

# HEALTH CARE ALERT

A QUARTERLY PUBLICATION PROVIDING HEALTH CARE TIPS FOR PEOPLE WITH INTELLECTUAL AND/OR DEVELOPMENTAL DISABILITIES AND THEIR SUPPORT TEAMS

Summer  
2010

## Risk Management Corner

### Chinese proverb: *“One picture is worth ten thousand words.”*

Keeping your camera charged and ready to take a picture may come in handy when an injury occurs. Make sure the date/time feature is activated and accurate. Placing a ruler, grid or sized object in the picture can help provide measurements and some cameras are even equipped with this feature. Taking a moment to snap a picture may save countless time during an investigation into an injury. If you have witnessed the injury and know the area of the body where it occurred, take the picture. The small red area today may be black and blue tomorrow. In addition to injuries, taking pictures of a pressure ulcer or wound may also be helpful in tracking the progression of healing.



*Before snapping away, however, remember to obtain permission before taking any pictures and that confidentiality and privacy are foremost. These pictures should only be shared on a need-to-know basis.* Sheets and towels could be draped so that only the immediate injury or wound area is present. If the person has been taken to the emergency room, ask if the picture can be taken there.

## Sharing Information

Did you ever do a puzzle only to find that a few pieces were missing? What a disappointment to put all that time and energy but then have an incomplete picture.

Do we give incomplete pictures to our health care team and emergency services? Are we holding back pieces of the information “puzzle” because we are deciding what is important to share? Are we not giving complete information because we don’t have complete information? We are entering dangerous territory if we do any of the above.

Take the opportunity to step back and review your lines of communication for health care issues. Here are some general guidelines:

1. Ensure that daily communication of information occurs in a documented form and that people are held accountable for writing and reading this.
2. Keep an up-to-date Medical History Summary – this document should accompany the person to all medical appointments,

emergency room visits, and hospitalizations. 3. Inform Emergency Medical Services/ Emergency Room staff/health care providers of ALL health issues. This should include recent illness, hospitalizations, medication changes, and injuries. Don’t decide what is important or not important or the time frame.

**Example A:** Harry was camping in the woods three weeks ago and has been fine until today. While we may not think that his camping trip is important information, it may be a piece of the puzzle of why he is currently ill.

**Example B:** Sarah had a urinary tract infection a month ago, took antibiotics, and was cleared by her primary physician to return to work. You might think that this health event was minor and over, however, this is important health information to share.

**Example C:** Jonah uses a wheelchair for ambulation. He has a pressure ulcer on his back and has not been feeling well. He goes to his physician for an evaluation. Because he is in the wheelchair, the physician does

her assessment with him in the chair – she does not see the pressure ulcer and no one has provided this information. This is an important health issue that should have been shared and may have guided or focused the assessment.

*The bottom line is to tell health care personnel everything and let them decide if the information impacts the current situation.*

### Inside this issue:

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\*To find out about other companies that provide home health care services, please contact your insurance company directly or contact PCHC for support.  
\*PCHC does not support or advocate for any one company. We share all of our resources to keep you fully informed.

## PA Enrollment Services

As in the past, PCHC will continue to provide convenient and informative updates in regards to health insurance and its effect on the people we serve. Not long ago PCHC informed the Southeast Region of Pennsylvania of the two new Managed Care Organizations (MCO's); Aetna Better Health and Coventrycares. Now, in addition to the MCO's we have five Medical Assistance plans for the people who live in the HealthChoices Southeast Zone; Aetna Better Health, AmeriChoice, Coventrycares, Health Partners and Keystone Mercy. For additional information on the various plans and their services, please click on the following link: [http://www.enrollnow.net/PASelfService/pdfs/English/HC%20Comparison%20Chart\\_Southeast\\_Eng.pdf](http://www.enrollnow.net/PASelfService/pdfs/English/HC%20Comparison%20Chart_Southeast_Eng.pdf).

