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## **Aging Perspectives**

**by Charlie Rehbein**

### **NATIONAL FAMILY CAREGIVERS MONTH**

November is National Family Caregivers month. This is a time to recognize the courageous individuals who step forward to help care for their loved ones, which include family members and friends, in need of assistance, supports and care. Across our nation and state, parents, children, spouses, siblings, friends and neighbors give selflessly and even sacrifice to give of themselves to support those in their lives affected by illness, injury or disability.

The Montana Lifespan Respite Coalition defines respite as "planned or emergency care provided to an individual with need for support and supervision in order to provide temporary relief to the primary caregiver of that individual."

According to the Administration for Community Living, in the United States, more than 60 million caregivers provide invaluable strength and assistance to their family members, and as the number of older Americans rises, so will the number of caregivers. In Montana, it is estimated there are over 134,000 unpaid caregivers who provide an average of 18 hours per week of care to their loved one on top of balancing other family and work obligations. Many of these dedicated people work full time and raise children of their own while also caring for the needs of their loved ones. Caregivers support the independence of their family members and enable them to more fully participate in their communities and schools.

Caregiving is not just limited to persons caring for their loved ones who have an illness, injury or disability, it also includes grandparents raising their grandchildren and sometimes even great grandchildren without parental involvement. In Montana, there are more than 6,600 grandparents raising their

grandchildren because of family crisis and the grandparents are often ill-equipped to deal with the emotional, physical, financial and social hardships of raising children “a second or third time around”.

For the 50% of caregivers experiencing extreme stress, routine activities may seem overwhelming. And if you are dealing with a person who is suffering from Alzheimer’s disease or a related dementia, you may be suffering from fatigue as well as stress and being overwhelmed which may be affecting your own health and mental wellbeing. Lifespan Respite provides temporary relief to caregivers while providing quality, competent care for the individual being cared for.

During the month of November, we give “Thanks” and salute you, the people who play difficult and exhausting roles as you care for your loved ones while protecting their dignity and individuality. We also want you to know that there is some help available in receiving some respite care for yourselves and that it is OK to want it, It is OK to need it, and It is OK to get it.

**For more information go to our website: [Lifespan Respite](http://lifespanrespite.org) or <http://dphhs.mt.gov/respite>**



**Thank You for all you do in caring for your loved one.**

**You make a difference!**



## **LIFESPAN RESPITE NEWS**

**It's OK to need it. It's OK to want it. It's OK to get it!**

### **2015 LIFESPAN RESPITE SUMMIT**

The Lifespan Respite (LSR) Summit was held in conjunction with the 47<sup>th</sup> Annual Governor's Conference on Aging in May 2015. Jill Kagan from National Respite Network (ARCH) kicked off the summit with her keynote presentation at the Governor's Conference afternoon general session.

The keynote session included a panel of caregivers talking about their experiences and the need for services such as respite. This panel was well received. LSR also showcased their Public Service Announcement and the LSR video featuring caregivers. The Summit included roundtable discussion and provided breakout sessions featuring Powerful tools for Caregivers, Exploring the Website, introducing the respite voucher program, Guide to Disability Etiquette, Humor and the Caregiver, and Caregiving Stress and the Brain.

The Respite grant as a whole and the Summit provided an avenue to educate Montanans about the need for respite and actively participate in discussions about ways to improve the accessibility of respite for our caregivers

Another Summit is in the planning stages for the early spring of 2016 in Helena. If you are interested in learning more about the Summit, Lifespan Respite, the respite voucher programs, and the Coalition, visit our website at [www.respite.mt.gov](http://www.respite.mt.gov) or contact Kerrie Reidelbach, [kreidelbach@mt.gov](mailto:kreidelbach@mt.gov) at Montana Office on Aging.



***Be watching for the upcoming Montana Lifespan Respite  
Summit in***

***Helena-March 2016***

***STAY TUNED*** for more details on our website

[www.respite.mt.gov](http://www.respite.mt.gov)



## **Montana Lifespan Respite Launches New Respite Voucher Program**

The Montana Lifespan Respite Coalition announced the roll out of the Respite Voucher Program in July 2015. This program is currently being funded by a 3 year grant award through the US Department of Health and Human Services, Administration for Community Living (ACL) and Administration on Aging (AOA). The respite voucher program is an opportunity for family and individual caregivers with limited resources to obtain assistance and get a break from their caregiving responsibilities. A brochure, respite application and valuable resources are available on the Lifespan Respite website as [www.respite.mt.gov](http://www.respite.mt.gov). Lifespan Respite Coalition has a Public Service Announcement (PSA) featuring the voucher program. This PSA that are currently airing over the radio and TV networks through Montana Broadcasters Association. The PSAs and a brief 12 minute video on Lifespan Respite are available on their website.



