



END VETERAN HOMELESSNESS

Actions speaks louder than words. In 2016, a group of Kansas City combat Veterans who were frustrated by the rampant homelessness within the Veteran population combined their skills of problem-solving and established Veteran Community Project (VCP), a 501(c)(3) nonprofit corporation to identify funds and resources to tackle the growing problem.

THEIR PLAN TAKES SHAPE

Armed with the strength and support of the community, VCP designed and built a village of 49 tiny houses and a "base camp" that includes medical,

dental, and veterinarian offices, a fellowship hall, and other support services. Single residency homes are 240 square feet; family homes are 320 square feet and are designed to sleep seven. All homes are fully furnished with new furniture, appliances and household goods which become the personal property of each resident. They also receive on-site, wrap-around services that thoroughly address the underlying causes of each Veteran's homelessness.

HOW YOU CAN HELP

It takes a community to build a village! VCP is 100% funded by contributions from the community.



YOUR DONATIONS SUPPORT:

- · Housing with dignity for Veterans in need
- Access to expert one-on-one case management for Veteran residents and walk-ins
- Physical and behavioral healthcare

VETER ANS

VISIT THE VCP OUTREACH CENTER TO:

- Get assistance navigating your VA benefits
- · Receive a snack pack, box of food or hygiene kit
- Get assistance with emergency rent or utility funds
- Meet with a case manager to discuss your unique needs





VOL. 17, ISSUE 6

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COVER STORY

Skilled Care When You Need It

By OHM Staff

Do you know what to look for when you need to consider skilled care for yourself or a loved one? Learn the differences and benefits of choosing a short- or long-term care provider.

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s I think about what *Our Health Matters™* has accomplished this year, I'm amazed and grateful for this opportunity to be a part of your life. You mean so much to us. Our brand tagline, "your guide to healthy living," drives our passion to keep you abreast of trending and vital health news and information. We are committed to providing diverse individuals and families in our community with vital and helpful resources to support you in your pursuit to maintain optimum health.

We are all part of this human family. No matter where we come from or what our differences are. I believe we all want to live healthy and fulfilled lives, where we live, work, learn, play and worship.

We thank our advertisers who continue to support this work and who are continually creating programs and services to meet your physical, mental and spiritual needs. And we thank you for being a loyal reader.

There are times in a person's life when an unexpected injury or illness may require skilled care. In this edition we provide information and resources on short-term and long-term care. You will also learn what your nursing home rights are in Missouri and in Kansas and that home health agencies are required to follow the Client Bill of Rights and provide a copy to their clients.



Our recent special edition, Black Men Speak: Health, Strength and Hope is now available online at kcourhealthmatters.com.

Be Healthy and Stay Healthy,

Ruth Ramsey, Publisher and CEO

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Count on all of us to care for all of you, in all the ways you need.

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NURSING HOME RESIDENTS' RIGHTS



Residents of nursing homes have rights that are guaranteed by the federal Nursing Home Reform Law. The law requires nursing homes to "promote and protect the rights of each resident" and stresses individual dignity and self-determination. Many states also include residents' rights in state law or regulation.

Right to a Dignified Existence

- · Be treated with consideration, respect, and dignity, recognizing each resident's individuality
- · Freedom from abuse, neglect, exploitation, and misappropriation of property
- · Freedom from physical or chemical restraints
- · Quality of life is maintained or improved
- · Exercise rights without interference, coercion, discrimination, or reprisal
- · A homelike environment, and use of personal belongings when possible
- · Equal access to quality care
- · Security of possessions

Right to Self-Determination

- · Choice of activities, schedules, health care, and providers, including attending physician
- · Reasonable accommodation of needs and preferences
- Participate in developing and implementing a person-centered plan of care that incorporates personal and cultural preferences
- Choice about designating a representative to exercise his or her rights
- Organize and participate in resident and family groups
- Request, refuse, and/or discontinue treatment

Right to be Fully Informed of

- The type of care to be provided, and risks and benefits of proposed treatments
- · Changes to the plan of care, or in medical or health status
- Rules and regulations, including a written copy of residents' rights
- Contact information for the long-term care ombudsman program and the state survey agency
- State survey reports and the nursing facility's plan of correction
- Written notice before a change in room or roommate
- Notices and information in a language or manner he or she understands (Spanish, Braille, etc.)