Were you aware that if you are dissatisfied with your current MCO you have the right to change your MCO?

Visit [www.enrollnow.net](http://www.enrollnow.net) or call 1-800-440-3989

Once you have arrived at the website you will have the choice to complete your registration online, by phone or mail. If you decide

to enroll online, you will register as a new user by entering your recipient number and last name. Once enrolled, you can choose a health plan and/or make adjustments to your current health plan. Changes to your plan could include, but are not limited to: a change in your doctor and passwords. In addition, you can make complaints and view your enrollment summary.

After you choose a new MCO, you will be sent an ID and a member handbook.

PA, Enrollment Services ([www.enrollnow.net](http://www.enrollnow.net)) is a site designed to help people choose a health plan and compare benefits and services. Services also include: mental health and substance abuse support, transportation assistance, consumer meetings, frequently asked questions (FAQ's), charts, brochures, contacts and links.

If you have questions or need help navigating PA, Enrollment Services please feel free to contact Julio Nieves, Health Care Community Outreach Specialist, at (215)-546-0300 ext. 3387 or [Jnieves@PMHCC.org](mailto:Jnieves@PMHCC.org).

## **PCHC Storytelling Project “Bridging the Gap...One Story at A Time”**



Philadelphia Coordinated Health Care (PCHC) is conducting a storytelling project entitled: “*Bridging the Gap...One Story at A Time.*” This storytelling project is designed for individuals who have intellectual/developmental disabilities (I/DD) as well as mental illness to share their stories in a way that engages people, changes perceptions and connects them to the community. By helping individuals tell their stories, PCHC hopes to reduce disparities through increased cultural sensitivity, creating public awareness, changed societal assumptions, and increased acceptance of people who have I/DD and those with I/DD as well as mental illness. As a participant of the “*Bridging the Gap...*” project participants will be able to tell their stories through various methods, including: video recording, audio recording and written interviews.

PCHC is collaborating with StoryCorps for the audio recording portion of the project. StoryCorps is a national oral history project whose mission is to “provide Americans of all backgrounds and beliefs with the opportunity to record, share, and preserve the stories of our lives.” On behalf of the PA Developmental Disabilities Council, *Dual Diagnosis Services and Supports* Grant, StoryCorps and PCHC will be holding a 2 day storytelling event on July 19, 2010-July 20, 2010. Participants of the event will be interviewed for a 40 minute audio recorded segment, focusing primarily on their personal and emotional lives and their experiences surrounding having and/or supporting individuals who cope with dual diagnosis.

In addition to the audio recordings, PCHC will be capturing video recordings and written stories to effectively promote the opinions and stories of people with I/DD. All information obtain from this project will be used to increase public awareness about individuals who cope with intellectual and developmental disabilities, as well as mental illness. Ultimately, it is our goal to make a compelling case about people who cope with I/DD and mental illness, their struggles, successes and more importantly, their humanness.

This storytelling project is ongoing and PCHC is still looking for participants. If you are interested in participating, we would be delighted to capture your story. Please contact Monique Shaw, Community Outreach Projects Manager, at 215-546-0300 ext. 3230 or [MShaw@pmhcc.org](mailto:MShaw@pmhcc.org) with any questions or to volunteer.

## American Cancer Society Cancer Resource Network Provides Free Resources to Cancer Patients and their Families



*Information, Day-to-Day Help, Emotional Support  
Available 24 Hours a Day*

The American Cancer Society understands that dealing with cancer is difficult, and makes help easy to find and easy for you to pass along to those in your care. The Society has specialists in your community who can help you navigate your patients through their cancer journey.

For the more than 74,000 people in Pennsylvania who will be diagnosed with cancer this year, there will be many questions and emotions. A newly diagnosed patient may have questions about how to tell his or her family, what treatment options are available, or may need help understanding the complex medical system. There will be many practical considerations as well, such as what treatment will be like, how to handle financial concerns, or how to get to and from appointments. Through its Cancer Resource Network, the Society offers programs and services that address the needs of those touched by cancer.