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## **Montana Options Counseling**



The Options Counseling Program was launched this past year through the Aging and Disability Resource Centers (ADRCs). This program provides a person-centered, interactive approach as well as decision support for planning long term services and supports. Options Counselors take the time to build rapport and get to know the person so the focus becomes the individual's values, preferences, strengths and their needs. Family is encouraged to be involved, with the understanding that the focus is on the elder or the adult with a disability for whom the service is being requested. There is a monetary fee for this service at a minimum of \$50.00. This past year 24 Options Counselors have completed a four module curriculum and passed the testing criteria set for this program.

All ADRCs are offering two Options Counseling packages.

Package 1 includes: Completion and review of the Options Counseling Talking Points included in the letter of introduction, initial meeting to assess individual needs, completion of the written Action Plan, Information and referral and follow-up to ensure that services are in place and the person is satisfied with the outcomes.

Package 2 includes: Assistance with the implementation of the Action Plan, coordination of services, assisting with initial appointments, arranging times and dates for the services and providing mediation between parties involved.

For more information about this program contact the ADRC nearest you  
by calling 1-800-551-3191.

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NOVEMBER IS NATIONAL FAMILY  
CAREGIVERS MONTH --THIS  
YEAR'S THEME --*RESPIRE!*



**Caregiving: From Raising Grandchildren to Caring  
for Aging Family Members**

Sandy Bailey, MSU Extension Family & Human Development Specialist

This is National Family Caregiver Month. Two groups of caregivers commonly found in Montana are grandparents raising grandchildren and family members caring for aging relatives. Both groups are on the rise in our State. Montana State University Extension has programs to assist individuals and families who are caregiving in these situations.



In Montana there are more than 6,600 grandparents who have the sole responsibility of rearing their grandchildren. There are many reasons for this family arrangement including parental death, health problems, incarceration, teen pregnancy, substance abuse issues, financial problems and military deployment. Most commonly, the issues are related to a family crisis. Most grandparents are rearing grandchildren informally, meaning that they do not have formal custody of their grandchildren and do not receive state assistance to help support them in their role. These grandparents frequently report being tired as they are much older than when they parented the first time around. As a caregiver they need to keep up with children who can be anywhere from an infant to a teenager. They also are trying to learn how to parent in the 21<sup>st</sup> Century addressing issues of technology, interactions with schools and dealing with an adult child who is either unable or unwilling to parent the grandchild. For more information on support and resources contact the Montana Grandparents Raising Grandchildren Project at [www.montanagrandparents.org](http://www.montanagrandparents.org) .

Another group of caregivers are those who are caring for an aging loved one. The fastest growing age group in the US is people in their eighties. Today, individuals are living longer than ever before and most are living on their own or with a spouse or family member – not in nursing homes. Many who care for an aging loved one do not see themselves as a caregiver at first as the change occurs gradually. First, the individual

may need assistance with housekeeping or lawn care and then later the care becomes more involved and requires more time and energy. The caregivers are often adult children, a family friend or a spouse. These caregivers may be interested in a Powerful Tools for Caregivers class. The classes are offered in many locations across the state. To find out more information on the classes go to [http://www.msuextension.org/health/Powerful\\_Tools.html](http://www.msuextension.org/health/Powerful_Tools.html) or call 406-994-5099.



## **ARE YOU A VETERAN???**



### **Veterans Directed-Home & Community Based Services (VD-HCBS) Program**



VD-HCBS is a new program representing a partnership with the Administration for Community Living, Administration on Aging, Veteran Services and ADRCs.

The VD-HCBS program is a veteran-directed approach to providing services and supports in the home and community where the veteran lives. This program gives the veteran choice, control, flexibility and freedom regarding services and supports.

### ***How does this work?***

The Veterans Administration Medical Center (VAMC) determines eligibility, budget amount and makes the referral to the approved ADRC. The ADRC employs a Service Coordinator who helps the veteran understand the program, assists with the in home assessments, development of the Service and Support Plan within the allowed budget, assists with understanding and completing the paperwork, problem solving and hiring, if needed. The ADRC provides oversight of the program, quality assurance and billing to the VAMC for approved services and goods. The ADRC contracts with the Conservator Corporation of Montana (CCM) for the Fiscal/Employer Agent role. CCM is responsible for submitting the paperwork required for the veteran to become an employer, approving and paying vendors for goods purchased as well as the payroll for the individual providers hired.

### **Available Areas of Service**

Currently this program is limited in availability. It is administered in three areas of the state:

- Missoula Aging Services (Area VII Agency on Aging) covering Missoula and Ravalli counties.



- Area II Agency on Aging-ADRC in Roundup, covering Big Horn, Carbon, Fergus, Golden Valley, Judith Basin, Musselshell, Petroleum, Stillwater, Sweet Grass, Wheatland and Yellowstone counties.
- Area I Agency on Aging-ADRC (Action for Eastern Montana) covering Custer, Richland, Rosebud, Treasure, Powder River, Carter, Fallon, Prairie, McCone, and Garfield.

