

Meeting the Challenges

Quarterly

JOURNAL

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**Partnership to Preserve Independent Living
for Seniors and Persons with Disabilities**

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A **READER SPONSORED** publication of positive and informative articles to educate, empower, and inspire.....

WOULD YOUR KITCHEN MEASURE UP?

What standards of cleanliness are required to earn an "A" grade and ensure that the food we eat is safe? Take the U.S. Food and Drug Administration quiz to find out.

Circle the answer that best describes the practice in your household, whether or not you are the primary food handler.

1. The temperature of the refrigerator in my home is:
 - a. 50 degrees Fahrenheit
 - b. 40 degrees Fahrenheit
 - c. I don't know; never measured it.
2. The last time we had leftover cooked stew or other food with meat, chicken or fish, the food was:
 - a. cooled to room temperature, then put in the refrigerator
 - b. put in the refrigerator immediately after food was served

THIS ESTABLISHMENT HAS
COMPLIED WITH SANITARY
REQUIREMENTS FOR
GRADE



COUNTY of RIVERSIDE
HEALTH SERVICES AGENCY
DEPARTMENT of ENVIRONMENTAL HEALTH
PENALTY FOR REMOVAL

c. left at room temperature overnight or longer.

3. The last time the kitchen sink drain, disposal and connecting pipe in my home were sanitized was:

- a. last night
- b. several weeks ago
- c. can't remember

4. If a cutting board is used to cut raw meat, poultry or fish

and it is going to be used to chop another food, the board is:

- a. reused as is
- b. wiped with damp cloth
- c. washed with soap and hot water
- d. washed with soap and hot water and then sanitized.

5. I clean my kitchen counters, and other surfaces that come in contact with food, with:

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- a. water
 - b. hot water and soap
 - c. hot water and soap, then bleach solution
 - d. hot water and soap, then commercial sanitizing agent
6. When dishes are washed in my home, they are:
- a. washed and dried in automatic dishwasher
 - b. left to soak in the sink for several hours, then washed with soap in same water
 - c. washed right away with hot water and

- soap in the sink and then air dried
 - d. washed right away with hot water and soap and then immediately towel dried.
7. The last time I handled raw meat, poultry or fish, I cleaned my hands afterwards by:
- a. wiping them on a towel
 - b. rinsing them under hot, cold or warm tap water
 - c. washing with soap and warm water
8. Meat, poultry and fish products are defrosted in my home by:
- a. setting them on the counter
 - b. placing them in the refrigerator
 - c. microwaving
9. When I buy fresh seafood:
- a. I buy only fish that's refrigerated or well iced
 - b. I take it home immediately and put it in the refrigerator
 - C. I sometimes buy it straight out of local fisher's creel.

- 2. "b" is the best practice—if you answered "b", give yourself 2 points_____ (Hot foods should be refrigerated as soon as possible after cooking; discard foods that have been standing out longer than 2 hours. Properly refrigerated left-overs remain safe up to 3 to 5 days.)
- 3. If "a" is your answer, give yourself 2 points—1 point for "b"_____ (A 1 teaspoon of chlorine bleach to 1 quart of water solution is recommended or a commercial kitchen cleaning solution may be substituted.)
- 4. Give yourself 2 points if your answer was "d"_____ (Use only smooth cutting boards, made of a hard maple, nylon, or plastic. Wash and sanitize after use with 1 tsp chlorine bleach to 1 quart water solution or commercial kitchen cleaning solution. Cutting boards may also be sanitized in your dishwasher.)
- 5. Answers "c" or "d" earns you 2 points; "b" is worth 1 point_____ (Soap and water may not kill all strains of bacteria; plain water is useless.)
- 6. "a" or "c" are each worth 2 points_____

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Answers

[Zero points for wrong answers]

- 1. 40 degrees F or less slows the growth of most bacteria—If you answered "b", give yourself 2 points _____

(Letting dishes sit in water creates “soup” and provides nutrients for bacterial growth.)

7. “c” is the only correct answer and is worth 2 points_____
8. “b” or “c” are worth 2 points_____ (Meat, poultry and fish that are thawed on the counter-top, or in the sink, without cold water, are breeding grounds for bacteria.)
9. “a” or “b” are correct and worth 2 points_____

ADD your total points:

- 16 to 18 points—Post an “A” in your kitchen
- 15 or fewer points—Reexamine food safety practices in your home and make necessary improvements. Current practices

are putting you and those who eat in your home in danger of food borne illness.