“We do everything we can to improve quality of life for patients, caregivers, and survivors during and after diagnosis and treatment,” says Garry Pincock, CEO, The American Cancer Society, PA Division Inc.

“Whether it’s matching people with appropriate clinical trials, providing information on managing side effects of chemotherapy, helping people get to their treatment appointments, or providing a free place to stay during treatment far from home, the Cancer Resource Network offers help and hope throughout the cancer experience.”

The Society provides many ways for patients and caregivers to connect with survivors and other volunteers – one on one or in groups – to share experiences, learn about cancer, and gain encouragement.

Volunteer drivers provide transportation for patients to and from treatment appointments through the Society’s Road to Recovery® program. American Cancer Society Hope Lodge® facilities across the U.S., including two in Pennsylvania, offer free, temporary lodging to patients and their caregivers who have to travel 40 miles or more from home to receive treatment. I Can Cope classes help patients and caregivers with many aspects of treatment with classes such as, Managing Cancer Pain; Taking Care of Money Matters; and Side Effects of Treatment. I Can Cope classes are available both online and in person. Cancer Resource Network programs and services meet needs that may arise from the day of a diagnosis through years after completing treatment.

All American Cancer Society services are offered free of charge, and information is available 24 hours a day, seven days a week. To learn more visit [cancer.org](http://cancer.org), or speak to a trained Cancer Information Specialist in your community by calling 1.800.227.2345.

The American Cancer Society combines an unyielding passion with nearly a century of experience to save lives and end suffering from cancer. As a global grassroots force of more than three million volunteers, we fight for every birthday threatened by every cancer in every community. We save lives by helping people stay well by preventing cancer or detecting it early; helping people get well by being there for them during and after a cancer diagnosis; by finding cures through investment in groundbreaking discovery; and by fighting back by rallying lawmakers to pass laws to defeat cancer and by rallying communities worldwide to join the fight. As the nation’s largest non-governmental investor in cancer research, contributing more than \$3.4 billion, we turn what we know about cancer into what we do. As a result, more than 11 million people in America who have had cancer and countless more who have avoided it will be celebrating birthdays this year. To learn more about our programs and services, call us any time, day or night, at 1-800-227-2345 or visit [cancer.org](http://cancer.org).

## *Allergies and Sensitivities*



Allergies are a very common problem affecting at least two out of every 10 Americans. According to the Asthma and Allergy Foundation of America, allergies account for approximately 17 million visits to the doctors each year.

Do you suffer from allergies? What can you do to treat and prevent allergy attacks?

First, let's start with what an allergy is...

An allergy is an abnormal response within the immune system. People who have allergies have an immune system that reacts to a usually harmless substance in the environment. This substance is called an allergen. Anything can be an allergen. Common dust, pollen, plants, medications, certain foods, insect venoms, animal dander, viruses, or bacteria are examples of allergens. First, a person is exposed to an allergen by inhaling it, swallowing it, or getting it on or under their skin. After a person is exposed to the allergen, a series of events create the allergic reaction.

Symptoms of an allergic reaction include any, some, or many of these:

- Skin: redness, itching, swelling, blistering, weeping, crusting, rash, eruptions, or hives
- Lungs: wheezing, tightness, cough, or shortness of breath
- Head: swelling of the face, eyelids, lips, tongue, or throat; headache
- Nose: stuffy nose, runny nose (clear, thin discharge), sneezing
- Eyes: red (bloodshot), itchy, swollen, or watery
- Stomach: pain, nausea, vomiting, diarrhea, or bloody diarrhea

The severity of an allergic reaction's symptoms can vary widely. Mild symptoms may be almost unnoticeable, just making you feel a little "off." Moderate symptoms can make you feel ill, as if you've got a cold or even the flu. Severe allergic reactions are extremely uncomfortable, even incapacitating. Most symptoms of an allergic reaction go away shortly after the exposure stops.