If you are or know of a veteran who can benefit from these services and residency is in the above areas of service, you can contact these ADRCs at 1-800-551-3191 for more information.

**For more information in the Service Counties contact:**

**Pat Kendall: Missoula Aging Services-ADRC 406 721-6953 (Missoula)**

**Karen King: Area II Agency on Aging-ADRC 406 323-1320 (Roundup)**

**Angie Lohrke, Area I Agency on Aging-ADRC 406 939-5665 (Miles City)**

Other ADRCs are expressing interest in providing this service so **STAY TUNED** for further expansion.



The really frightening thing about middle age is that you know you'll grow out of it!"

[Doris Day](#)

The secret to staying young is to live honestly, eat slowly, and lie about your age.

[Lucille Ball](#)

***Don't Forget –***

**Medicare Open Enrollment has started!**

**October 15<sup>th</sup> – December 7<sup>th</sup> –**

**Call your local SHIP Counselor at 1-800-551-3191**

**Or - call Senior and Long Term Care at (406) 444-4077**

## Governor's Award for Excellence in Performance



The Department of Public Health and Human Services recognized two programs within Senior and Long Term Care Division on September 28, 2015 at the Great Northern in Helena.

Kimme Evermann and Janet Stellmon were recognized with a Governor's Award for Excellence on behalf of the SHIP program. The State Health and Insurance Program (SHIP) are a free health-benefits counseling and advocacy service for Medicare

beneficiaries and their families or caregivers. SHIP's mission is to educate, advocate for, counsel and empower people to make informed benefit decisions. Both Kimme and Janet have done outstanding work along with the Area Agencies on Aging on the implementation of this program to develop a smooth transition of Medicare Open enrollment and other Medicare concerns for our senior citizens.

A **BIG** "thank you" also goes out to the SHIP counselors across the state for making this program a success!

The Governor's Award for Excellence also recognized the Community Choice Partnership Money Follows the Person (MFP) program. Traci Clark, Project Director; Jon Arnold, Project Manager; Brian Barnes, Housing Coordinator; and Hazel Noonan, Transition Coordinator were acknowledged for their outstanding contribution and achievement. MFP is a federally funded grant program that was awarded to MT in 2012. The program seeks to rebalance



Montana's long term supports and services by transitioning individuals from institutional settings (such as nursing homes) into home and community based services

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### Trivia Quiz

Which big-band popularized the song "Tuxedo Junction"? \_\_\_\_\_

- a. Benny Goodman   b. Tommy Dorsey   c. Glenn Miller   d. Jimmy Dorsey

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The trick is growing up without growing old. - [Casey Stengel](#)

There are only three ages for women in Hollywood--Babe, District Attorney, and Driving Miss Daisy. - [Goldie Hawn](#)

## **New Faces at the State Office**

### **Assistant Legal Services Developer – Katy Lovell**

We sadly said So Long and Best Wishes to Mary Beall, the Assistance Legal Services Developer who is going back to school to pursue a law degree.

We welcomed Katie Lovell with open arms at the end of July. Katy is a Helena native. She attended Carroll College with a degree in Political Science and Spanish. Her previous position was at the ACLU as an Operations Manager. Katy is married and has a 1 year old boy named William Thomas. She coaches a high school speech and debate team in her spare time. **Welcome Katy!**



### **State Long Term Care Ombudsman – Jerry Sorenson**



Jerry Sorenson also joined us in September. He has come back to the state as the new State Long Term Care Ombudsman (LTCO). Jerry has worked for the state previously as a Health Care Facility Surveyor for Quality Assurance Division and as an Adult Protective Service Program Officer. Jerry has also worked as a Physical Therapist. Jerry has lived in the Helena area since 1984, lives with his wife of 42 years, has two children and 3 beautiful granddaughters. **Welcome Jerry!**

*A heartfelt “thank you” and well deserved acknowledgement* is extended to Linda Skiles-Haddock who filled in as the interim state Ombudsman for several months while the position was vacant. Linda put in many hours covering both positions. We want to thank Linda for stepping up to the plate during this busy time.

### **Aging Services Program Specialist- Jackie Stoeckel**

Jackie Stoeckel joined us September 2014 as the Program Specialist for Aging Services filling a lengthy vacancy in this office. Jackie was previously a Program Officer for Child and Family Services. Her experience also includes that of a Licensing Specialist for Quality Assurance Division. Jackie has assumed the Nutrition Services program, and coordinates the Governor’s Conference on Aging among other duties as assigned. She also works closely with Kerrie Reidelbach on the Lifespan Respite Program. Jackie is an adjunct professor (in her spare time) at Helena College where she encourages budding sociology majors and nurses to consider a career in Aging. **Welcome Jackie!!**



## New Faces at the Area Agencies

We have had several changes of command in the Area Agencies on aging the last few years.

