2016 Aging in America American Society on Aging Annual Conference AJFCA Member Agency Session Descriptions

- Honoring Life: Restoring Dignity to the Lives of Holocaust Survivors
- Evidence-Based Cognitive Programs for Alzheimer's and Dementia
- Ensuring Culturally Competent Care for Aging Survivors of the Holocaust
- The Alzheimer's Support and Education Network: Sarasota's Plan for Dementia-Capable Agencies
- Nonprofit Solutions to Meet the Challenges of Service Provision to Older Adult Holocaust Survivors
- Protective Factors for Maintaining Independence

Honoring Life: Restoring Dignity to the Lives of Holocaust Survivors

Monday, March 21, 2016: 09:00 AM - 10:30 AM

Description:

What can we do collectively to honor the 125,000 Holocaust survivors living in the United States, and another 193,000 in Israel? These are among the poorest older adults in both countries. With a median age of 87, issues such as affordable in-home services, housing, emotional support, socialization and the compassionate provision of medical care are all essential to preserving human dignity and can alleviate late-onset trauma in victims of Nazi persecution.

Objectives

- 1. Participants will understand who is a Holocaust survivor, including the more nuanced definitions of who identifies as part of this unique population, and the meaning of dignity.
- 2. Participants will understand how trauma in an earlier part of their lives has impact on them in old age; particularly late-onset trauma.
- 3. Participants will understand how best practice projects support and serve survivors and how those projects may also be applied to others who have suffered trauma.
- 4. Participants will learn the existing funding streams for providing supports and services for Holocaust and other trauma survivors.

Outcomes

There is relatively little known in the larger aging network about this population of very poor, very frail older adults, or its existing social, health and financial supports; and how that system's possible lack of cultural competence can impact the lives of survivors. The payoff is that whatever is brought to the table now can benefit other older adults, including other trauma survivors (e.g., Rwandan genocide survivors, 9/11 survivors) as they age.

Presenter(s)

Jenni Frumer, MSEd, LCSW, LMHC, Executive Director, Alpert Jewish Family and Children's Service Michael Marcus, MSW, Program Director, Older Adult Services, Harry & Jeanette Weinberg Foundation

Evidence-Based Cognitive Programs for Alzheimer's and Dementia

Monday, March 21, 2016: 09:00 AM - 10:30 AM

Description:

This presentation will focus on the implementation steps and outcomes associated with incorporating NECC's award-winning evidence-based cognitive programs into existing structures at facility and service levels. We will present an overview of the programs and activities, an account of actual simultaneous implementation of multiple levels of programs, and a summary of the latest empirical evidence supporting cognitive stabilization and degrees of improvement.

Objectives

- 1. To understand the effects of NECC programs on cognitive measures in persons with Alzheimer's disease and dementia
- 2. To understand the structure and potential of the standardized cognitive interventions
- 3. To understand the steps needed to implement cognitive interventions into existing services or sites

Outcomes

1. Results of efficacy studies have found promising evidence that NECC programs can stabilize functioning in a variety of different areas in persons with varying degrees of dementia and even produce mild to moderate improvement in some areas of functioning. 2. It is believed that the results achieved by the programs are attributable to the utilization of comprehensive curricula of research-based activities providing purposeful cognitive stimulation which transfers into activities of everyday living. 3. Implementation of this non-pharmacological approach for stabilizing or improving cognition in persons with dementia positively impacts staff morale as well as distinguishes the organization and its services as innovative and responsive to the needs of this population.

Presenter(s)

Jeffrey Buchanan, PhD, Professor of Psychology, Minnesota State University Mankato Yuliya Gaydayenko, MA, LMSW, Senior Director of Older Adult Services, Jewish Family Service of Metropolitan Detroit

Patti Said, MA, Executive Director, New England Cognitive Center

Ensuring Culturally Competent Care for Aging Survivors of the Holocaust

Monday, March 21, 2016: 03:00 PM - 04:00 PM

Description

There are an estimated 130,000 Holocaust survivors living in the U.S. It is vital for care providers to understand the complex triggers that impact aging survivors and the strategies for reducing the effects. Two cultural competency training programs for care workers will be presented. The national context and

scope of services provided for survivors throughout the U.S. through members of AJFCA will be discussed.

Objectives

- 1. Understand the definition of a Holocaust survivor and describe the national demographics and needs of this population.
- 2. List the components of a cultural competency training program and explain how training direct care workers impacts their ability to care for Holocaust survivors.
- 3. Identify potential triggers that may result in adverse reactions, discuss how these triggers can impact behavior, and develop potential strategies to respond appropriately.
- 4. Summarize how the diverse cultural backgrounds of both Holocaust survivors and direct care workers can be incorporated into a training program to ensure culturally competent care.
- Describe the outcomes of the training program and explain how training direct care workers in cultural competency for working with survivors benefits both care providers and older adults receiving care.

Outcomes

Cultural competency training for working with Holocaust survivors ensures sensitive, appropriate and passionate care, resulting in fewer negative incidents and increased referrals for services. Many of the situational and environmental triggers that affect Holocaust survivors, including showering, medical personnel and waiting in lines, are everyday experiences for individuals as they age. Enabling direct care workers to better understand and identify triggers and respond to them appropriately is important to providing appropriate care for this population. In the current program 92% of participants in more than 60 cultural competent trainings and more than 1,000 participants rate the training as "most" helpful in their direct work with Holocaust survivors. In addition to the increase in knowledge baselines, outcomes also trend to an increase in empathy towards victims of genocide and the potential triggers for lateonset trauma.