Right to Raise Grievances

- · Present grievances without discrimination or retaliation, or the fear of it
- · Prompt efforts by the facility to resolve grievances, and provide a written decision upon request
- To file a complaint with the long-term care ombudsman program or the state survey agency

Right of Access to

- Individuals, services, community members, and activities inside and outside the facility
- Visitors of his or her choosing, at any time, and the right to refuse visitors
- Personal and medical records
- His or her personal physician and representatives from the state survey agency and long-term care ombudsman program
- · Assistance if sensory impairments exist
- · Participate in social, religious, and community activities

Rights Regarding Financial Affairs

- · Manage his or her financial affairs
- Information about available services and the charges for each service
- Personal funds of more than \$100 (\$50 for residents whose care is funded by Medicaid) deposited by the facility in a separate interest-bearing account, and financial statements quarterly or upon request
- Not be charged for services covered by Medicaid or Medicare

Right to Privacy

- · Regarding personal, financial, and medical affairs
- Private and unrestricted communication with any person of their choice
- During treatment and care of personal needs

Rights During Discharge/Transfer

- Right to appeal the proposed transfer or discharge and not be discharged while an appeal is pending
- Receive 30-day written notice of discharge or transfer that includes: the reason; the effective date; the location going to; appeal rights and process for filing an appeal; and the name and contact information for the long-term care ombudsman
- Preparation and orientation to ensure safe and orderly transfer or discharge
- Notice of the right to return to the facility after hospitalization or therapeutic leave

GET HELP

For more information about Residents' Rights, or questions or concerns, contact your Long-Term Care Ombudsman Program. The Long-Term Care Ombudsman Program promotes and protects the rights of residents in licensed long-term care facilities. Visit health.mo.gov/seniors/ombudsman for more information.



Missouri Department of Health and Senior Services
Long-Term Care Ombudsman Program
P.O. Box 570, Jefferson City, MO 65102
(800) 309-3282 • LTCOmbudsman@health.mo.gov

Enjoy a Happier, Healthier Life

Older adults who are lonely and socially isolated are at greater risk for heart disease, depression, dementia and memory loss.

veryone needs social connections to survive and thrive. But as people age, they often find themselves spending more time alone. Being alone may leave older adults more vulnerable to loneliness and social isolation, which can affect their health and wellbeing. Studies show that loneliness and social isolation are associated with higher risks for health problems such as heart disease, depression and dementia and memory loss.

If you are in poor health, you may be more likely to be socially isolated or lonely. If you are socially isolated or feeling lonely, it can put your physical and mental health at risk. Adults who are lonely or socially isolated are less healthy, have longer hospital stays, are readmitted to the hospital more often, and are more likely to die earlier than those with meaningful and supportive social connections.

What is the difference between loneliness and social isolation?

A growing number of adults age 65 and older are socially isolated and regularly feel lonely.

Loneliness and social isolation are different but related. Loneliness is the distressing feeling of being alone or separated. Social isolation is the lack of social contacts



and having few people to interact with regularly. You can live alone and not feel lonely or socially isolated, and you can feel lonely while being with other people.

Older adults are at higher risk for social isolation and loneliness due to changes in health and social connections that can come with growing older, hearing, vision, and memory loss, disability, trouble getting around, and/or the loss of family and friends.

How can feeling lonely or being isolated affect older adults' health?

People who are socially isolated or lonely are more likely to be admitted to the emergency room or to a nursing home. Social isolation and loneliness also are associated with higher risks for:

- · High blood pressure
- Heart disease
- Obesity
- Weakened immune function
- Anxiety
- Depression
- Cognitive decline
- · Dementia, including Alzheimer's disease
- Death

How can you know your risk for loneliness and social isolation?

People who are particularly at risk of loneliness and social isolation are those who are isolated due to the illness of a loved one, separation from friends or family, loss of mobility, worsening vision or hearing problems, disability, or lack of mobility or access to transportation. You also may be at greater risk if you:

- Live alone
- · Can't leave your home
- Had a major loss or life change, such as retirement or the death of a spouse or partner
- · Struggle with money
- · Are a caregiver
- Have psychological or cognitive challenges or depression
- Have limited social support
- · Have trouble hearing
- Live in a rural, unsafe, and/or hard-to-reach neighborhood
- Have language barriers where you live

- Experience age, racial, ethnic, sexual orientation, and/or gender identity discrimination where you live
- Are not meaningfully engaged in activities or are feeling a lack of purpose
- People with hearing loss may find it hard to have conversations with friends and family, which can lead to less interaction with people, social isolation, and higher rates of loneliness.