**Tina Hoebelheinrich**, Director of Area VIII out of Cascade County has been with Area VIII since July 2014. Tina came to us from her previous position as the CEO of the Big Brother Big Sisters program in Great Falls. Tina’s background is in financing. Tina is originally from Sheridan, Wyoming but has been part of the Great Falls community for approx. 23 years. Tina has two children and three “spoiled rotten” dogs. Tina shared that what she has enjoyed most about her position is the support from the Cascade County Commissioners for aging services and the growth of the senior centers. Tina continually expands these programs and is embracing the changes. Tina has also enjoyed the transition from her passion for kids she worked with to her new found compassion for seniors.



**Todd Wood** has been part of Area II Aging Services in Roundup for many years but took on the position of Director in 2014. He has been in several roles in his 32 years of human service including an ombudsman, Adult Protective Service Specialist, Mental Health and Corrections. Todd is married to his wife Lisa, has two adult children and a family dog. He loves the outdoors including fly fishing and hunting. Todd shares that he loves the staff and people he works with and enjoys getting to know many of the folks he meets in the different communities and senior centers.

**Lisa Sheppard**, Director, Area IX out of Kalispell, has been in her position since Nov 1, 2012. Lisa moved here from Austin, Texas where she worked as a CEO for a non-profit organization called Every Child, Inc. That program served children with significant disabilities. Lisa has a background in long term care services with emphasis in the area of disabilities with a community based focus and also worked as an auditor. Lisa is working to expand the senior services in her area and is also in the process of working toward ADRC status. Lisa is married, has a 21 year old son who also resides in Montana. Lisa shares that she also has 3 “pampered” rescue dogs that have her well trained. When asked about what she enjoys about her position, Lisa shared that she loves the challenge of her job and the idea that “we are making a change in everyone’s life”. She looks forward to expanding and improving services and outreach in her area.



**Jerilee Wilkerson** is our newest director. She took over the helm at Area IV Agency on Aging in Helena in September 2015. Prior to this position Jerilee was the director of weatherization and low-income energy assistance program under the Rocky Mountain Development Center umbrella. Jerilee has a housing background including working with Fanny Mae and the Dept. of Commerce. Jerilee has two grown daughters, two grandchildren and just two spoiled rotten dogs. Jerilee feels she has terrific staff and enjoys getting out and meeting the folks at the senior centers. Jerilee knows that the aging population and their needs continue to grow and looks forward to expanding and developing her programs.

These folks come with a tremendous amount of experience in the field. If you have not done so, please stop by their offices and get to know them. They would like to hear your ideas, concerns and suggestions on how to better serve the seniors in their area.

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## **ENDING SENIOR HUNGER IN MONTANA**

MINKIE MEDORA, RD

Over the years, the number of seniors struggling to access adequate and nutritious food has increased nationwide. As the senior population grows in the country and in



Montana, the number of seniors struggling to have enough to eat is also increasing. At this time seniors make up 17% of Montana's total population. By the year 2025, it is projected that seniors will make up more than 30% of the population. According to the 2014 Census report, there are 165,500 seniors over the age of 65, and of these, 13,700 live below the poverty line. But the poverty number does not tell the whole story. Unless a person's income is up to 185% of poverty or higher, they are still considered at risk of hunger. This

means that about 45,341 seniors in Montana are struggling to find food on a consistent basis – and this is also known as food insecurity.

While seniors are living longer many of them have to deal with the challenges of limited income and growing health problems. Seniors on fixed incomes are often faced with the decision of whether to spend their limited dollars on food, or on medicine, rent, utilities or transportation. Many seniors buy the cheapest food available, in order to have something to eat, often lowering the nutritional quality of the food, especially protein items like milk, cheese or meat. Some seniors have watered down their food in order to increase the quantity of what they are eating. Others save money by not filling prescriptions or reduce their medication doses.

There are many seniors in Montana who are in the role of becoming parents to their grandchildren. Almost 6,600 grandparents in Montana are living with and caring for children in their homes. Of this group, close to 1 in 5 seniors are dealing with food insecurity. Seniors try to find food for their grandchildren first, often sacrificing their own much needed nutrition.

Several seniors have special diet needs for chronic conditions such as diabetes, hypertension or are dealing with cancer, which can effect what the person can tolerate. Seniors who have dental problems like missing teeth, poor fitting dentures or difficulty swallowing certain foods often limit what they can eat, by reduce the quality or quantity of the food eaten.