Some other healthy food handling tips:

1. In order to be safe, foods should be cooked to the following minimum internal temperature:
 - Ground beef 160 F
 - Cuts of beef, lamb and veal 145 F
 - Pork 160 F
 - Whole poultry and thighs 180 F
 - Poultry breasts 170 F
 - Ground poultry 165 F
 - Seafood 145 F; ground fish like crab cakes to 155 F and stuffed fish to at least 165 F.

Digital food thermometers are available at most grocery stores.

2. Eating raw cookie dough made with eggs, whether you make it or get it at the store, is unsafe and puts you at risk for Salmonella Enteritidis infection.
3. People suffering from diabetes, HIV, cancer, or liver disease need to be especially careful about not eating raw seafood because their diseases or the medicines they take may put them at risk for serious illness or death from contaminated seafood. People with these diseases ~~should never eat raw seafood.~~

[SOURCE: U.S. Food and Drug Administration, FDA Consumer Maga-

New Study Suggests Wider Aspirin Benefits

It is reported, in the current issue of *Archives of Internal Medicine*, that the analysis of five earlier clinical trials suggests daily use of aspirin, in addition to helping to prevent the recurrence of a heart attack, may also cut the risk of a first heart attack by one-third in apparently healthy people and reduce stroke danger.

As a consequence, men over 40 and women over 50 are urged to talk with their doctors about the preventative benefit of aspirin as part of their individual health plan.

- ***WE NEED YOU*** to help support the continued publication of *Meeting the Challenges* too, with a tax deductible donation to the NON-PROFIT Partnership to Preserve Independent Living.
- Please send a TAX DEDUCTIBLE contribution of \$100, \$50, \$25, \$10, or whatever amount you can, to: PARTNERSHIP, Meeting the Challenges, 6296 Rivercrest Drive, Suite K, Riverside, CA 92507.
- If you can, please add us to your regular giving schedule.....
- And ***thank you*** to everyone who has already become a reader sponsor of *Challenges*!!

WHAT IF SOMEONE ASKS FOR YOUR SOCIAL SECURITY NUMBER?

The phone rings:
“Hi. Are you sitting down? You have just won a million dollars and we are processing your payment right now. **All we need is your Social Security number and a credit card number so that we can deposit your prize in your account!**”
Don’t fall for this real con that is going on right now!

It is important to know when is it OK to tell someone your Social Security number and when is it not a good idea. If you gave it to the crooks who said they were “processing your payment”, you could lose your home, all your savings, have your credit destroyed and end up with possibly hundreds of thousands of dollars of debt that you didn’t incur. This kind of thing happens every day!!

According to the Social Security Administration, **your number is your personal property!** “If a friend asks to borrow your car, don’t you want to know how it will be used? It’s the same with your Social Security number.” Keep in mind that giving your number to anybody is *voluntary*, just like letting someone borrow

your car.

Before you give out your social security number, in person, over the phone, over the Internet, or on any type of application form, you should ask::

- WHY do you need my number?
- HOW will my number be used?
- WHAT HAPPENS IF I REFUSE to provide the number?
- WHAT LAW REQUIRES me to give you my number?

The Privacy Act says that no federal, state, or local government agency may deny you any right, benefit, or privilege under the law because you refuse to give your Social Security number, unless:

- Disclosure of your number is required by Federal law, or
- Disclosure of your number is required under a law or regulation in effect before September 1, 1975—the year that The Privacy Act took effect.

Two instances when you must give your Social Security number are:

- When doing business with Social Security
- To your employer, who is required to submit a report to Social Security about

your earnings.

Many businesses and other organizations think that using your Social Security number is an easy and efficient way for them to keep records. If a company wants your number for their record keeping purposes, you can refuse to give it to them and ask them to use another way to identify you.

Not only is your Social Security number your personal property, but it is also a big responsibility on which your future safety and financial security may well depend.

To help you make a decision about whether or not to give someone your number, always ask the WHY, HOW, WHAT questions. If you are not comfortable with the answers, the best action is not to give out your number.

Also, never carry your Social Security card in your wallet or purse; keep it in a safe place.

There are many bad guys in the world who would love to take your good name and credit and it’s mostly up to you not to let that happen.

[SOURCE: Social Security Administration Reporter]

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Another Scheme to Steal your Identity....

The IRS is warning of a fraudulent scheme that attempts to get information about individuals by sending a letter or email message that pretends to be from the recipient's bank.

