People with Dementia, will be offered to professional and para-professional caregivers across the state beginning in
May. The Nursing Assistant Institute will prepare selected NAs who have participated in the training program to provide in-services for co-workers back at their home facilities. The in-service instruction will focus on three important skills that NAs need to know when caring for residents with Alzheimer's and related diseases. The NA instructors will also help their peers apply the new information and skills on the job. Finally the VGEC will offer job-focused training for NAs who successfully complete both the person centered care training and NAI train-the-trainer components of the collaboration. This aspect of the partnered project concentrates on enhancing the work environment to promote balance between desired residential services and the provision of those services. Pastoral care professionals will help NAs find meaning in connecting and communicating with residents and families using interactive role playing on the art of providing compassionate, creative, and adaptive responses to residents with dementia. NAs will then practice basic communication and inter-personal caring skills. Loss and bereavement issues will also be explored within the context of a stress reduction model.

For more information on the person centered care training, contact Kelly French, Training Coordinator for the Alzheimer's Association of the National Capital Area (866/259-0042; kelly.french@alz.org); for more information on the subsequent NA training, contact Cheryl Cooper, Coordinator of the Nursing Assistant Institute (804/817-5242; ccooper@jabacares.org); and for more information about the VGEC training, contact Angela G. Rothrock, Senior Project Coordinator (804/828-9060; s2agroth@titan.vcu.edu). For more information on how the three training opportunities have been integrated and an overview of the entire collaboration, go to http://views.vcu.edu/sahp/gerontology/vgec/alzheimers

Dr. Coogle, VCoA's Assistant Director of Research, is also the Director of Evaluation for the VGEC and President of the Greater Richmond Chapter of the Alzheimer's Association.
Rita Jablonski Receives a Two-year Scholarship from the John A. Hartford Foundation

Virginia Geriatric Education Center

On January 15, 2001, Rita Jablonski was notified that she was a recipient of a $100,000 two-year scholarship from the John A. Hartford Foundation's Building Academic Geriatric Nursing Capacity Scholarship Program through the American Academy of Nursing. The scholarship will provide two years of salary support, allowing Ms. Jablonski to return to school and complete her doctoral studies.

The John A. Hartford Foundation's mission is "to increase the nation's capacity to provide effective and affordable elder care, and to concentrate on the practice of health care as the point where policy becomes reality for every older American" (Mission & Philosophy: 1983-1997). One of the ways it has sought to pursue this mission is through the education and training of health professionals interested in providing excellent elder care. Recently, the foundation joined the American Academy of Nursing in offering 10 pre-doctoral and 10 post-doctoral scholarships. Ms. Jablonski received one of the 10 pre-doctoral scholarships.

Ms. Jablonski's study, "Elder Transfer: From Nursing Homes to Emergency Departments," will describe how registered nurses and licensed practical nurses make and influence clinical decisions to transfer (or not to transfer) elders to emergency departments. She intends to use her findings in future studies that identify the clinical indicators and outcomes of excellent nursing home care. Ms. Jablonski is also interested in developing interventions that improve the care of cognitively impaired elders by unlicensed and licensed caregivers.

Ms. Jablonski is participating in a joint program between Virginia Commonwealth University and the University of Virginia and is concurrently enrolled in the gerontology program at VCU and the doctoral program at UVA. Upon completing her doctoral studies, Ms. Jablonski will integrate her roles as clinician, researcher, and educator in an academic nursing program that actively seeks to incorporate the needs of an aging population into the curriculum.

In addition to her studies, Ms. Jablonski teaches undergraduate and graduate students at the VCU School of Nursing. Ms. Jablonski is an active participant in the Geriatric Interdisciplinary Team Training program through the Virginia Geriatric Education Center. She represents the School of Nursing on the Consortium on Successful Aging and is a...
member of the Medical Advisory Council to the Alzheimer's Association Board of Directors, Greater Richmond Chapter. She also assists the Virginia Geriatric Center with the "Kids Into Health Careers" program, where she talks to high school students about the profession of nursing and serves as a successful nurse role model.

**Book Review**

Kathleen Watson


As a student of Gerontology, I have been very interested in the subjects of Alzheimer's disease (AD) and the different causes of dementia. In my studies here in the Master's Program in Gerontology at Virginia Commonwealth University, I have been exposed to various perspectives on dementia, and the different ways to interact with and treat Alzheimer's patients. The advent of several pharmacological therapies, and ongoing research on new treatments, have given hope that there will be a cure for this disease that robs an individual of his or her personality and leaves the physical likeness of the person behind to serve as a painful reminder of who this person once was.