There are numerous impacts of poor nutrition on the health of older people, including muscle loss, loss of bone tissue, unintended weight loss, increased impact of chronic disease, a weakened immune system, making them more prone to infections and possible hospital stays, increased risk of falls, lowered cognitive functioning and depression. Poor nutrition that is on-going can reduce the overall quality of life for seniors, leading to becoming less mobile and home bound.

The problem of hunger among seniors is not yet fully recognized by many people in the state, or by all policy makers. While numerous programs that work with seniors try to help those who are hungry in many ways, there is still a great deal of work that needs to be done to reduce hunger among our older population.



There are several ways that people in communities, including senior centers and local groups as well as neighbors and friends can help those who are struggling for food. We can start by making sure that seniors know what resources are available to them in the areas where they live. Some of the larger sources of food assistance are:

- **The Senior Nutrition Program:** this is available in small and large towns, and managed by the Area Agencies on Aging. This program provides a healthy meal at noon to seniors and provides much needed nutrition. Some centers provide two meals a day. The program is offered at Congregate Meal sites, senior centers, or other community centers. The program is also available for seniors who are home bound, through their Meals on Wheels Program.
- **The Supplemental Food Assistance Program (SNAP):** this program provides food vouchers to be used at grocery stores to purchase food. The amount of money from SNAP varies with each senior and depends on their income and expenses. Even though the amount of dollars may seem modest, it is a great benefit for those having trouble getting enough food each month. Nationwide, only 40% of seniors who are eligible for SNAP benefits are receiving them, and the number is small in Montana also. SNAP is an important benefit. To apply for SNAP, seniors can contact the local Office of Public Assistance or go to [apply.mt.gov](http://apply.mt.gov) .
- **Food Banks and pantries:** There are close to 200 food banks and pantries around the state. Most of these food banks and pantries are agencies of the Montana Food Bank Network. The agencies provide food to people of all ages and seniors are very welcome.



- **The Commodity Supplemental Food Program (CSFP):** this program is for low-income seniors and provides a monthly food box. The food box is usually given through the local food banks. In many cases, food bank staff deliver the food box to seniors at their home.

- **Senior Farmer’s Market Nutrition Program:** this program provides food vouchers to be used at the local Farmer’s Market to buy fresh fruits and vegetables. These vouchers are given through the designated local sites. This program is currently available in Missoula, Hamilton, Helena, Manhattan, Bozeman, Livingston and Miles City. Specific distribution sites can be found on the Aging Services website under Nutrition. (SFMNP Local Agencies) <http://dphhs.mt.gov/SLTC/aging/nutritionservices.aspx>



Finally, seniors and their friends need to check with their local senior citizen center to find out what other programs can be of help to them for tasks like shopping or cooking.

It is the responsibility of everyone in the state and communities to do what they can to end senior hunger. The more we care about the food and nutrition needs of seniors in Montana, the greater the reward will be for everyone, and will help seniors’ live independent and healthy lives.

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### Brain Quiz

1. True or False? On average, men’s brains are smaller than women’s? \_\_\_\_\_
2. Approximately how many women who live to at least 55 will go on to develop Alzheimer’s disease? A. 1 in 6 B. 1 in 12 C. 1 in 24 D. 1 in 48 \_\_\_\_\_
3. True or False? We use only 10% of our brains. \_\_\_\_\_
4. Albert Einstein’s brain was \_\_\_\_\_ the average adult male brain.
  - a. Slightly bigger than
  - b. the same size as
  - c. Slightly smaller than

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When your friends begin to flatter you on how young you look, it's a sure sign you're getting old. - [Mark Twain](#)

## MARK YOUR CALENDAR

**for the**  
**48<sup>th</sup> Annual Governor's Conference on Aging**  
**and**  
**Home and Community Based Services Conference**  
**To be held September 13, 14<sup>th</sup> and 15<sup>th</sup>, 2016**  
**Billings Hotel and Convention Center**  
**Billings Montana**

### **48<sup>th</sup> Governors Conference on Aging** **and**

### **Home and Community Based Services Conference**

The 48<sup>th</sup> annual Governor's Conference on Aging is already in the planning stages for the 2016 conference year. It has been scheduled for Billings at the Billings Convention Center and Hotel the week of September 13-15 2016. The Governor's Conference on Aging is teaming up with Home and Community Based Service Conference. So mark your calendars. A set of rooms have already been reserved for the conference.

For more information regarding the conference go to our website at: [Governor's Conference on Aging](#) or <http://dphhs.mt.gov/sltc/aging/GovernorsConferenceonAging>

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#### Quiz Answers

**TRIVIA - Which big-band popularized the song "Tuxedo Junction"? Glenn Miller**

**BRAIN -- 1. False - Men's brain are 9% larger but doesn't mean they are more intelligent**

**2. 1 in 6**

**3. False - This is a myth. We use all parts of our brain are active at one time or another.**

**4. C - Albert Einstein's brain was slightly smaller than the average adult male brain.**

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When it comes to staying young, a mind-lift beats a face lift any day – Marty Bucella



## Montana's Centenarian Search

### *The Search for Montana's Oldest Citizens*

Who is Montana's oldest citizen? A few years ago, Montana could boast of not only having the oldest man in America, but also having the oldest man in the world.