They copy the stationary and logo and look very official. Then they request personal information to "update" the victim's account—Social Security number, account numbers and sometimes other personal and financial data via very official looking forms to complete. This information, if provided, is then used to impersonate the victim and gain access to their finances to:

- Take over accounts
- Run up charges on existing credit cards
- Apply for loans in the victim's name.

DON'T BE FOOLED.

Contact your bank and **VERIFY THAT REQUESTS ARE AUTHENTIC BEFORE PROVIDING ANY INFORMATION.**

*"The willingness to accept
responsibility
for one's own life...
is the source from which
self-respect springs."*

- Joan Didion, American novelist
and journalist

Senior Ombudsman Services.....Riverside (909) 686-4402....Coachella Valley (760) 770-9999

FLU SHOT NEWS.....

The Federal Center for Disease Control (CDC) has determined that vaccine production for the 2003--04 influenza season is on schedule and a sufficient supply of influenza vaccine is expected to be available for the vaccination of all high-risk and healthy persons during October and November.

All persons over the age of 50 are now encouraged to get an annual flu shot.

Anyone who is at high risk for complications from influenza should definitely be vaccinated: persons with long-term illnesses; chronic heart and lung conditions, including asthma; persons with diabetes, chronic kidney disease, or a weakened immune system; children and teenagers who are on long-term aspirin therapy; and women who will be more than 3 months pregnant during the flu season. Also, everyone who provides care services to persons in the high risk groups, including caregivers and family members of persons in high risk groups, should plan to be vaccinated.

WHAT DO YOU THINK?MORE EVIDENCE THAT IT REALLY DOES MATTER!

Recent studies, by the Albert Einstein College of Medicine in New York and Rush University in Chicago, seem to reinforce the notion that an effective way to ward off dementia and possibly Alzheimer's Disease is to keep our minds active and engaged.

Researchers looked at physical exercise to measure its effectiveness in delaying the onset of dementia. They found that, while many other health benefits for regular exercise have been documented, keeping Alzheimer's away does not appear to be one of them—*unless it is dancing!* Dancing was the one physical activity that appeared to work,

and the researchers suggest it is because dancing engages the dancer's mind.

The implication is that retiring should not include turning off our minds, unless we want to encourage them to stop working right. So turn off the TV. Do puzzles, read books, and take up hobbies that involve mental activity. Then for relaxation, why not go out dancing?

A puzzle to help preserve a healthy mind...

Julia is as old as John will be when Julia is twice as old as John was when Julia's age was half the sum of their present ages.

.....John is as old as Julia was when John was half the age he will be 10 years from now.

How old are John and Julia?

[The answer is *somewhere* in this issue of Meeting the Challenges.]

***"DON'T LOOSE YOUR HEAD
TO GAIN A MINUTE.....
YOU NEED YOUR HEAD.....
YOUR BRAINS ARE IN IT"***

- Burma Shave

HOW ARE WE AFFECTED BY THE NEW "MEDICAL PRIVACY LAW"?

A few months ago, a law went into effect that was intended to protect patient's medical information from the prying eyes of individuals and companies. Although many are not aware of this new law, doctor's offices, medical clinics, hospitals, health plans, and nursing homes are changing their policies to comply.

You may notice a few little changes in the way things are done, such as no request to write down the reason for your appointment, lowered voices so others can't overhear, or your chart being placed face-in outside the examining room so that people in the hall can't read it.

But the law, called the "Health Insurance Portability and Accountability Act", *HIPAA* for short, does establish some national privacy standards we need to know about.

Patient Protections

- We are now able to request copies of our medical records. Under the law, they are to be given to us within 30 days of our request, but we may be charged for the copies.
- Providers must provide us with notice of how they use

our personal medical information, and we are required to acknowledge receipt of this information.

- Under the law, doctors, nurses and other health providers may share our personal health information as needed for medical treatment purposes.
- Health information may not be used for purposes not related to health care. Release of the information to life insurance companies or other businesses or organizations, which are not directly involved in providing health care, requires the written authorization of the patient for release.
- Medical information cannot be used for marketing purposes, unless individual specific authorization is given by each patient.
- Patient's may request that "reasonable steps" are taken to ensure that communications with the patient are confidential. For example, a patient may request that their doctor call them at their office instead of their home and the doctor must comply.
- Certain disclosures, however, such as reporting an infectious disease outbreak to public health authori-

ties, are allowed. Other circumstances where disclosures are permitted include: emergency situations; cause of death or identification of a body; limited law enforcement activities; judicial and administrative proceedings; oversight of the health care system; and national security.