When interacting with a dementia patient, it is human nature to attempt to remind the person of his current surroundings; a widely used method of communication used with AD patients is known as Reality Orientation. In my own experience, I remember how I would often remind my great-aunt, "No, it's 1998, and you are 94, not 62." We would have this conversation a few times during the course of a visit, and in retrospect, it was probably as frustrating for her as it was for me. Unfortunately, it was only after my great-aunt's death that I had the opportunity to read Naomi Feil's book, The Validation Breakthrough. Feil, who has had a long career as a geriatric social worker, developed a method of communicating with dementia patients that is known as Validation Therapy.

Validation is based on the idea that dementia patients have a reason for the behaviors that they display, and that these behaviors stem from life tasks and unresolved emotions from earlier in their lives. In their minds, this is unfinished business that must be resolved before they can let go and face the end of life peacefully. This is called Resolution, and it takes place in four stages: Malorientation, Time Confusion, Repetitive Motion, and Vegetation. Those in the Malorientation and Time Confusion stages often struggle with unexpressed emotions from the past. Those in the Repetitive Motion stage often center their behavior on unmet human
needs, such as love, usefulness or the expression of raw emotions. Disoriented dementia patients will attempt to resolve their unfinished emotional business by retreating into the past, often projecting images and people from the past onto current people and places in their lives. Feil believes that when those who work closely with these patients understand this, they can learn how to better communicate with the individual in a way that is non-threatening and not frustrating to either party. Often, a connection can be made and the individual will actually be in better touch with reality as a result. Feil believes that this can actually slow a dementia patient's progression into the final, Vegetative stage.

There are 14 steps in Validation Therapy; the first six are methods found to be most effective when used with patients in the first stages of Resolution. These methods focus on communicating and building trust between the patient and the caregiver. The last eight methods are best used with patients who are in the most advanced stages of Resolution, and focus on communication through physical techniques, such as maintaining eye contact, using touch, and mirroring. Mirroring is considered by some as an unconventional approach. It involves mirroring the motions of the patient in order to establish a connection: if the person is pacing, the caregiver paces with him or her. If the patient is hitting the table, the caregiver hits the table in rhythm with the patient. Often, the person is repeating a motion that is somehow tied to his or her past; a career carpenter may be "hammering" on the table, for example. If the caregiver can get into the rhythm of what the patient is doing, it often enables him or her to break into the world of one who is in the Repetitive Motion stage and establish a rapport.

This book gives a powerful insight into how a cognitively impaired person's mind works and is a valuable tool for anyone whose life has been touched by a dementing disorder. Those who work with the cognitively impaired, such as any staff member in a long-term care community, can benefit from knowing about Validation because it contributes to a better understanding of the demented person's actions. Loved ones and caregivers can benefit from The Validation Breakthrough by helping them to better deal with their loved one's deficits and enhance their communication, which in turn will enhance the time that they have left together. Naomi Feil gives the reader a new perspective on dementing disorders, an interesting read, as well as a message of hope.
Virginia Elder Rights Coalition Receives Partnerships in Law and Aging Grant

Harris Spindle, Virginia Association of Area Agencies on Aging

The Virginia Elder Rights Coalition has been awarded one of the 10 Partnerships in Law and Aging Program grants. These grants are co-sponsored by the Albert and Elaine Borchard Foundation Center on Law and Aging and the Marie Walsh Sharpe Endowment of the American Bar Association Fund for Justice and Education. The American Bar Association (ABA) Commission on Legal Problems on the Elderly administers these grants. The ABA received 109 grant proposals "from 31 states and a wide range of applicants."

This grant award will fund the Virginia Elder Rights Coalition's development of a Virginia-specific Elder Rights Notebook and Website to provide readily accessible and replicable information on elder rights to professionals in the legal and aging networks in Virginia, in order to enhance the quality of life for present and future generations of older adults.

The Virginia Poverty Law Center and the Virginia Association of Area Agencies on Aging, on behalf of the Elder Rights Coalition, will administer the Project. This Project has broad based support from the legal and aging communities, as well as from other organizations, including The Virginia Bar Association, Virginia Center on Aging, School of Social Work at Virginia Commonwealth University, local legal services offices, the United States Department of Justice (Eastern District of Virginia) and the American Civil Liberties Union of Virginia. Additionally, DynCorp, a Reston based international corporation, will provide a significant portion of the manual production.

