

Sprenkle Village

After the usual opening ceremonies, the agenda was changed to put the program ahead of the rest of the business meeting, in order to accommodate the speaker whose wife was expecting the delivery of his baby. Dr. Myron W. Ritter introduced the speaker, Dr. Flavius Lilly, PhD., Vice President for Quality and Strategy Development, Memorial hospital, York, PA.

Dr. Lilly illustrated his talk with slides and offered a number of useful sites on the Internet from which to gather additional information. He began by introducing a number of changes that are already taking place which he believes will significantly alter the delivery of health care in the future. For instance, he compared the prices of basic medical procedures in the United States and other countries. Angioplasty, which costs \$38,000 here, can be obtained for \$6,300 in India, including airfare and a stay at a resort. Any number of other countries shows the same price disparities and outcomes which may be better than those in American hospitals. [Planethospital.com](http://Planethospital.com) is a website to facilitate arranging foreign procedures. Americans are now traveling abroad in significant numbers to get better, cheaper medical procedures. Dr. Lilly said the Internet will change health care in other ways. It is already possible for patients to converse online with some physicians. More adults will want to get information directly from their doctors in the future. [Relayhealth.com](http://Relayhealth.com) enables you to do this now if your doctor is on line.

Three major problems in health care addressed by Dr. Lilly were lack of access by the 52 million Americans without health insurance, a number equal to the population of 30 states; patients not knowing the quality of the care they receive; and society not knowing whether physicians are worth the very expensive care delivered in our country.

Dr. Lilly asked listeners to imagine a future in which everyone had access to health care. How could this make sense in our system? He said it would require better quality at one half the present cost. He outlined five changes he believes necessary to achieving universal access, better quality, and a fifty percent cost reduction. (1) Generational changes are leading to consumers who demand what they want and get it. (2) Better treatment of chronic diseases which cause 75 percent of current costs, but are all preventable by better behaviors. His examples included obesity, whose epidemic rise has been charted since 1985, smoking and lack of exercise. (3) Digitization. Dr. Lilly discussed three digital trends which are all underway, but will expand greatly in the near future. These are real-time 3-D imaging, computer-assisted diagnostics and robotic surgery. The latter is automatic surgery with no doctor in the room, which is already happening. The Department of Defense has been developing this for battlefield use and hopes to employ it by 2012. (4) Transparency, which means that physicians will have to share more data with patients and hospitals must report outcomes on website. Dr. Lilly said the present system is not sustainable. Health care represents a growing proportion of the federal budget, but the government pays hospitals less money each year for Medicare and Medicaid. This results in cost shifting which moves expenses of hospitals and doctors to private insurance plans. Then employers drop employee insurance. Employer-provided insurance, however, is the main way that Americans access health care. More uninsured people means that hospitals and doctors, who are legally required to treat people, shift more unreimbursed expenses to private insurance patients. (5) Consumerism, which he explained as Americans getting what they want at a good price. The problem in medicine, he said, is that we don't know what any procedure costs, nor does the patient know whether it was worth it. Studies show that there is no relationship between cost and quality in this field. Dr. Lilly concluded that capitalism and health care do not mix. In a world survey of how satisfied patients were with health care, the United States ranked last among industrialized nations. Our infant mortality ranking is also among the worst. In 1970, 70% of Americans trusted health care workers; in 2006, only 32% did. In that year 65% trusted nurses, 61% trusted physicians, and 8% trusted HMOs.

Dr. Lilly explored some myths about hospitals, such as that the Mayo Clinic is superior to Hanover Hospital or that the Atkins diet is healthy and works. His charts comparing hospitals showed regional hospitals offered superior care. He argued that academic medical hospitals are poor because they train new doctors who mess up; residents have a higher rate of errors and less specialization than physicians in private practice. He recommended the website [healthgrades.com](http://healthgrades.com) to check on quality of hospitals. Dr. Lilly concluded that if a consumer can't choose on the basis of who does it best and how much it costs, it will always cost too much and will never be as good as it should be. This information will become more

accessible in the future, but we should all try to use information now available, especially on the Internet, because there are many poor doctors everywhere. We must work for quality; he said and demand something better.

Dr. Lilly answered questions about the process of consumers evaluating physicians. He recommended [healthgrades.com](http://healthgrades.com) for giving information about doctors, especially for malpractice data; the Pennsylvania Department of Health website; and [leapfrog.com](http://leapfrog.com). Everyone should request data from a doctor, such as “Is this the only surgery you do? Is your surgical site infection rate under 2%? And what is your complication rate?” He said that if answers were poor, you should leave immediately.