Filing A Complaint

- A complaint can be filed against any health plan, or medical service provider, for violation of the privacy practices required by HIPAA.
- Such complaints may be made directly to the covered health provider or health plan or to the U.S. Department of Health and Human Services' Office for Civil Rights.
- Information about filing complaints should be included in the notice of privacy practices we receive. This information may also be available in brochures or posted in the offices of providers for public view.
- Information about how to file a complaint is also available on the Internet at <http://www.hhs.gov/ocr/hipaa> or by phone at (866) 627-7748.

How to Handle Loss

by Marc Sanders, Ph.D.

The most painful and difficult challenges in life involve loss. As we grow older, we experience many losses along the way: possessions, jobs, pets, health, relationships, moving, and death.

Each time we experience a new loss, the experience of earlier losses can return, often making the present loss all the more distressing. Therefore, we must handle each loss with care and attention.

Grief is the natural way we handle loss and it is unique to everyone. Although people express their grief in different ways, they often experience similar feelings and reactions.

As the person suffering a loss or as a person caring for someone who has suffered a loss, you should be aware of these reactions, which can be extremely helpful in understanding what is happening after a loss has occurred.

For example, people who have lost something or someone commonly experience an array of mental, emotional, physical, and

social changes. Following are some common reactions, all of which are natural and normal grief responses.

MENTAL/EMOTIONAL CHANGES

Fear

- of being alone
- of going crazy

Sadness

Guilt

- for things not done or said
- for not having prevented the loss

Anger

- at whomever caused or allowed the loss to happen
- with people who don't understand

Obsessive Memories

- of what has been lost

Questioning

- of spiritual and/or religious beliefs
- the meaning of life

PHYSICAL CHANGES

- sleep disturbances
- irritability
- difficulty concentrating
- changes in appetite
- body aches and pains

SOCIAL CHANGES

- tension with co-workers, partners, and friends
- difficulty feeling understood by others

- concerns of burdening others
- feeling that others seem annoyed and impatient.

Social support is an important factor in how people recover from loss. For many, the support of friends, family, and/or care-givers can be enough to assist the grieving process along. However, for others, the lack of support or the intensity of the physical and emotional reactions can indicate the need for professional help.

Some professional alternatives include individual and group psychotherapy (many groups have themes specific to the type of loss), and psychiatric evaluation. Ultimately, handling loss is about understanding the grieving process and creating the time for the grieving process to happen.

FOR THOSE WHO HAVE SUFFERED A LOSS

- Remember there is no "right" way to grieve and no set time frame.
- Be open to letting others help by talking about what you are experiencing.
- Expect ups and downs as you go through the grieving

process.

- Avoid using alcohol or drugs to feel better.
- Don't expect the memories and feelings to go away too quickly.
- Don't make any big life decisions or changes.
- Seek professional help when the grief seems unbearable (e.g. support groups and/or individual therapy).

HELPING SOMEONE WHO HAS SUFFERED A LOSS

- Encourage them to talk about their thoughts, feelings, and memories
- Encourage healthy behaviors, such as, eating regularly and exercise.
- Avoid reassuring comments, such as, "look at the bright side." *People who are grieving simply want to be heard and understood.*
- Provide practical support, such as, planning meals, contacting friends and relatives, driving, paying bills, etc.
- Allow them to experience their feelings, no matter how painful the feelings might seem. Grieving is a painful process.
- Encourage professional help when there is excessive pain and more support is needed.

Marc Sanders, Ph.D., is a clinical psychologist in private practice and a clinical supervisor for the group therapy program at The Maple Counseling Center in Beverly Hills, CA. Feel free to contact him with any questions or comments at (310) 203-1488.

Editor's Note:

The Maple Counseling Center (TMCC) is a non-profit community mental health agency that provides low fee outpatient counseling to people living in the Los Angeles area.

TMCC is a charitable organization and is supported by client fees, grants, funds raised by special events, as well as by direct donations and bequests.

For more information about TMCC, visit their website at <<http://www.tmcc.org>> or call (310) 271-9999.

SOME ADDITIONAL THOUGHTS ON GRIEF AND LOSS...

Dr. J William Worden suggests that getting through the "work" of grief requires, among other things, that:

1. We must adjust to an environment in which the loved ones or the other things we have lost are missing

2. We need to find a way to memorialize the past so as to be able to move forward with our lives.

Often people who are grieving wonder if they will ever feel well again. We are assured that, as time passes, we will feel less intense pain, but we will, of course, never forget.