Elderhostel Short Programs

We have planned the following Short Programs for our Virginia Commonwealth University Elderhostel locations at Hampton and Natural Bridge. If you are interested in these programs, please call Elderhostel, Inc., toll-free at (877) 426-8056.

SHORT PROGRAMS IN HAMPTON

June 10-13, 2001
“From Sail to Steam: The US Navy”
Study the great ships, their missions and battles, and the dynamic heroes who established the proud traditions of the US Navy. Field trips include an extended boat cruise to examine the world’s largest naval base, aircraft carriers, nuclear subs and guided missile cruisers; tours of the Hampton Roads Naval Museum and the USS Wisconsin in Norfolk; an afternoon at the Mariners Museum in Newport News.

Elderhostel reference #46890-0610-01

June 13-16, 2001
“The Star-Spangled Banner”

In honor of Flag Day, June 14, explore the myths and realities of Old Glory, examine its times of peril and victory, and survey its evolution into the greatest symbol of the “land of the free and the home of the brave.” Highlights include a field trip to colonial Yorktown, a three-hour boat cruise of Hampton Roads, optional tours of the Casemate Museum, an evening concert by the US Continental Army Band, and a patriotic musical performance of “Liberty Call.”

Elderhostel reference #46890-0613-01

*Accommodations for Hampton programs are at the Chamberlin Hotel on the active military base at Ft. Monroe, easily reached from I-64. Hotel overlooks Chesapeake Bay.*

**SHORT PROGRAMS AT NATURAL BRIDGE**

June 17-20, 2001
“In Jefferson’s Footsteps”

Study the less public facets of Jefferson’s life, career and personality. Instructors who are Jefferson scholars emphasize his architectural creativity, scientific interests, ambassadorship, educational beliefs and agricultural endeavors. Afternoon field trip on Monday to Poplar Forest, Jefferson’s octagonal country villa and plantation. All-day field trip on Tuesday to Monticello and UVA, with lunch at historic Michie Tavern. Evening concert features period music with authentic instruments.

Elderhostel reference #46895-0617-01

*Accommodations for Natural Bridge programs are at the Natural Bridge Inn and Conference Center, located in a spectacular mountain valley setting on US 11, just off I-81 south of Lexington.*
Summer 2001 Courses

10691 001 GRTY 607 Field Study in Gerontology  Parham TBA

10692 901 GRTY 608 Advanced Topics in Problems, Issues, and Trends  Cotter Mon & Thurs  LYONS B-2  6:00-8:40 pm

10694 001 GRTY 642 Praticum: Geropsychology  Parham TBA

11969 002 GRTY 691 Topical Seminar  Staff TBA

10695 901 GRTY 691 Topic: Mkt Concepts & Strategies for Gerontology Program  Cowles Tues & Thurs  BUSN 2128  6:00-8:40 pm  (May 29 - July 19)

10696 801 GRTY 692 Independent Study  Parham TBA

10697 802 GRTY 692 Independent Study  Harkins TBA

10698 803 GRTY 692 Independent Study  Cotter TBA

10699 804 GRTY 692 Independent Study  Osgood TBA

10700 805 GRTY 692 Independent Study  Welleford TBA

10701 001 GRTY 798 Thesis  Parham TBA

10702 001 GRTY 799 Thesis  Parham TBA

VIDEO COURSES

10687 901 GRTY 601 Biology & Physiological Aging  Harkins TBA

10688 901 GRTY 605 Social Gerontology  Osgood TBA
Virginia Commonwealth University
Department of Gerontology
Fall 2001 Courses

12490 001 GRTY 410 Introduction To Gerontology  Rothrock Tues & Thursday
11:00 - 12:15     BUSN 1106

16337 901 GRTY 410 Introduction To Gerontology  Osgood  Tuesday
6:00PM - 8:40PM RANDM

12491 001 GRTY 501 Physiological Aging                 Harkins  Tuesday
1:00PM - 3:40PM SANGER

12493 901 GRTY 602 Psychology of Aging               Welleford Monday
7:00PM - 9:40PM RANDM

12494 901 GRTY 603 Research and Methods            Owens  Wednesday
6:00PM - 8:40PM LYONS

12495 901 GRTY 605 Social Gerontology                Osgood  Thursday
6:00PM - 8:40PM RANDM

12496 901 GRTY 606 Aging and Human Values                Welleford Tuesday
7:00PM - 9:40PM RANDM

12498 901 GRTY 615 Aging & Mental Disorders                  Wood  Thursday
6:00PM - 8:40PM SANGER
VIDEO COURSES

12492 001 GRTY 601 Biol. & Physio Aging   Harkins  TBA

INTERNET COURSES

GRTY 410 Introduction to Gerontology Harkins/Welleford TBA

National Videoconference
Beyond the Barriers:
Effective Breast Cancer Early
Detection Strategies for Older Women

The Virginia Geriatric Education Center, in partnership with
Virginia Health Quality Center and the Cancer Information Service,
will host a live national satellite
videoconference on June 26th from 1:00 pm to 3:30 pm (Eastern).