Every year since, 2006, the Governor's Advisory Council on Aging has wanted to recognize all Montanans that are, or will be 100 years of age or older by December 31st of each year and present them with a certificate signed by the Governor recognizing their achievement of reaching or passing this major millstone.

Montana's 2010 census showed that Montana was home to 175 centenarians and this number will continue to grow. For the 2015 Governor's Conference, held in May in Helena, we recognized 127 centenarians and honored 22 in person at the conference luncheon. By recognizing the oldest of Montana's elders and honoring them, we hope to raise the public's awareness of our aging society.

The 2016 Governor's Conference on Aging will be held in Billings on September 13, 14 and 15.

If you are a Centenarian or are aware of one and would like them to receive a Certificate of Recognition from the Governor, please supply us the following information:

- 1) **Centenarian's Name.\***
- 2) **Where is the Centenarian living now?\***
  - a) **City:**
- 3) **Contact person (who to send certificate to).\***
- 4) **Contact person's phone number and e-mail address \***
- 5) **Mailing address (where to send the certificate).\***
- 6) **Birth date of Centenarian.\***
- 7) **Where were they born?**
- 8) **If not born in Montana, what is their story on how they got to Montana?**
- 9) **Are they a veteran?**
- 10) **What is the secret to their longevity?**
- 11) **What has been the most amazing event in their life that they would like to share?**
- 12) **What is their favorite quote?**
- 13) **Anything else they would like us to know about the centenarian?**
- 14) **Please provide a picture of the centenarian.**
- 15) **Would the centenarian be willing and able to attend the Governor's Conference on Aging in Billings on September 13?**

**NOTE: \* First six items must be completed in order to receive a certificate.**

Each year at the Governor's Conference on Aging, we want to recognize Montana's centenarians. **Even if we have honored or recognized them before**, we want to continue to acknowledge their achieving centenarian status and each year over age 100 is an amazing accomplishment.

In January of each year, we continue the process to identify and recognize Montana's centenarians, those who will reach the age 100 this year, as well as all those who are over 100.

**We would also like to identify and honor Montana's oldest citizen and those centenarians who also served in the armed services**, so please provide the information above even if you or the centenarian has received a certificate in previous years and have attended a Centenarian Luncheon at previous Governor's Conference on Aging.

You can complete and submit the online form by visiting [Montana Centenarian's Program](#) or - mail your centenarian information to:

**Centenarians**  
**DPHHS – SLTC – Aging Services**  
**PO Box 4210**  
**Helena MT 59604-4210**

Or - email [jstoeckel@mt.gov](mailto:jstoeckel@mt.gov)



**AGING HORIZONS**  
**TV PROGRAM**

**Has Moved To 9:00 AM**  
**SUNDAY MORNINGS ON**



**WATCH FOR US ON THE FOLLOWING STATIONS:**

**KWYB – ABC BUTTE/BOZEMAN**  
**KFBB – ABC GREAT FALLS**  
**KHBB – ABC HELENA**  
**KTMF – ABC MISSOULA/KALISPELL**

**WE WILL ALSO BE ON SWX IN BILLINGS TWICE A WEEK – WEDNESDAYS AT 1:00 PM AND SATURDAYS AT 9:00 AM.**

**ALSO YOU CAN WATCH AGING HORIZONS ON YOUTUBE**  
[YOUTUBE.COM/MONTANADPHHS](https://www.youtube.com/montanadphhs)

### AGING HORIZONS HAS A NEW HOME!

AGING HORIZONS TV program is now on ABC on Sundays at 9:00 AM and on SWX on Wednesdays and Saturdays in Billings!

Aging Horizons features many informative topics that focus on Aging issues and a new show airs weekly. Previous topics in 2015 have included Long Term Care Ombudsman, SHIP (State Health Insurance Assistance Program), Medicaid, Animals and the Elderly, Suicide Prevention, Elderly Tax Credits, Power of Attorney, Lifespan Respite, LIEAP/Energy Share, nutrition, Senior Medicaid Patrol (SMP) Scams & Staying Sharp just to name a few.