Because the experience has been a major life change, we will be forever different too and we need to come to an understanding that we are "okay" in this new place.

Some positive actions can help us to adjust to our loss and live more easily with it:

1. We can begin by looking towards the future
2. We can do things for ourselves that are positive and that give us pleasure
3. We can look for new things to interest us
4. We can take classes or start an exercise program, or do other things that result in personal growth.

Based on information at www.aarp.org—used with permission. **AARP has a variety of free materials available in their Grief and Loss Program. Phone: 1-800-424-3410**

"It is said that Time will heal all things, but one thing for sure..... it isn't a beautician!"

- Garrison Keillor

Am I a Safe Driver?

Check the box if the statement applies to you.

- ☐ I get lost while driving.
- ☐ My friends and family members say they are worried about my driving.
- ☐ Other cars seem to appear out of nowhere.
- ☐ I have trouble seeing signs in time to respond to them.
- ☐ Other drivers drive too fast.

[Editor's Note: *Don't check this if you are driving the speed limit and cars pass you doing 90!*]

- ☐ Other drivers often honk at me.
- ☐ Driving stresses me out.
- ☐ After driving, I feel very tired.
- ☐ I have had more "near misses" lately.
- ☐ Busy intersections bother me.
- ☐ Left-hand turns make me nervous.
- ☐ The glare from oncoming headlights bothers me.
- ☐ My medication makes me dizzy or drowsy.
- ☐ I have trouble turning the steering wheel.
- ☐ I have trouble pushing down on the gas pedal or brakes.
- ☐ I have trouble looking over my shoulder when I back up.
- ☐ I have been stopped by the police for my driving recently.
- ☐ People will no longer accept rides from me.
- ☐ I don't like to drive at night.
- ☐ I have more trouble parking lately.

This quiz is from the "Physician's Guide to Assessing and Counseling Older Drivers", which has just been published by the American Medical Association and is designed for self-administration by older drivers. People who take the quiz are advised, **"If you checked any of the boxes, your safety may be at risk when you drive. Talk to your doctor about ways to improve your safety."**

While almost any cautious and defensive driver could answer "yes" to some of the questions, other issues that are raised by some "yes" answers suggest very real and significant danger to the driver taking the quiz, passengers and other people using the same roadway.

Because we rely so completely on our vehicles as our primary form of transportation, we may persist in denial of difficulties we might be experiencing. Besides talking with the doctor about how to improve safety on the road, it would also be a great idea to begin exploring the other transportation services that are available in our communities. Learning how to use public transportation services, before changing circumstances force retirement from driving and before personal transportation becomes a huge problem, is just good prior planning.

CAC (services for people with disabilities)Riverside (909) 274-0358 ...Indio (760) 347-4888

How to Live Longer and Better.....

An excellent way, it turns out, is to spend some of our free time as a volunteer! In a University of Michigan study, men who volunteered were two-and-a-half times more likely to live longer than men who did not volunteer.

In fact, it has been discovered that the benefits of spending time helping others compare with the benefits of exercise. Volunteering boosts levels of endorphins, brain chemicals thought to be responsible for the "runner's high", according to several recent studies.

Endorphins can also relieve pain and stress, and may be involved in lowering blood pressure levels, in addition to increases in self-esteem. It is also thought that the release of endorphins boosts the immune system. Fewer colds and upset stomachs were reported in 90 percent of adults who volunteered at a minimum of once of week, in a large survey of older adults.

So what are you waiting for? Besides the health reasons, volunteering also bene-

fits people in other ways:

- apply existing skills and gain some new ones
- meet new people and make new friends
- feel the personal satisfaction of helping others
- feel needed and appreciated
- help make a difference in our community.

Volunteering is an enriching experience in so many ways. It can even help relieve stress and affect our mental well-being. Research has shown that for people over 60, mental alertness and abilities are maintained, and symptoms of depression are alleviated through the act of helping others and impacting their lives in a positive way.

"I don't know what your destiny will be, but one thing I do know: the only ones among you who will be really happy are those who have sought and found how to serve."

- Albert Schweitzer, addressing graduating college students

SOME WAYS AND PLACES TO HELP OUT.....

Answering phones and receiving visitors, filing, visiting isolated people living in your community, providing assistance in thrift stores, distributing Meals on Wheels and helping with food distribution programs, driving for people who can't get to their doctors.....just a few of the hundreds of rewarding things to do!