The most severe allergic reaction is called anaphylaxis. In anaphylaxis, allergens cause a whole-body allergic reaction that can include: hives and itching all over (not just in the exposed area), wheezing or shortness of breath, hoarseness or tightness in the throat, and tingling in the hands, feet, lips, or scalp. **Anaphylaxis is life-threatening and requires immediate medical attention. Symptoms can progress rapidly, so call 911 if there is any suspicion of anaphylaxis.**





The best way to prevent allergy symptoms and minimize your need for allergy medicine is to avoid your allergens as much as possible and to eliminate the source of allergens from your home and other environments.

There are several medications that may be used to treat an allergic reaction:

- Antihistamines help relieve rashes and hives, as well as sneezing, itching, and runny nose.
- Decongestant pills, sprays, and nose drops reduce stuffiness by shrinking swollen membranes in the nose
- Corticosteroid creams or ointments relieve itchiness and halt the spread of rashes.
- Corticosteroid nasal sprays help reduce the inflammation that causes nasal congestion.
- Oral Corticosteroids may be prescribed to reduce swelling and stop severe allergic reactions.
- Epinephrine comes in pre-measured, self-injectable containers, and is the only medication which can help during a life-threatening anaphylactic attack. To be effective, epinephrine must be given within minutes of the first sign of serious allergic reaction.

Immunotherapy or allergy shots can often prevent allergy symptoms. It involves giving a person increasingly higher doses of their allergen over time. The person gradually becomes less sensitive to that allergen. This can be effective for some people with hay fever, certain animal allergies, and insect stings. It is usually not effective for allergies to food, drugs, or feathers, nor is it effective for hives or eczema.

There are some simple things you can do to prevent allergies at home, work/ school, outside and when you travel. Dust to control mites, vacuum often, reduce pet dander, shut out pollen by keeping windows and doors closed. Use an air filter and clean it regularly or run the air conditioner and change the filter often. Stay inside during peak pollen times, usually between 10:00 a.m. and 4:00 p.m. Keep your car windows closed when traveling. Avoid mold spores by reducing moisture. Fix any leaks inside and outside of your home and clean moldy surfaces. Plants can carry pollen and mold too, so limit the number of houseplants. Dehumidifiers will also help reduce mold. Stay indoors when humidity is high and on days with high wind, when dust and pollen are more likely to be in the air. Wear a facemask if you are outside to limit the amount of pollen you inhale. Shower after spending time outside to wash away pollen that collects on your skin and hair.

To learn more, head to: The Asthma and Allergy Foundation of America, [www.aafa.org](http://www.aafa.org)



## Don't Take A Vacation From Health - Have a Healthy Vacation

Sometimes the stress and excitement of travel can make you more likely to get sick. Following a few simple tips may help you stay healthy throughout your trip.



**Accommodations and Needs** – if you have any special needs such as hand rails in the bathroom or no stairs, discuss this prior to making the vacation reservations. Ask to see pictures of the room or house before finalizing your plans.

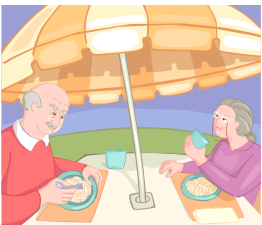


**Taking Medication and Medical Supplies** – include any that you use on a daily basis and enough for the entire trip. Bring a complete list of your medications with name, dosage, route, and frequency. Don't forget any "as needed" medications ordered as they may be needed during the trip. Bringing the basics is usually helpful – such as medications to relieve pain or stomach upset. If a time zone change is expected, this may impact your medication schedule. Discuss this with your healthcare provider prior to the trip. Keep your medication where it is easy to reach – you don't want to pack it with checked luggage or in the trunk of the car.

**Medical History** – don't travel without one. Make sure it includes your immunization information and your physician's name, address and telephone number.