If you or someone you know is experiencing isolation or loneliness here are a few ideas to help you stay connected.

Ideas for staying connected

- Look up community organizations that have resources and activities that you enjoy.
- Restart an old hobby or take a class to learn something new. You might have fun and meet people with similar interests.
- Schedule time each day to stay in touch with family, friends and neighbors in person, by email, social media, voice call or text. Talk with people you trust and share your feelings.
 Suggest an activity to help nurture and strengthen existing relationships. Send letters or cards to keep up friendships.
- Learn new technology devices and apps to participate in community conversations and learn video games.
- If you're not tech-savvy, sign up for an online or in-person class at your local public library or community center to help you learn how to use email or social media.
- Consider adopting a pet if you are able to care for one.
 Animals can be a source of comfort and may also lower stress and blood pressure.
- Stay physically active and include group exercise, such as joining a walking club or working out with a friend.
 Adults should aim for at least 150 minutes (2 1/2 hours) of activity a week that makes you breathe hard.
- Introduce yourself to your neighbors.
- Find a faith-based organization where you can deepen your spirituality and engage with others in activities and events.
- Check out resources and programs at your local social service agencies, community and senior centers and public libraries.
- Join a cause and get involved in your community.

SOURCE: NIH National Institute on Aging (NIA).

Custodial Care vs. Skilled Care

Long-term care (LTC) is for a beneficiary who needs someone to help them with their physical or emotional needs for an extended period of time. There are two types of LTC: custodial care and skilled care. Skilled care refers to skilled nursing or rehabilitation services, provided by licensed health professionals like nurses and physical therapists, ordered by a doctor. Custodial care refers to services ordinarily provided by personnel like nurses' aides.





Custodial Care

- Consists of any non-medical care that can reasonably and safely be provided by non-licensed caregivers.
- Can take place at home or in a nursing home.
- Involves help with daily activities like bathing and dressing. In some cases where care is received at home, care can also include help with household duties such as cooking and laundry.
- May be covered by Medicaid if care is provided in a nursing home setting and not at home.

Skilled Care

- Is medically necessary care that can only be provided by or under the supervision of skilled or licensed medical personnel.
- Can be more costly than custodial care and can take place at home or in a skilled nursing facility.
- Examples include physical therapy, wound care, intravenous injections, catheter care, and more.
- May be covered by Medicaid. State Medicaid programs have different rules that determine when skilled care is medically necessary and payable by Medicaid.





Regaining independence is key to recovery after an injury or illness.

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University Health Lakewood Acute Medical Rehab accepts most commercial insurance, Medicare and Medicaid.







here are times when someone may experience an injury or a medical condition that requires the care and support of a skilled nursing facility. Depending on their medical condition, they may require long-term or short-term care. With an understanding of the types of services available and the benefits they provide, an individual can start recovery or continue to improve their quality of life.

Licensed and skilled rehabilitative care can make a difference in someone's life by helping them regain their strength and heal after an illness or injury so they can return to or maintain optimum health. Skilled nursing facilities provide care to patients needing long-term or short-term care. They offer a wide range of services to assist with wound care, recovery from hip or knee replacement, strokes and other conditions that require physical therapy. The following information may also be useful for younger people with disabilities or illnesses who require skilled care.

WHAT IS SHORT-TERM CARE?

Short-term care is temporary medical aftercare following a surgery, injury, illness or other medical condition that is expected to improve. Services typically last several weeks, a few months, or sometimes longer, depending on the severity of the condition being treated.

SHORT-TERM CARE IS GOAL-ORIENTED

patient's doctor prescribes temporary medical aftercare (short-term care) following a surgery, injury, illness, or other medical condition that is expected to improve. For patients in need of rehabilitation services, short-term care aims to return them home as soon as medically possible. Physical therapy is designed to relieve pain, restore function and enhance health, while providing individualized treatment programs that can be continued at home. Occupational therapy strives to equip patients with the necessary skills—and often, customized tools—for proper self-care, such as dressing, personal hygiene and cooking.