The following TRIP Volunteer Driver Corps partners are all waiting for you to call!

- Mead Valley Wellness Center (909) 657-0686
- Community Access Centers—Riverside (909) 274-0358/ Perris (909) 637-6900/ Indio (760) 347-4888
- Helping Hands Outreach-Banning (909) 922-8300
- Lake Elsinore Senior Center (909) 674-2526

- Riverside Regional Medical Center (909) 486-5520
- Kay Cenicerros Senior Center (909) 672-9673
- Jewish Family Services in Palm Springs (760) 625-4088
- Indio Senior Center (760) 347-5111
- AGAPE Compassion Center, Anza (909) 763-0670
- Norco Senior Center (909) 270-5646
- Church of Today, Sun City (909) 301-3590
- San Jacinto Community Center (909) 654-7212



For more information on how your organization can become a Volunteer Driver Corps partner with TRIP, call Rich at 1-800-510-2020.

New and Improved Transit Arrives in Palo Verde Valley!

Many people may not yet be aware of the exciting way that transportation services in Blythe and surrounding areas are increasing! For example, collectively called **“Desert Roadrunner”, bus routes have expanded and are allowed to leave their fixed route and travel to many people’s houses to pick them up**, when they have made an advance reservation! Discounted rates are available! And really exciting news: the Red Route 3 bus will soon be taking passengers to and from Palm Desert, three times a day (with easy and convenient transfer to SunLine)!!

Residents of the Palo Verde Valley may also apply for and receive ADA Certification, be designated as a non-ADA eligible person with disabilities, or just be a senior and **ALL can use the ADA Desert Roadrunner Dial-**

A-Ride service! And, best news of all, riders can call up to only 2 hours before needing a ride on *Desert Roadrunner* Dial-A-Ride. Scheduled service for regular trips that are taken often may also be requested (it is called “subscription service”). Personal Care Attendants ride for free!

You say that you have never used public transportation and the whole idea seems too complicated? Not at all! In fact, you can also receive individualized “Travel Training” – they will come to your house and take you for a spin on the system and teach you everything you need to know to be able to use the services easily and conveniently. Call *Desert Roadrunner*, in Blythe, at (760) 922-1140 if you have any questions, and to get started using *Desert Roadrunner* services.

How the Tomato Was Added to Our Diet

Tomatos were not eaten in colonial America. In fact, the conventional thought was that, as members of the nightshade family, they were “poisonous”. Never mind that they were widely eaten in France and Italy at the time!

In 1820, Robert Giddon Johnson, apparently fed up with unfounded public opinion, ate a tomato on the steps of the courthouse in Salem, New Jersey and lived!

Tai Chi May Help Prevent Shingles.....

Shingles affects people who harbor the herpes virus, called varicella, when their immunity weakens with age. The result can be painful blisters on the skin.

A recent study, completed at the Neuropsychiatric Institute at UCLA, has found that the movements and relaxation of Tai Chi exercises seem to increase immunity to varicella and help prevent shingles outbreaks. It also reinforces the idea that positive action can directly affect health.

Help for the Victims Of Cyber-Crime

The Internet is a powerful tool for research and communication, but hackers, stalkers, and sexual predators also use it for criminal purposes.

If you are the victim of a cyber-criminal, or to learn more about how to avoid harassment, identity theft and other on-line criminal activities, a program of the famous “Guardian Angels” can help. Their website is at <http://www.cyberangels.org>.

Help keep *Meeting the Challenges* coming your way...make a tax deductible donation today!

What Do You Know About the SNEAKY Disease?

70 people in the U.S. are diagnosed with it EVERY HOUR, but HALF OF US who have it don't even know it! Symptoms appear gradually and mostly go unnoticed—here they are:

- Blurred vision
- Tingling or numbness in the legs, feet or fingers
- Frequent infections of the skin
- Recurring skin, gum or urinary tract infections
- Itching of skin and/or genitals
- Drowsiness
- Slow healing of cuts and bruises
- Fatigue
- Irritability and mood changes
- Excessive thirst
- Extreme hunger
- Rapid weight loss
- Frequent urination (in large quantities)
- Nausea and vomiting.

Other risk factors include:

- Over 45 years of age (and increases with the years thereafter)
- Being overweight
- Of Asian, African, Hispanic, Pacific Islander, or Native American heritage
- Having a history of diabetes in our family.