Aging Horizons Show Schedule and Archived shows are available on our website at [Aging Horizons](#) or on [YOUTUBE.COM/MONTANADPHHS](https://www.youtube.com/montanadphhs)

## It's All About Helping Each Other



Winter is coming soon and heating bills will pile up fast. Do you know someone who is worried about how they're going to pay those bills? If so, call one of the numbers below to see what's available for help, either for your friend or maybe for you. In Montana, it's about neighbors helping neighbors. That can be as simple as going with a friend to complete an application. Call now:

Montana Citizens' Advocate at 1-800-332-2272

Energy Share of Montana at 1-888-779-7589

You can also find information at [www.energysharemt.com](http://www.energysharemt.com)

## ***Governor's Advisory Council***

### ***Mini-Grant Applications available January 1, 2016***

#### **Does your organization need help with a project?**

The Governor's Advisory Council on aging raises funds in order to give mini-awards to groups who need help with an activity or project which benefits senior citizens.



The purpose of the Mini-Grant Program is to help facilitate up front funding of innovative ideas that will serve senior interests in local communities. Funding for these grants is provided through donations.

The one time only mini-grants range from \$200 to \$1,000. Applications can be received from any governmental agency or 501(C)3 non-profit organization. The community receiving the grant must have a population fewer than 10,000. Photos of the completed project and accounting for funds received will be required as well as a report to the Governor's Advisory Council on Aging by year end.

Eligible activities include a full range of services needed by Montana's seniors such as training and education, development of support services, creating or enhancing on-going services to meet a specific or unmet need of seniors in the community. They should exhibit collaboration with the aging network, and public/private sector partnerships are encouraged.

To apply for a mini-grant visit our Governor's Council on Aging webpage [Governor's Advisory Council on Aging](#) and click on Mini-Grants or contact Jackie Stoeckel at the Office on Aging [jstoeckel@mt.gov](mailto:jstoeckel@mt.gov) or 1 800-332-2272.

**MINI-GRANT APPLICATION FOR SENIOR PROJECTS must be received by August 3rd, 2016.**

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***Perhaps*** your business or program would like to consider a Mini Grant Award sponsorship?

Many of our senior centers and nonprofit programs for seniors run on a shoe string and a prayer and need that extra boost to replace worn out appliances, updating exercise equipment, putting a new roof on or to provide an innovative project for seniors in their community. They can't accomplish all of this on their own.

Governor's Advisory Council does do some fundraising but we find that the applications and need are increasing. We are reaching out to you and your program staff who may not be aware that the mini grants are out there. They would like to invite you to consider a sponsorship to such a worthy cause.

Governor's Conference on Aging Website will be launching in January. You will have the opportunity to sponsor a mini-grant by either submitting a sponsorship on line or contacting Jackie Stoeckel @ [jstoeckel@mt.gov](mailto:jstoeckel@mt.gov) or 406 444-6061 and she will be happy to forward you a sponsorship agreement. There are three levels of sponsorships ranging from \$250-\$3000. Recognition varies from an acknowledgement and ad in the conference program to photo-shoot and business recognition with the grantees at the awards banquet. The best recognition however is knowing that your business was a part of enhancing senior lives in the rural communities.

## "R·E·S·P·I·T·E"

The theme for National Family Caregivers Month November 2015 is  
***"Respite: Care for Caregivers"***

Respite – the chance to take a breather, the opportunity to reenergize – is as important as any other item on your caregiver's to-do list. People think of respite as a luxury, but considering caregivers' increased risk for health issues from chronic stress, those risks are a lot costlier than some time away to recharge. Respite is the key to your own well-being. Respite protects your own health, strengthens family relationships, prevents burn-out and allows your loved one to stay at home up to three times longer. No wonder respite is one of the most frequently requested support services for family caregivers.

**R** is for **"Rest and Relaxation"**

Everyone needs a little "R and R" – especially family caregivers. Relaxing is the best way to return refreshed to handle your many responsibilities as a caregiver.

**E** as in **"Energize"**

Caregiving is often round-the-clock 24/7. Respite isn't simply "getting a few hours off." It's necessary to help you reenergize, reduce stress and provide care for your loved one.

**S** as in **"Sleep"**

Caregivers often have sleep problems. Address sleep problems and insomnia before they take too great a toll on your health.

**P** is for **"Programs that can help you"**

Respite – which can be in the home or out of the home – can be hard to find but there are programs available to help you.

**I** as in **"Imagination"**

Let your mind run free; read a book; see a movie. You have been so occupied with the nuts-and-bolts of caregiving that refreshing your mind will actually help you be a better caregiver.

**T** as in **"Take Five"**

...or better yet, take ten. Do you find yourself saying, "I wish I had just ten minutes to myself"? Don't feel guilty. You need a reprieve – a few minutes to temporarily disengage.

**E** is for **"Exhale"**

A simple breath in and then a long exhale can help you focus and increase your vitality. A few deep breaths can give you more energy, reduce stress, and lift your mood.



During National Family Caregivers Month, remember...