SHORT-TERM CARE PROVIDES MEDICAL AND CUSTODIAL SERVICES

In addition to wound care, the dispensing of medication and rehab services such as physical therapy, occupational therapy and speech therapy (in the case of stroke), skilled nursing facilities also offer custodial care. Skilled nursing professionals help patients with dressing, bathing, using the toilet, eating and mobility until the patient recovers their independence.

WHAT IS LONG-TERM CARE?

Long-term care means helping people of any age with their medical needs or



Skilled nursing facilities are staffed 24/7 by medical professionals trained to deal with any health issues that might arise, giving loved ones and patients peace of mind.

LONG-TERM CARE OFFERS COMPREHENSIVE TREATMENT

Long-term care involves medical, therapeutic and personal care services for those with physical or mental conditions that limit their ability to function independently. In addition to addressing medical needs, skilled nursing facility staff can assist with custodial care such as personal hygiene, eating and getting in and out of beds and chairs. While rehabilitation services such as physical and occupational therapy are the cornerstones of short-

daily activities over a long period of time. Long-term care can be provided at home, in the community, or in various types of facilities.

Long-term care is ideal for seniors or others with chronic or progressive medical conditions who need skilled nursing services

indefinitely when the level of care exceeds what loved ones can provide on their own. These types of conditions include Parkinson's disease, permanent disabilities, dementia or a debilitating stroke.

term care, they are also offered to patients receiving long-term care in order to relieve pain and discomfort and to improve mobility and functionality as much as possible.

Skilled Care and In-Home Therapies:

PHYSICAL THERAPY

- Post-operative return to function
- Orthopedic injury treatment
- Therapeutic strength training
- · Ambulation, mobility and transfer training
- Balance and fall prevention training
- Sport-specific injury rehabilitation

OCCUPATIONAL THERAPY

- Upper body function training
- Injury and post-operative hand therapy
- Self-care and dressing training
- Adaptive technique and equipment training
- Lymphedema control activities



SPEECH THERAPY

- Assessment and treatment of communication disorders
- Swallowing evaluations and treatment
- Cognitive retraining
- Verbal and auditory processing assessment

LONG-TERM CARE INCLUDES A VARIETY OF AMENITIES

Since long-term patients may spend years in skilled nursing facilities, many places offer a variety of amenities to make the facility a "home away from home." Such amenities include social activities, salon services, local transportation services, financial management, and supportive services to address the psychological and emotional needs of patients and their loved ones.

WHAT TO LOOK FOR WHEN SELECTING LONG-TERM CARE

- The agency is noted for providing quality care by state agencies, accreditors, or others accredited sources
- They provide the services you or your loved one needs (physical, medical, emotional)
- They have the types of staff, as required by your state, to meet your needs
- You have the finances or resources to afford the care

TYPES OF LONG-TERM CARE

- 1. Home care can be given in your own home by family members, friends, volunteers, and/or paid professionals. This type of care can range from help with shopping to nursing care. Some short-term, skilled home care (provided by a nurse or therapist) is covered by Medicare and is called "home health care." Another type of care that can be given at home is hospice care for terminally ill people.
- 2. Community services are support services that can include adult day care, meal programs, senior centers, transportation, and other services. These can help people who are cared for at home and their families. For example, adult day care services provide a variety of health, social and related support services in a protective setting during the day. This can help adults with impairments—such as Alzheimer's disease—continue to live in the community. And it can give family or friend caregivers a needed break.
- **3. Supportive housing programs** offer low-cost housing to older people with low to moderate

GLOSSARY OF REHABILITATION TERMS

ADL - Activities of Daily Living, which include self-care skills such as eating, bathing, toileting, hobbies and other vocational skills.

Ambulation - Getting from place to place by walking. An assistive device may be necessary.

Aphasia - Inability to express yourself properly through speech or the loss of verbal comprehension.

Dysphagia - Inability to swallow or difficulty with swallowing.

Dysarthria - Difficulty with muscles responsible for producing understandable speech.

Apraxia - Inability to start and carry out certain purposeful movements (when a muscle group will not do what the mind tells it to do).

Gait Belt - A belt worn around the waist and used by the staff to ensure patient's safety during transfers or walking (gait) activities.

AFO - Ankle Foot Orthosis (plastic brace) to support foot and ankle.