**Insurance Cards and Photo Identification** – these may be needed in the event of a visit to a doctor or emergency room or for picking up prescriptions from a pharmacy. Prior to the trip you might consider checking with your medical insurance company for coverage of out-of-town needs. Ask them for the names of doctors/hospitals in the area where you will travel.

**Basic Safety** – you are in a new place. For some people adjustments may need to be made. Take a few minutes to scout out your new location. Review the evacuation plan in the event a fire or catastrophe should take place in the new location. Determine if there are any fall hazards such as steep or smaller steps, throw rugs, loose or absent hand rails. Think about what accidents could happen and make a plan as to how to prevent them. For example, if your hotel room does not have a bathtub mat and the bathtub is slippery, contact the front desk to see what can be done.



**Eating and Drinking** – being on vacation does not mean a vacation from prescribed diets or food modifications (changes to solids or liquids). Make sure any necessary eating equipment is included on your packing list. Bringing adaptive bowls, cups, utensils, mats, and food processors is necessary to ensure that any meal plans are followed exactly as ordered. Bringing a copy of the meal plan is also necessary. Take advantage of the local food offerings. Foods that have been boiled are generally safe as well as fruits and vegetables that have to be peeled before eating. Avoid eating uncooked or undercooked meat. Many experts suggest you only drink bottled water when you travel.

The goal is to relax and enjoy your vacation. Be safe and prepared so your vacation memories are good ones.

Summer Travel Guide, Valeant Pharmaceuticals, April 2007



Aging Corner

## Aging Skin Has Special Needs Too!

There are two factors that influence the way skin ages: genes we inherit trigger intrinsic or internal aging and extrinsic or external aging triggered by environmental factors.

**Intrinsic Aging**

This is a natural aging process which actually starts at around age twenty-five. Collagen, the stuff in skin that gives it the elasticity to 'snap' back into place begins to be lost and skin begins to lose some of its 'spring-ability'. Over time, dead skin cells don't shed as quickly and the amount of new cells available to replace them decreases. Skin becomes thinner, slowly losing the fatty layer underneath, leading to 'hollows', especially under the eyes. Dry, itchy skin is common in the elderly as the skin no longer moisturizes itself; together with an inability to sweat efficiently to keep the skin cool. Genes control how quickly normal aging progresses. Most people don't notice any significant changes until they are into their forties.

**Extrinsic Aging**

Most extrinsic or external aging is caused by exposure to the sun without protection. "Photoaging" is the term used by dermatologists to describe aging caused by the sun. Ultra Violet Photography allows us to see damage beneath the surface of the skin years before outward signs appear. Even only a few minutes exposure to the sun daily over time can cause noticeable changes! Dermatologists recommend using sun screen all year round. Use a product that has an SPF of fifteen or greater. The sun's rays can pass through clouds and it is possible to be accidentally over exposed to the sun on a cloudy day. Additionally a person can get sun burned while swimming; so limit time in direct sunlight. Use a hat that shades the neck, ears, eyes and head. Wear loose, lightweight long-sleeved shirts and long pants to protect the arms and legs. Avoid tanning salons and sunbathing! Always remember that individuals taking psychotropic medications can experience increased sun sensitivity.



So, how should we maintain the integrity of aging skin?

*Be kind to it and give it what it needs!*

If skin is dry and itchy, do not take very hot baths or showers and use mild moisturized soap. Stay out of the sun and make sure enough clear fluids are consumed. Apply moisturizing lotion daily and consider investing in a humidifier to keep room air moist. Aging skin can develop bruises and scratches very easily. Very elderly, fragile skin can tear apart. When you are assisting an elderly person to ambulate, bathe or dress ensure that skin is not scratched or banged. In the event that skin is damaged, observe the area during the healing process at least daily, keep the area clean and dry. Do not apply perfumed products. If the area becomes inflamed or itchy contact the individual's Primary Care Physician (PCP) for advice. If the individual has an existing dermatological diagnosis make sure that the dermatologist is also informed.