Answering a question about how to get medical costs in line, Dr. Lilly recommended a report on “Redefining Health Care” done at Harvard University, which has suggestions that he approves. It is available by googling Porter and Teisberg .

The business meeting followed, with the approval of the minutes. Secretary Fuller reviewed the Quarterly Meeting dates through October 2009, and said that the next Executive Committee meeting would be on December 1, at Bethany Village. He urged community groups to use the computer to make reservations.

In the absence of Carol Wendel, Ev Fuller gave a brief membership Committee report. Treasurer Richard Morris reviewed his report, which had been distributed, and his report was accepted unanimously.

Sarah Hughes gave the following Legislative Report. There were some small victories this year. The Medicare bill that passed Congress in July was one. The final Pennsylvania budget provided a one percent increase for skilled nursing care facilities and a three percent increase for home care. The Rendell administration had proposed no increase in funding for skilled care nursing homes. The debate on the state budget is part of a larger national tendency to cast home care and community based care as opponents. This contrast is dramatized by stories of aging people desperate to avoid dreaded nursing homes so that they may stay in their homes at any cost to their health or family members. Most of us know this is not really a fair picture of the alternatives open to us. Nursing homes have changed and there are a range of options between our original homes and skilled nursing home facilities. We need to help publicize this broad continuum of services from the CCRC’s we know, to subsidized apartments, to assisted living, to adult day care and other home based services, to skilled care facilities for those who need round the clock nursing.

The most urgent state issue concerns the proposed regulations for Assisted Living facilities that were finally published by the Department of Public Welfare in August. Public comment on these lengthy regulations was received up to September 15th.

Before discussing the key issues, a little background information is useful. Until passage of Act 56 in July 2007, Assisted Living was a marketing term, with all facilities called that actually were licensed by the state as Personal Care Homes. Two years ago, detailed new regulations for Personal Care Homes were issued, and then passage of Act 56 defined a new level of elder care called Assisted Living. New separate licenses will be granted for each type of facility. One very significant difference, especially for non-profit CCRC’s will be the fact that Assisted Living residents will now be eligible for Medicaid funds, whereas previously only those in Skilled Nursing Homes could receive these government funds. In fact, one of the reasons for passage of Act 56 was to enable some residents to be moved from Skilled Care Nursing Homes to Assisted Living, which costs about one half as much per day. This would both save the state government considerable amounts of money and also allow non-profit facilities to offer charitable care to needy residents at less cost.

The problem with the proposed Assisted Living regulations is that some provisions may be so difficult for existing facilities to meet that they will be forced to seek the less desirable Personal Care home license. Here are some key issues:

1. Bedroom size and equipment: Assisted Living – 175 sq. ft. per room, with no more than two people in a room and an additional 80 sq. ft. for a second person; microwave and refrigerator in each room and access to a kitchen for resident use only; private bath equipped with an emergency notification system. Personal Care home – 80 sq. ft. per room with no more than four people per room and an additional 60 sq. ft. per resident in a shared room; one flush toilet per six residents and one bath/shower per ten people.
2. Public spaces: Assisted Living – a furnished living room or lounge that will accommodate all residents at

one time, with at least 15 sq. ft. per living unit for up to 50 living units and a total of 750 sq. ft. for more than 50 units, equipped with a working television and radio; at least two wheelchair accessible common rooms or activities such as reading, recreation and group activities; access to outdoor and indoor recreation space; an operable kitchen for preparation of resident food; a dining room equipped to accommodate the maximum number of scheduled for meals at one time, with at least 15 sq. ft. per person eating; room service without added charge; laundry service for linens and clothing. Personal Care home – a furnished living room or lounge that will accommodate all residents, equipped with a working television and radio; access to out door and indoor recreation space; an operable kitchen for preparation of resident food; a dining room able to accommodate the maximum number of residents scheduled to eat at one time; room service for meals without added charge; laundry service for linens and clothing.

3. Staffing: Assisted Living licenses require from one to two years of relevant health care experience in addition to degrees such as R.N., L.P.N. or nursing home administrator's license, while Personal Care Home license requires only the degrees. The administrator of an Assisted Living residence must be on-site for 40 hours per week, while the Personal Care Home administrator needs only 20 hours on-site each week. An Assisted Living residence must have a nurse on call at all times and a dietician on staff or on contract.

The Department of Public Welfare estimates that a 75 bed Assisted Living facility that already meets the structural requirements listed above would have to spend a maximum additional \$365,000 in the first year to acquire the license and meet its requirements.