Assistive Device - A walker, cane or crutch. Any device that helps a patient walk or maintain their balance.

Transfer - Moving from one place to another without walking.

Mobility - Ability to move the body from place to place in bed, in a wheelchair or while walking.

- O.T. Occupational Therapy (see the description under Skilled Care and In-Home Therapies)
- P.T. Physical Therapy (see the description under Skilled Care and In-Home Therapies)

Rehab - Short for rehabilitation, which is the treatment and training of the patient so that he/she may attain maximum potential for normal living—physically, psychologically, socially and vocally.

ROM - Range of Motion, which is moving a joint through the fullest available range.

Cognition - An individual's process of thinking (including attention, problem solving, perception, judgment and memory).

Perception - The process of taking in information from the surroundings through the senses and then translating this information into something meaningful.

incomes. The federal Department of Housing and Urban Development (HUD) and state or local governments often develop such housing programs. A number of these facilities offer help with meals and tasks such as housekeeping, shopping and laundry. Residents generally live in their own apartments.

- **4. Assisted living** provides 24-hour supervision, health care services, and other kinds of assistance in a homelike setting. Services include help with eating, bathing, dressing, toileting, taking medicine, transportation, laundry and housekeeping. Social and recreational activities also are provided.
- 5. Continuing care retirement communities (CCRCs) provide a full range of services and care based on what each resident needs over time. Care usually is provided in one of three main stages: independent living, assisted living, and skilled nursing.
- **6. Nursing homes** offer care to people who cannot be cared for at home or in the community. They provide skilled nursing care, rehabilitation services, meals, activities, help with daily living, and supervision. Many nursing homes also offer temporary or periodic care ("respite care"). This can be instead of hospital care, after hospital care, or to give family or friend caregivers some time off.

When you look for long-term care, it is important to remember that quality varies from one place or caregiver to another. Because making long-term care decisions can be difficult even when planned well in advance, it is important to think about long-term care before a crisis occurs.



and provide their loved ones with an opportunity to socialize with their peers.

Adult day care centers ideally serve those with physical or cognitive disabilities who may need more supervision and services. More than half of older attendees at adult day care facilities have cognitive impairment, according to the National Adult Day Services Association (NADSA).

Who provides adult day care?

Nearly 58 percent of adult day care centers are nonprofit, according to a recent federal survey. The remainder are for-profit businesses. The nonprofit operators include local governments, universities and hospitals or national groups such as the Alzheimer's Association. The centers are regulated by the states and require operators to obtain a license or certification, to maintain a minimum staff-to-participant ratio and provide a baseline set of services, including monitoring clients' health and assisting them with activities of daily living.

Programs and services provided

Adult day care centers vary in their programs and services, NADSA says, but most offer therapeutic exercise, brain stimulation for clients, social activities often provide meals and snacks, including special diets for those who need them, and door-to-door transportation. Adult day care centers normally operate on weekdays, during regular business hours, though some offer weekend or evening services.

What does adult day care cost?

Prices can vary, depending on geographic region and range of services. The median cost across the U.S. is \$1,690 a month, or \$78 per day, according to the 2021 "Cost of Care" survey from long-term care insurance company Genworth.

While Medicare generally doesn't cover the fees, financial assistance may be available through other government programs, like Medicaid, the Veterans Health Administration and state agencies. Thus, adult day care may be a more affordable option for caregivers seeking help and respite than hiring a worker to provide in-home care.

Helping your loved one adjust

Once you've researched a center, ask if you and your loved one can visit a couple of times for lunch or an activity before making a final decision about enrolling.

Source: AARP: aarp.org/caregiving/



ansas home health agencies must be licensed and surveyed annually. You can verify the status and reputation of any agency through your local health department, Area Agency on Aging, or Kansas Department of Health and Environment. Ask if the home health agency is accredited by additional professional organizations and request a copy of the accreditation report. All home health agencies are required to follow the Client Bill of Rights, and a copy should be given to each client. If you have any care-related problems, call 800-842-0078.

Services provided by home health care agencies vary

Home health care agencies provide medical and skilled nursing services in clients' homes. Services may include skilled nursing, occupational, respiratory, speech and physical therapy or a home health aide. They may also provide assistance with bathing and dressing, toileting and self-administered medications. Home health care covers the use of assistive devices such as walkers, hospital beds, wheelchairs and oxygen. People who provide home health care are registered and licensed practical nurses, therapists or homemaker/home health aides. They usually work through a home health agency, hospital or public health department.