If 5 or more of the symptoms and risk factors apply, it is recommended that we schedule a test for diabetes as soon as possible. If undiagnosed and untreated, diabetes can result in serious complications, which include:

- Kidney disease, requiring dialysis
- Leg and foot amputations
- Heart disease
- Strokes

- Blindness
- Chronic neuralgia—*pain that never goes away*
- Polyneuropathy—constant numbness and tingling (sometimes pain) in extremities
- Gum disease and tooth loss
- High susceptibility to pneumonia and influenza
- Comas and death from extremely high blood sugar levels—one kind can strike older people, who are frail, but have never been diagnosed with diabetes.

Clearly, if we have diabetes, not being tested and being diagnosed with the disease can lead to very serious problems! There is no cure for diabetes but, if we know that we have diabetes, steps can be taken to minimize the damage that we suffer.

Exercise and managing diet can help bring the so-called Type 2, or “late onset” diabetes under control. The basic idea is that people must pay more attention to lifestyle to remain healthy. According to Kira Almeida, MS, RD, CDE from the Naomi Berrie Diabetes Center at Columbia University, “diet” mostly doesn't mean deprivation and denial. She says, “there really isn't a diabetic diet any more”, but consumption of some things should be minimized, such as fruit juices (she says eat the fruit instead!) and regular sweetened beverages. Other eating habits to be avoided include fried foods and carbohydrate consumption, such as large portions of potatoes and rice.

The best thing to do is to *get tested* and then work with a registered dietician to establish a custom plan of diet and exercise to successfully manage this sneaky disease.

[SOURCE: Defeat Diabetes Foundation]

Superando Nuestros Re-

SEGURIDAD DEL PACIENTE - DEPENDE DE USTED

Por Roberta Wertenberg, Coordinadora, Programa C.A.R.E. Quinto Distrito, APS

La mayoría de nosotros vemos al hospital como un ambiente moderadamente seguro, mas los errores médicos sucede. En este ambiente de recortes presupuestarios, HMOs y carencias de enfermeras, ¿qué pasos puede tomar para mejorar su seguridad como paciente, o de alguien que usted quiere?

PASO UNO: Haga su tarea

- Busque información sobre su diagnóstico y tratamiento. El Internet y el creciente mercadeo entre las compañías farmacéuticas han aumentado la disponibilidad de información médica.
- Si es posible, actúe con su médico, que esté familiarizado con usted y su historial clínico. Si usted escoge un médico, clínica, farmacia u hospital nuevos, determine si tienen la experiencia en el tipo de atención que usted requiere.
- No tenga timidez para preguntar información sobre personal, duración de estancia o tratamiento. Determinar la proporción de enfermeras de registro es un método potencial de evaluar la calidad de atención que pudiera recibir.
- Usted necesitará empezar a planear su salida antes de siquiera entrar al hospital. A pesar de que usted pueda usar trabajadores sociales y enfermeros disponibles para reunirse con usted y su familia durante su estancia, éstas, hoy en día, son breves. No anticipe recuperarse en el hospital, sino en su hogar o en una instalación de cuidados intermedios.

PASO DOS: Seleccione alguien que abogue por usted

- ¡**TODOS** en el hospital necesitan de alguien que abogue presente en todo momento! Cuando usted seleccione formalmente alguien que abogue, esa persona puede quedarse con usted las 24 horas del día y actuar a favor suyo. Seleccione un miembro de familia o una persona con la que pueda comunicarse.

- Tómese la oportunidad por adelantado para discutir lo que pueda necesitar de ayuda, qué tratamientos puede desear recibir y a qué medicamentos puede tener alergias.
- Hágle saber a su médico, y a los que le atienden, su deseo de un abogado, o miembro de familia, participando de su atención.
- Usted también puede considerar actualizar su (Poder de Abogado Durable para la Atención de Salud (*Durable Power of Attorney for Healthcare*), o preguntar sobre se necesita una forma para la Liberación de Archivos Médicos (*Release of Medical Records*) para compartir información de tratamiento. El hospital tendrá una forma separada que usted tal vez desee llenar por adelantado.
- También, es importante tener su abogado con usted durante el proceso de admisión de paciente interno. Usted (o el abogado, si no usted no puede) firmará muchos papeles importantes que le notifican sobre cobros, estancia hospitalaria y sus derechos mientras sea paciente. Cualesquier preguntas puede preguntarlas entonces, o después, tras leer cuidadosamente las copias firmadas.
- Si hay varios miembros de familia compartiendo la tarea de abogacía, haga que ellos hagan anotaciones en los reportes diarios que están al lado de la cama. Los reportes diarios mantienen en contacto a los abogados con el medicamento, los exámenes y los tratamientos y las condiciones generales del paciente. También pueden anotar preguntas para futura referencia cuando hablen con un médico asistente.