Presenter(s)

Ellen Blalock, Holocaust Survivor Program Coordinator, Jewish Social Service Agency
Jenni Frumer, MSEd, LCSW, LMHC, Executive Director, Alpert Jewish Family and Children's Service
Liz Woodward, MA, Director of Older Adult & Disabilities Services, Association of Jewish Family &
Children's Agencies

<u>The Alzheimer's Support and Education Network: Sarasota's Plan for Dementia-Capable Agencies</u>

Tuesday, March 22, 2016: 12:00 PM - 01:30 PM

Description

This poster portrays a model for organizations who serve caregivers of dementia patients and for those who are intellectually compromised, a novel combination of programming suitable for both populations.

A grant from the Administration for Community Living funded an evaluation of organizations' "dementia capability". Early findings have shown that when clients live alone with dementia or have caregivers, there are many areas of organizational readiness that still need to be enhanced.

Objectives

- 1. Recognize the impact of caregiving stress and "caregiver burden" for persons with dementia or other intellectual challenges (and for their caregivers).
- 2. Conceptualize the psycho-social and day-to-day quality of life differences in clients with dementia who live alone vs. those with caregivers in the home.
- 3. Understand the importance of an established model of assessment and program planning for organizations that serve patients with dementia, their caregivers, and persons dealing with other intellectual challenges.

Outcomes

This poster portrays a practice and policy model for organizations who serve caregivers of dementia patients as well as those who are intellectually compromised, novel programming that is suitable for both populations. A grant from the Agency for Community Living has funded a project in which organizations are evaluated for "dementia capability" and for programs and policies already in place to serve those caring for persons with dementia. An additional focus is the population termed intellectually disabled, as there are individuals at risk for developing any type of dementia, something previously overlooked within that population. Early findings have shown that although all organizations surveyed have policies for determining whether clients live alone with dementia or have caregivers, there are many areas of organizational readiness that still need to be enhanced. The Alzheimer's Education and Service Network (ASEN) is in progress to help agencies become more dementia-capable.

Presenter(s)

Pamela Baron, MSW, Director of Senior Services, Jewish Family & Children's Service of the Suncoast, Inc. Jane Roberts, ACSW, LCSW, PhD, Chair, Duvall Family Studies Initiative, University of South Florida Sarasota-Manatee

Nonprofit Solutions to Meet the Challenges of Service Provision to Older Adult Holocaust <u>Survivors</u>

Tuesday, March 22, 2016: 02:00 PM - 03:00 PM

Description

CJE SeniorLife in Chicago has experienced a major influx in requests for services among aging Holocaust survivors. With limited resources to serve this group of seniors, the agency has researched best practices in nonprofit community-based services to meet the growing needs. This session will outline the results of a 2015 study on serving survivors.

Objectives

- 1. Understand the growing needs of aging Holocaust survivors and the existing resources available to impact those needs in Chicago and 9 other communities across the U.S.
- 2. List and explain best practices in serving a culturally diverse group of vulnerable older adults.
- 3. Describe the variety of processes and challenges for the provision of a range of community-based services for nonprofit, faith-based organizations.
- 4. Outline the role of volunteers in supporting organizations serving vulnerable Holocaust survivors.

Outcomes

Despite the misconception that the needs of the survivor community are dwindling, the complex needs of many survivors- related to their traumatic histories as well as to deteriorating physical, social and economic factors - are just beginning to emerge. This session will outline the scope of needs and services nationally and particularly among Metro Chicago's estimated 6,000 survivors, many of whom are from the Former Soviet Union and are living in poverty. Best practices in providing services to this challenging and vulnerable group of seniors among 10 nonprofit partners will be discussed. The development of community partnership strategies, the challenges and processes of "re-educating" a community about "who is a survivor" and about unanticipated needs, and the effectiveness of a nationwide VISTA initiative to help address these issues will be discussed. Results can be extrapolated to a number of diverse aging populations which nonprofit agencies assist in their communities.

Presenter(s)

Yonit Hoffman, PhD, Director, Holocaust Community Services, CJE SeniorLife
Heather Klain, AmeriCorps VISTA Volunteer, Holocaust Community Services, CJE SeniorLife
Liz Woodward, MA, Director of Older Adult & Disabilities Services, Association of Jewish Family &
Children's Agencies

Protective Factors for Maintaining Independence

Wednesday, March 23, 2016: 09:00 AM - 10:00 AM Description

Learn how the Protective Factors for Maintaining Independence tool has been used by three agencies in Pittsburgh to measure the impact of social services ranging from care management to exercise programs. It assesses risk factors associated with nursing home admission and measures the success of services in reducing risk.

Objectives

- 1. Attendees will conceptualize outcome measurement in terms of client risk reduction and growth promotion.
- 2. Attendees will analyze the incorporation of outcome measurement into social service interventions.
- 3. Attendees will become familiar with the process of developing a home-grown outcome measurement tool.

4. Attendees will learn how to strengthen funding requests with the use of outcome measurement.

Outcomes

The PFMI has resulted in numerous, positive outcomes: (1) Service providers have begun thinking more routinely about the impact of their work on reducing client risk factors for institutionalization. (2) Staff have access to real time information regarding changes in their clients' degree of risk for institutionalization. This has allowed for timely referrals and modifications in interventions. (3) Programs are now measuring their impact in a way that was previously not possible as a result of the tool's combination of flexibility and uniformity. (4) Staff and clients have developed an openness to outcome measurement due to the tool's brevity and ease of use. (5) Funders have been generous with grant requests made by the agencies that use this tool as a result of the clear outcomes that are generated.

Presenter(s)

Jordan Golin, PsyD, Director of Clinical Services, Jewish Family & Children's Service Stefanie Small, LCSW, CMC, Supervisor of Clinical Services, Jewish Family & Children's Service of Pittsburgh