Two legislative issues that we might consider for future discussion:

1. Legislation to implement [NaCCRA](#)'s proposal for a CCRC Bill of Rights.
2. PILOTS (payments in lieu of taxes by tax-exempt charitable institutions)

A resolution of the Pennsylvania House of Representatives passed in July directs the State Legislative Budget and Finance Committee to study the effects of tax exemption on municipalities, to identify alternate funding sources, and report back by November. HB2018, a pending bill, would provide state funding to municipalities most seriously affected. This is an issue now in Shippensburg, where the township in which the state university is located has passed a ten percent sales tax on non-sports amusements in an attempt to gain revenue from public events at Shippensburg University's new auditorium. On the other hand, a recent State Supreme Court decision ruled that all parts of a charitable retirement community are tax-exempt, because even if parts, such as independent living, bring in income, they are part of the larger charitable enterprise. Previously in some counties, including Cumberland, independent living residences have been assessed for property taxes. In Franklin County, this has been an issue for Menno Haven. Now, application can be made for charitable exemption of all parts of a non-profit CCRC. However, the larger issue of payments in lieu of taxes by both charitable and government institutions remains controversial with the public.

President George Tjiattas urged all to inquire how the proposed Assisted Living regulations will affect their communities and to lobby their representatives concerning this issue.

Bud Endler reported that the next Quarterly Meeting program will feature Jan Brown, an attorney, who will discuss Elder Law. At the April Meeting, Joyce O'Brien will speak on Identity Theft. Bus Transportation may be arranged for this meeting at Foxdale Village in State College.

There was no report from the nominating Committee. President Tjiattas announced that Stuart Dickson has resigned as Newsletter Editor and asked any one willing to volunteer to succeed him.

Under Old Business, Richard Morris reported that he had reformatted the PARCR website, and will be putting the legislative reports on it and would also like some help in maintaining the site, which costs \$60.00 per year.

Chet Brown gave Audit Report, saying that he has reviewed the PARCR financial records and is satisfied that all is fine. His written report was submitted to the treasurer. The Auditor's report was unanimously accepted.

As New Business, Bud Endler reported that after review of the By-Laws, he is satisfied that no changes are needed, and his report was accepted by unanimous vote.

The following report of the Residents Bill of Rights Committee was presented by Julia Hix. The committee

has collected reports from other states and suggestions from NaCCRA (see NaCCRA Life Line, May 2008). Professor Katherine Pearson, The Dickinson School of Law of the Penn State University, has agreed to work with the committee. Input is needed from PARCR members to go forward with this project. The committee needs to know your thoughts and the needs of each CCRC. In your thinking, it is suggested that you think about rights to participate in governance, decision making, projects involving financial risks and life style changes, as well as the traditional rights to treatment, care etc.

Bob Allen reported for the insurance Committee which was asked to explore the issue of liability of PARCR officers. He spoke to insurance agents who explained that because PARCR has no employees, little money, and are involved mostly in education, we have very little risk. Insurance would cost about \$2,000 per year. He recommended that PARCR forgo coverage. President Tjiattas spoke about the resignation of Stuart Dickson as Newsletter editor, and moved that the resignation be accepted with regret and thanks for keeping PARCR informed for fourteen years. The motion passed unanimously. There was no report from PANPHA.

After lunch, the Educational component of the meeting was presented by Katherine Saidis, Executive Director of Sprenkle Village, speaking concerning Culture Change at Sprenkle Village. "Culture Change", she said, is in part, creating a home-like environment in skilled health care. For instance, by adapting morning routines to the informal desires of residents rather than using a hospital model. In a world where technology of phones, televisions, and computers is changing our lives, things are changing in CCRC's as they move from a medical to a home model. Long term care options in 2008 include: a Green House of rooms around a communal room; LIFE; adult day care; Eden homes where there are plants, animals, and children among the elderly; and outsourcing or looking for home care abroad. The cost of skilled care varies enormously, with Alaska having the highest cost of over \$400 per day. Another alternative, popular in California, is Senior Co-housing, where seniors live in units alongside single parents and share communal facilities for food.

Ms Saidis defined culture change as

1. allowing individuals to make as many choices as possible;
2. person centered care;
3. empowerment of staff as well as residents because the enthusiasm of the staff is necessary to begin culture change;
4. challenges – getting buy-ins from all departments.

She noted that it requires patience to work through the obstacles to culture change, which include financial considerations and Department of Health rules.