PASO TRES: Es clave la buena comunicación

- Empieza compartiendo su historial clínico con su médico. Una vez en el hospital, comparta libremente información actualizada sobre su atención con todos

.....**Superando Nuestros Retos**

los que le atiendan. Es un error suponer que el turno de noche se haya comunicado con la estación de enfermeros, que a su vez se haya comunicado con su médico. Y, no tenga miedo de pedirle al personal su identificación.

- Si se está administrando medicamentos, pregunte el nombre, dosis y propósito del tratamiento. Si está familiarizado con el medicamento, revise para ver si aparenta o huele igual que el que conoce. Recuerde, usted tiene el derecho de paciente de rechazar cualquier tratamiento o medicamento que le ofrezcan.
- La naturaleza de la atención hospitalaria requiere personal veinticuatro horas al día, con una cantidad mínima de tiempo para comunicarse. Si algo no le parece bien, pida que le pongan atención a ello. Una encuesta de la National Patient Safety Foundation encontró que 42% dijo que habían sido “afectados por errores médicos”, directa o por medio de un pariente.
- Asegúrese de recibir todas las instrucciones verbalmente y en escrito y que usted entienda. Haga preguntas sobre cualesquier instrucción que no le sea clara a usted.

PASO CUATRO: La salida (dada de alta)

- Antes de su hospitalización, tómese el tiempo para familiarizarse con los beneficios de cuidado en hogar de la póliza de su seguro. Encuentre los nombres de las agencias de su área que cubre su póliza.
- Obtenga el nombre, número telefónico y la persona contacto de la agencia de atención hogareña que usted escogió. Después de regresar a su hogar, comuníquese con la agencia para confirmar su arribo y verifique la primera visita programada a su casa.
- Hable con familiares y amigos sobre la ayuda que piense necesitar y quiénes serán responsables de proveérsela. Sepa cuáles farmacias están abiertas las veinticuatro horas.

¿Qué tal si la dan de alta antes de lo que pensaba estar preparada para salir del hospital? ¿Qué tal si no puede hacer esos arreglos de atención en el hogar o

los equipos médicos que quería? Según Ann Kasper, del programa sobre seguros médicos y abogacía HI-CAP (Health Insurance and Advocacy Program), bajo Medicare usted tiene el derecho de solicitarle al hospital una declaración de no-cobertura (llamada Statement of Non-Coverage). Subsecuentemente, usted debe entonces comunicarse con la organización para la mejora de calidad, llamada Quality Improvement Organization o CMRI) telefoneando al 1-800-841-1602. Entonces, a usted se le concederán hasta setenta y dos horas de estancia extendidas en el hospital bajo los lineamientos Medicare. Durante este tiempo, la organización hablará con los médicos y proveedores del hospital para determinar qué tratamiento ulterior requiere usted. El costo de esta estancia adicional no se le cobrará a usted.

Los pacientes de Alzheimer con frecuencia no tienen la capacidad de comunicarse efectivamente con el personal hospitalario. Es importante que el abogado de la persona con la enfermedad de Alzheimer le informe a los proveedores de atención a la salud sobre la existencia de este diagnóstico. No suponga que el proveedor entenderá que un paciente con Alzheimer no puede responder apropiadamente a preguntas, no puede evaluar el nivel de dolor ni recordar las directivas en la atención de su salud. El abogado del paciente con Alzheimer debe estar familiarizado con su cuidado, sus métodos de comunicación y *poder educar a los proveedores del* cuidado sobre la enfermedad de Alzheimer durante el curso del tratamiento.

Los pacientes pueden participar creando una experiencia de calidad en su atención al estar involucrado, compartiendo información y entendiendo sus derechos de paciente. Todos tienen un papel para mejorar la provisión de atención a la salud y nadie se beneficia más del esfuerzo que usted.

Translation provided by Leopoldo Treviño

John is 30 years old and Julia is 40 years old.



Vosburg Hotel
San Jacinto, California
"City Hotel in the Country"
late 20s

Visit the *American Local History Network's* webpage at <<http://www.usgennet.org/usa/ca/county/riverside>> to read the history of Riverside County and view more pictures.....

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Happy Holidays!



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