What programs help pay for home health care?

Medicare or Medicaid may pay for home health visits if all of the following conditions are met. You:

- 1. Must be homebound
- 2. Need intermittent skilled nursing care, physical therapy, or speech therapy
- 3. Must be under the care of a doctor who determines you need home health care and sets up a home health care plan
- 4. Must use a home health agency certified to provide Medicare services
- 5. Must meet the age and resource eligibility guidelines when using Medicaid. You do not have to pay a deductible or coinsurance when you receive home health care covered by Medicare, with the exception of a 20% co-payment on durable medical equipment (like a wheelchair). Private insurance, Medicare supplement or long-term care insurance may also cover some home health care expenses. Many home health agencies also offer services on a private pay basis. There may be other sources of funding assistance available as well.

Some health insurance and long-term care insurance plans cover home health care, and short-term services may be covered by Medicaid or Medicare. Some individuals may also pay for these services themselves.

Contact Wyandotte and Leavenworth County Area Agency on Aging for programs and eligibility information. Visit: https://www.wycokck.org/Departments/Area-Agency-on-Aging, Call (913) 573-8531, Email: 60plus@wycokck.org

Students in Youth Life Link's "Building an Empire" summer program learn financial and entrepreneurship fundamentals.



Knitting Together the Essentials for Everyday Life



For more than 25 years, Sisters in Christ, a Black-led nonprofit, has remained focused on supporting women who experience trauma associated with mental health challenges, substance use disorders, a history of abuse, lack of affordable housing, unemployment, and former incarceration.

Transforming Lives One Day at a Time

Sisters in Christ personalizes resources to match the individual needs of each woman and their family. The collective resources they provide not only improves, but enriches the physical, emotional, financial and spiritual wholeness of the women they serve.

Programs offered:

- Transitional Housing: Sisters in Christ manages three transitional homes for women experiencing houselessness or re-entering the community after incarceration.
- Dahomey Training Center: Classes prepare women to master life and job skills needed to sustain living-wage employment in administrative careers, the skilled trade industry or as an entrepreneur.

- Raytown Safe Zone Neighborhood Hub: A "onestop shop" where individuals and families can receive wraparound services to lead healthy and violence-free lives.
- Youth Life Link: Team-building activities for atrisk youth to enhance academic achievement, community involvement, financial outlook and resiliency against crime and violence.
- Mental Health Services: Trauma-focused, evidence-based, and culturally sensitive therapeutic interventions and case management for women, youth and children including Trauma-Focused Cognitive Behavioral Therapy, Eye Movement Desensitization Reprocessing, Trauma Center Trauma Sensitive Yoga and Child Parent Psychotherapy.

Enrollment: Self-referrals are accepted. Program referrals also accepted from MO Department of Corrections, Jackson County Drug Court, Raytown Police Department, Raytown C-2 School District, University Health, First Call, Swope Health and other community organizations.





Sisters in Christ staff members work together every day to serve individuals, families and the community.

2021 5,890 Individuals Served 27,174 Service Visits

ACCOMPLISHMENTS

2020 398 Individuals Served 8,376 Service Visits



Carolyn Whitney, Founder and CEO of Sisters in Christ. Community leader and 21-year resident of Raytown, MO.



Caregivers Play Important Roles in the Life of a Loved One

caregiver takes care of an adult or child who cannot take care of themselves, either because of illness, age or disability. Their caregiving role may be long-term or short-term, based on the person's situation, care needs and condition.

Before you begin caring for someone, determine the level of care you will be responsible for providing. Consider:

- How much of your time can you commit? Will you be a full- or part-time caregiver?
- Will you be the primary caregiver or part of a team of caregivers?
- Are you expected to help with finances, work with insurance plans, perform housekeeping duties, prepare meals or provide transportation to and from appointments? Unpaid caregivers generally have an informal arrangement; however, they should consider completing documents such as a medical proxy or durable power of attorney if one isn't already in place.

- Are you expected to help with bathing and grooming?
- Will you serve as the person who communicates with the patient's healthcare team?

WHAT ARE CAREGIVERS' RESPONSIBILITIES TO PERSONS IN THEIR CARE?