She has initiated celebrations of milestones to facilitate communication between staff and residents. One celebration was of the 100th birthday of a resident with a party for the entire campus. She encourages use of bicycles and golf carts. One night there was a campfire for everyone, approved by the local fire department. There have been joint resident and staff entertainments. They are changing language, for instance by renaming streets and rooms and have changed the wall colors. Since all older buildings cannot be remodeled immediately, they are redecorating and renaming - - using bright colors and pictures on communal bathroom walls and creating a spa in the old tub room. They have done little construction for renovation, relying instead on paint and simple changes.

Positive outcomes for staff have been in building relationships with residents and in encouraging initiative and empowerment at all levels. The sense of pride that has developed helps retention of staff. The outcomes for residents of the skilled care facility include having more choices and more decision making. This has led to more independence and building friendships.

In response to a question about what assistance is offered to those in Independent Living who prefer to age in place, Ms Saidis said she referred them to Lutheran Home Care or other outside helpers. She added that she has organized a letter signing party for all residents to send letters to the legislature on the proposed Assisted Living licensing rules. She was asked whether she was pro-active in including Independent Living residents in culture change. She said she is not opposed and has worked with the Resident Council, but needs to do more to involve others.

#### Community Sharing

George Tjiattas began this part of the meeting by reporting that Bethany Village recently celebrated the 100th birthday of the hot dog with a party for 180 people.

Quincy Village held a very successful Yard Sale and will use the left over items to stock a new thrift store. Quincy is also renovating a very old skilled health care center, including adding a family center and kitchen and an open nurse's station. They held a dinner dance for residents of both the health care center and assisted living units, with men from Independent Living acting as escorts. The exercise center will henceforth be the exercise studio.

Normandie Ridge reported that residents have finally gained a voting member on the governing board after seeking this right for eight years. An election for this position is now being held.

Masonic Village reported that their annual operating budget of \$152 million a year has a significant impact on the surrounding community – in fact its impact is double to triple the actual amount of dollars. All levels of public officials should be reminded of this by our member communities.

George Tjiattas thanked Katherine Saidis and Dr. Myron Ritter of Sprengle Village for hosting the meeting and adjourned the session.

The next meeting of PARCR will be held at Bethany Village, Mechanicsburg, on Wednesday, January 14, 2009.

#### More News from our Communities

##### Bethany Village

This year marked the 4th year for the Bethany Games. Again this year, all areas of living have participated. Each area held their own events and then everyone came together for the closing ceremonies. Overall there were 81 participants and 37 events from all areas of living. The closing ceremonies had speakers that represented each area.

A very successful Peach Festival was held this year. The attendance of over 400 was great. The receipts totaled over \$5,000. 72 dozen "Roly Polies" were sold as well as \$1,600 worth of pastries. Both Chicken Corn Soup and Vegetable Soup were also much enjoyed as well as the new addition of Chicken Salad. The Village is becoming famous for its delicious barbecue, made by Auxiliary Board Members.

##### Brethren Village

Brethren Village's newest endeavor, a capital campaign entitled "Upholding the Promise: Building for Tomorrow" has raised an impressive \$3.9 million toward a \$6.2 million project goal. The capital campaign is aimed at raising approximately one third of the \$17.7 million cost of construction for the new Healthcare Center and Welcome Center.

##### Garden Spot Village

The 12th Annual Festival and Benefit Auction were held October 11th. Garden Spot Village's Fall Festival and Benefit Auction have raised almost 1.8 million for the Benevolent Fund. The event began in 1997 as an Apple Festival. A craft fair was added in 1998 and in 2000 the event became a fund raiser for the Garden Spot Village Benevolent Fund

##### Green Ridge Village

A very successful Auxiliary Auction was held in September. With all income and expenses recorded, the net income for the auction was over \$7,000, surpassing last year by almost \$2,000.

##### Village at Kelly Drive

Edie Heindel was born in Berlin, Germany. During World War II she and many other children were evacuated to Bavaria. Explains Edie, "We were taken from our families and sent first to Czechoslovakia. Hitler wanted to protect the German youth." Later they were scattered to Prienbach in Bavaria. "There were American soldiers in my village," said Edie. "We were not supposed to speak to them, but we did any way. We tried to teach them German and they taught us American songs. Al taught us You Are My Sunshine."

Al Heindel graduated from York High Industrial Course in 1942, went to work for McGann Manufacturing and married. Then he was drafted into World War II. "Although I was married and had a good job," said Al, "I wanted to go to Germany; we were all anxious to fight this war."

Following the war it took five months for Edie and family to find one another. "It was a horrible time both

during and after the war, “said Edie, “but I remember the good times spent in Bavaria and kindness of the Americans.” Young Edie decided to write a thank you note to Al.