***"Respite:  
Care for Caregivers"***



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**IT'S OK TO NEED IT, IT'S OK TO WANT IT, IT'S OK TO GET IT!!**



# Stepping On

## Building Confidence and Reducing Falls

### Stepping On Leader Training November 30 and December 1st

The Montana Injury Prevention Program will be hosting a two day “Stepping On” Leader Training on November 30th and December 1<sup>st</sup> at Community Medical Center, 2827 Fort Missoula Rd. Missoula, MT 59804, in Conference Rooms I and J. You can enter through the Rehab entrance of the hospital and the conference rooms will be on the left. The training will be from 9am-5pm with lunch provided on both days.

“Stepping On” is a research based and scientifically proven program to reduce falls in older adults. It is a 7 week course in which participants will learn a variety of topics and exercises that will help them gain knowledge, strength and balance to help reduce the risk of falling and sustaining an injury.

Audience: We are seeking potential “Stepping On” leaders from community organization that serve elderly adults. Leaders typically come from physical therapy offices, senior centers, aging agencies, county health departments and hospitals.

Once trained, the stepping on leader will be able to run their own “Stepping On” fall prevention course in their community. The Montana Injury Prevention Program offers mini grant funding for locations to run courses each year (\$1000 mini grant for first course cycle, \$500 for subsequent course cycles).

This is a free training, but we ask that participants be willing to run at least one course (7 weeks) in their community.

Interested people can contact Jeremy Brokaw via email or phone for more information or to reserve a spot for the training. [JBrokaw@mt.gov](mailto:JBrokaw@mt.gov), 406-444-4126.

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A stockbroker urged me to buy a stock that would triple its value every year. I told him, "At my age, I don't even buy green bananas. - [Claude D. Pepper](#)

You can't help getting older, but you don't have to get old. - [George Burns](#)

You know you're getting old when all the names in your black book have M. D. after them. - [Arnold Palmer](#)

You know you're getting old when the candles cost more than the cake. - [Bob Hope](#)



## **Introducing Dennis Nyland - Mental Health Ombudsman**

Dennis was appointed to the post of Mental Health Ombudsman in 2014. Dennis was born and raised in Helena, Montana. He attended local schools, and graduated from Helena High School in 1984. Dennis served in the U.S. Navy as an Electronic Technician in the Naval Submarine Force. He has over twenty years as an EMT, currently still working part-time as an EMT for St. Peter's Ambulance Service. Dennis was also in law enforcement for many years. During his time in law enforcement, he was instrumental in bringing the Crisis Intervention Team (CIT) to the State of Montana. Dennis was very involved in numerous CIT trainings, assisting in training many law enforcement officers regarding mental illness and in the deescalating skills required in crisis situations. Dennis has a passion for individuals with mental illness and is very excited to be in the position of the Mental Health Ombudsman.

### **A brief explanation of the Office of the Mental Health Ombudsman**

The Office of the Managed Care Mental Health Ombudsman was established in the 1999 Legislative Session in response to difficulties with the mental health managed care system in effect at that time. Since then, statute has been amended to delete the reference to managed care. The primary mandate of the Ombudsman as stated in statute [MCA 2-15-210(3)] is to "represent the interests of individuals with regard to the need for public mental health services, including individuals in transition from public to private services."

The Office of the Mental Health Ombudsman is a state agency administratively attached to the Governor's Office. The Mental Health Ombudsman is appointed by the Governor to a four-year term, and is mandated by law to represent the interests of individuals with regard to the need for public mental health services. The Ombudsman does not have attorneys and cannot provide legal representation or advocacy, but instead collects and provides pertinent information about an individual's situation, and can contact and work with others to help resolve problems. The Ombudsman may refer people to another agency or organization if it appears that entity might be better able to help them and may also make recommendations to appropriate agencies or legislative committees for systemic changes derived from observations of individual inquiries.

The Ombudsman meets with state agencies and attends meetings of relevant legislative committees to discuss and/or report on systemic issues arising from contacts from individuals with mental illness, family members and mental health care providers. The Ombudsman also attends meetings of various advisory, advocacy and other work groups related to mental health issues.

The Ombudsman's Office is staffed with 1½ full time employees – the Mental Health Ombudsman (full-time) and the Mental Health Services Specialist (part-time). The Mental Health Ombudsman's Office responds to inquiries, provides information, and investigates as necessary. Easily 95% of this office's case work is handled by telephone or mail. The Ombudsman's Office is contacted by individuals with mental illness, family members, mental

health care providers, and others. Some issues are handled in one phone call while others may require days or weeks.

Some of the issues the Ombudsman is contacted with include:

- eligibility or loss of eligibility for public mental health services
- authorization for services
- access to medication/services
- housing
- Social Security and Medicaid
- patient rights
- access to mental health care within or transitioning from the criminal justice and juvenile justice systems

For more information, you may contact Mr. Nyland at [DNyland@mt.gov](mailto:DNyland@mt.gov) or by calling the Citizens Advocate Office at 1-800-332-2272 and asking for the Mental Health Ombudsman.

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