For More Information:
1.888.794.0904
http://views.vcu.edu/sahp/gerontology/vgec/breastcancer

Presenters will include:

David X. Cifu, MD
Chair and Professor
VCU Department of Physical Medicine and Rehabilitation
Medical Director, Rehabilitation and Research Center
School of Medicine
Medical College of Virginia Campus
Virginia Commonwealth University Health System

Elmer E. Huerta, MD, MPH
Cancer Prevention Specialist
Washington Cancer Institute
Washington Hospital Center

Wanda K. Jones, Dr. PH
Deputy Assistant Secretary for Health
Women's Health
U.S. Department of Health and Human Services

Annette E. Kussmaul, MD, MPH
Medical Officer
Health Care Financing Administration
Division of Clinical Standards & Quality
U.S. Department of Health and Human Services

Worta McCaskill-Stevens, MD
Program Director in the Community
Oncology and Prevention Trials Research Group
Division of Cancer Prevention
National Cancer Institute

Susan Miesfeldt, MD
Assistant Professor of Clinical Internal Medicine
Hematology/Oncology
University of Virginia

Thomas J. Smith, MD
Professor of Medicine
Chair, Division of Hematology/Oncology
School of Medicine
Medical College of Virginia Campus
Virginia Commonwealth University Health System

Brought to you by:

Virginia Health Quality Center
Virginia Geriatric Education Center
Cancer Information Service

Calendar of Events

June 1, 2001
Aging with Attitude: Keeping Men Young. Southwest Society on Aging 2001 Oklahoma State Forums. OSU Stillwater Campus. For more info contact loriann@okstate.edu

June 4-5, 2001
Seventh Annual Conference of the Virginia Coalition for the Prevention of Elder Abuse. Virginia Beach Conference and Resort Center, Virginia Beach, VA. For more info contact (757) 382-8397

June 28-July 1, 2001
Care/Case Management: Who Needs It? 5th International Care/Case Management Conference. Presented by the Learning Center of the American Society on Aging. Sheraton Wall Centre, Vancouver, British Columbia, Canada. For info contact (415) 974-9600, info@asaging.org or www.asaging.org

July 1-6, 2001

July 7-11, 2001
2001: An Aging Odyssey. 26th Annual Conference of the National Association of Area Agencies on Aging. Boston Park Plaza Hotel, Boston, MA. For info contact (202) 296-8130 or www.n4a.org

July 9-11, 2001
Odyssey 2001: Looking Ahead. 18th Annual Summer Series on Aging. Hyatt Regency Hotel, Lexington, KY. For info contact (859) 257-8301 or mumsch@pop.uky.edu

July 15-18, 2001
New Directions in Alzheimer’s Care. 10th National Alzheimer’s Disease Education Conference from the Alzheimer’s Association. Hyatt Regency
Chicago, Chicago, IL. For info contact (312) 335-5790 or www.alz.org

**August 13-16, 2001**
Florida Conference on Aging 2001 - Connections and Directions. Wyndham Resort and Spa, Ft. Lauderdale, FL. For info contact (850) 222-8877 or www.fcoa.org

**September 17-18, 2001**
Governor’s Conference on Aging: Touching Lives with Creative Solutions. Radisson Fort Magruder Hotel and Conference Center, Williamsburg, VA. For info contact (540) 231-2041 or www.conted.vt.edu/aging.htm

**October 4-5, 2001**
Aging Well in Rural Areas. 2001 West Virginia Conference on Aging. Presented by West Virginia University Center on Aging. Lakeview Scanticon Resort, Morgantown, WV. For info contact (304) 293-0628 or www.hsc.wvu.edu/coa/

**November 9, 2001**
Fraud, Scams & Slams. Southwest Society on Aging 2001 Oklahoma State Forums. Norman Regional Hospital. For more info contact loriann@okstate.edu

**November 15-18, 2001**
2001-A Gerontological Odyssey: Exploring Science, Society and Spirituality. The Gerontological Society of America 54th Annual Scientific Meeting. Chicago Hilton and Palmer House, Chicago, IL. For info contact (202) 842-1275 or geron@geron.org