As we age over time skin begins to wrinkle. Habits can cause wrinkles!

Frowning and smiling repeatedly will cause wrinkles eventually. You may not be able to change but encourage individuals to stop smoking. The quest to preserve a youthful appearance can be a great motivator! Not smoking is a great way to prevent wrinkles.

A huge number of products are available over the counter that claim to make wrinkles disappear, not all of them work and some may have ingredients that cause skin irritation. If you know an individual who is particularly worried about wrinkles ask them to talk to their PCP or dermatologist.

# PADDNN Honors



This year the Pennsylvania Developmental Disabilities Nurses Network (PADDNN) was once again honored to receive the Developmental Disabilities Nurses Association's Network Achievement Award for its outstanding contribution to both Developmental Disabilities Nursing (DDN) and the Developmental Disabilities Nurses Association (DDNA). It is quite an accomplishment to receive this distinction two times.

The PADDNN has always encouraged membership in and certification by DDNA for all DDNs in Pennsylvania. Pennsylvania ranks high in the number of DDNA members with the Certified in Developmental Disabilities Nursing (CDDN) designation for RNs and Developmental Disabilities Certified (DDC) for LPNs. The PADDNN also has a scholarship program to encourage participation in both PADDNN's and DDNA's annual conferences.

The PADDNN's sole purpose is to support the specialty of DD nursing in PA. The PADDNN conducts four annual meetings a year. One meeting per year is held in four different regions of PA. Our current goal is to offer 3 hours of continuing education (CE) at PADDNN meetings that

can be applied to the CE requirement for licensure of RNs in PA and for continued certification with DDNA. The PADDNN has hosted five annual one day conferences, offering additional CE hours and networking opportunities for its members. Our sixth annual conference will be held on 10/13/10 at the Eden resort in Lancaster, PA.

Philadelphia Coordinated Health Care (PCHC) recognizes the significant role that DDNs have in helping people with I/DD receive the best possible health services that they can. Because of this PCHC supported the development of the PADDNN by Patty Graves, BSN, RN-BC, CDDN and Jack Toomey, RN, CDDN.

Jack Toomey, RN, CDDN has served as the President of PADDNN for nine years and is currently serving as Vice President.

For membership and additional information about the PADDNN, please see the PADDNN website at [www.paddnn.com](http://www.paddnn.com) or call Jack Toomey, RN CDDN at 215-546-0300 Ext 3662.

**Upcoming  
Regional Nurse  
Network  
Meetings**

Please join us quarterly for updates and educational presentations.

July 9, 2010  
October 8, 2010  
January 7, 2011  
April 8, 2011

## Summer Heat Safety

Each year the City of Philadelphia Department of Behavioral Health and Mental Retardation Services releases their Heat Safety Policy. This policy and accompanying information is extremely important to review with individuals diagnosed with intellectual/developmental disabilities and anyone involved in providing supports. Please contact us if you would like information on how to obtain a copy. PCHC has also addressed this issue in numerous Health Care Alerts which are available on our website in the Documents Section under Newsletters. The Summer 2009 edition can be accessed at:

<http://www.pchc.org/Documents/Newsletters/Current-HCAs/HCA-40-Summer2009.pdf>

Some highlights from the Heat Safety Policy include these tips from the Philadelphia Corporation of Aging (PCA):

- Drink lots of water
- Avoid coffee or alcohol
- Stay in air-conditioned areas
- Dress cool
- Have someone check on you during heat waves
- Know the signs of heat stroke – high fever, flushed face, throbbing headache, confusion, little or no perspiration, rapid pulse
- Seek medical help if any signs or symptoms of heat stress or heat stroke are present

Also...

- **NEVER** leave anyone alone in closed vehicles
- **WATCH** people who take medications for any side-effects

## Philadelphia Coordinated Health Care

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