If you are the primary caregiver to a person with a chronic health condition, be sure to work closely with their healthcare team—doctors, nurses, case managers or social workers. Advise the individual's healthcare team that you are the primary caregiver and will need information on their health condition, what medications are required (and when) and what complications (if any) you should be aware of.

If you are the primary caregiver, advocate and decision-maker, you may be required to make major medical decisions with little to no time to process the information. Examples may include emergency

hospitalization, surgery or other type of medical procedure. Depending on your role, you may have to provide consent on behalf of the person in your care. There could be a formal or informal caregiving arrangement. Formal or professional caregivers will require the patient or their representative to sign a contract or agreement that details the duties to be performed and the hours to be worked.

HOW IS CARE PAID?

If you are a primary caregiver, you will need to know what insurance coverage is available for healthcare services, medicine, home health services or medical equipment. Contact the patient's insurance plan provider (e.g., Medicare, Medicaid or private insurance.) If they are uninsured, they may qualify for comprehensive healthcare on a sliding scale based on their income. They can also receive assistance with enrollment in health insurance through a Federally Qualified Health Center, such as Swope Health Central and Samuel U. Rodgers Health Center.

ADVANCE CARE PLANNING DOCUMENTS ARE IMPORTANT

As a caregiver, you will be required to show that you are legally authorized to discuss your loved one's medical information. If the person you are caring for hasn't selected and filed documents, it is important to determine next steps to give you that authority. Types of advance care planning documents you need include:

- DURABLE POWER OF ATTORNEY FOR HEALTHCARE DECISIONS (ALSO KNOWN AS HEALTH CARE PROXY) the document that gives you as caregiver the authority to discuss your loved one's medical information.
- HEALTHCARE TREATMENT DIRECTIVE (ALSO KNOWN AS A LIVING WILL) Advance care planning involves making decisions ahead of time. It's important to let your family and healthcare providers know about your preferences in the event you are unable to speak for yourself. Share your documents and most importantly, your wishes—with anyone who needs to know (for example, your family, your doctor, your pastor, etc.). The Center for Practical Bioethics has developed easy-to-access forms to help you get started. Visit PracticalBioethics.org to download and print the Caring Conversations®Workbook. or give them a call at 816-221-1100.

SOURCE: Our Health Matters™ and AARP 2021 Caregivers Resource Guide

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Living Will

Declaration

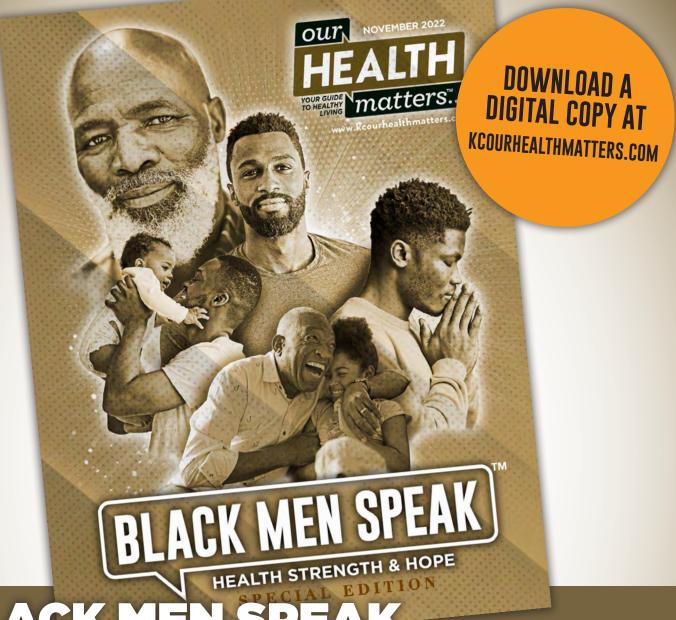
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HealthCare Power of Attorney



NOVEMBER 2022 SPECIAL EDITION



BLACK MEN SP HEALTH, STRENGTH AND HOPE

provides a glimpse into the lived experiences of Black men and boys whose voices are often unheard—until now. Each share their perspectives about health conditions that impact Black men more than others. They also express an understanding about the importance of seeking mental health support. Each of them, young and older, have one thing in common: a cultural, inherent resilience that fuels their ability to make a positive difference where they live, work, learn, play and worship.

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