Al had returned to York. He and his wife had two children. Twenty-three years after he returned from the war, he and his wife divorced. “I decided to respond to Edie’s letter. I never thought it would get to her, but I thought I would try.” The letter did reach Edie, who had moved from East Germany to West Germany. The two started writing and a year later Edie, also divorced, visited York. Six months after the visit, Al and Edie married and settled in York. Following retirement from Allis Chalmers, Al worked part time as a driver for the Village at Kelly Drive. Three years ago, the couple moved to the Village at Sprengle Drive.

#### Landis Homes

Former Board Chair Mamo Dula received a PANPHA Award for 2008 as Trustee of the Year. Dula was selected from nominees across Pennsylvania for the award for many years as a Landis Homes Board member. Dula, a native of Ethiopia, served on Landis Homes’ board of directors from 1998 to 2007. He served on the board’s resident life committee from 1998 to 2001, was vice-chair of the board from 2001 to 2002, and served as chair of the board from 2002 to 2007. Another Landis homes employee, Belay Beyene, also from Ethiopia, was recognized as one of several nominees for PANPHA’s Caregiver of the year award.

Landis Homes is happy to announce the advent of Pathways Institute for Lifelong Learning. Class offerings will vary and present both educational and enrichment opportunities for attendees. Plans are underway to offer a small selection of courses on the Landis Homes campus in late fall of 2008 (October and November), and a more extensive schedule of courses and events is being planned for the spring of 2009. Pathways Institute of Lifelong Learning is being initiated at Landis Homes in partnership with Messiah Village of Mechanicsburg.

An art reception will be held at Landis Homes on November 6. The exhibition will feature two Lancaster artists: Kathy Breidenbaugh, showing her latest watercolor and watercolor and pencil pieces in pastel colors, and Cathy Moyer of Stevens, showing her most recent works in oils and watercolors.

#### Masonic Village

Cass Jendzurski felt a divine calling to start Songs for the Journey (SFTJ), A volunteer music ministry designed to bring peace to the dying and comfort to families... Her calling began when Cass was a professional singer, who volunteered to drive for and teach singing to cloistered Dominican Nuns of the Perpetual Rosary at the Monastery of the Immaculate heart of Mary in Lancaster. IN 1999, she drove several nuns to the hospital to visit Sister Martha’s bedside. The sisters began to sing beautiful a cappella music to Sister Martha. As the women sang, Sister Martha’s breathing became less labored, and as the singing continued, she remained very peaceful.

As the women left the room, they noticed that Sister Martha seemed pale. Before the sisters left the hospital, a doctor stopped them to say that Sister Martha had passed away. As they left the hospital, the sisters heard a doctor say, “I heard this beautiful singing. What a way to go. I just hope that when I go, someone’s there to sing to me.” Cass couldn’t get the words out of her mind. In September 1999, Cass approached Hank Gonner, director of spiritual care at Saint Joseph’s Medical Center, to discuss her idea of a ministry for the dying. He liked the concept and SFTJ was born. Several years ago, Timothy Nickel, Pastoral Thanatologist at Masonic Village, approached Cass to discuss having a special SFTJ group at Masonic Village. Cass loved the idea. “I think one of the nicest things is that when you’re living in a retirement community, you’re living in a family. This is an opportunity [for residents and employees] to offer a final gift to family members of their community.”

From a bedside chair or the floor, two or three volunteer singers let the music take over. Family members can choose from a selection of Protestant, Catholic, Jewish or secular songs, and some Hebrew and Spanish songs which the volunteers learn phonetically. They begin singing at the pace of the person’s breathing and gently slow their music. Residents relax so much that their pain often subsides. Cass explains “Music is a bridge between heaven and earth.”

#### Menno Haven

The Menno Penn Military Council held a “Veterans’ Day” Dinner on November 8th. All Menno Village, Northfield, Northgate, and Penn Hall veterans, their spouses’ widows/widowers, and guests were invited to attend. The speaker was Colonel Steven A. Shapiro, Commander, Letterkenny Army Depot.

**Sprenkle Village**

Residents of the Village at Sprenkle Drive recently participated in the checkers competition sponsored by the York County Senior Games. Bill Luther won a gold medal, and Evelyn Ziegler captured the silver.

**Newsletter Editor**

**James Stuart Dickson**

**67 Spruce Circle**

**Newville, PA 17241-9300**

**717-776-8414**

**e-mail: [jmgrv2@aol.com](mailto:jmgrv2@aol.com)**