

HEALTHY OUTCOMES

HCQU, M.C. 24-12, 100 N. Academy Ave., Danville, PA 17822
<http://www.geisinger.org/hcqu> (570) 271-7240 Fax: (570) 271-7241



STROKE BASICS: Prevention, Symptoms, Treatment

by Berkeley Wellness | May 16, 2016

Many of us worry that we are vulnerable to a heart attack, but hardly think about stroke, which is like a heart attack except that it occurs in the brain. Yet stroke is a leading cause of disability in the U.S, and the fifth largest killer. Nearly 800,000 Americans have a stroke every year, and about 130,000 die as a result. There are about 4 million stroke survivors, many disabled. Those who have had a stroke are at high risk for having another one. In fact, about one in seven stroke survivors will have a second stroke within a year of the first one.

And yet even if—or especially if—stroke runs in your family, you can change the odds. It helps to know what a stroke is, what its symptoms are, and what you should do in case you think you or someone you’re with is having a stroke. But most of all you need to know that a few very practical measures can help you avoid a stroke.

(Continued on page 6)

INSIDE THIS ISSUE:

- 1 – Stroke Basics: Prevention, Symptoms, Treatment
- 2 – The Best Diet for Blood Pressure
- 3 – May is Mental Health Month
- 4 – PADDNN
- 5 – How to Get Mental Health Help
- 7 – Horton Hears a Who
- 8 – For Strokes, Think FAST!



Welcome, Amy!

Spring has brought more than green grass, robins and tulips this year. The HCQU is excited to announce the addition of **Amy J. Weidner, RN** to our team of staff filling the Northumberland County Regional Nurse position.

She brings with her vast experience in outpatient Behavioral Health, Alzheimer’s Dementia, long term care and most recently worked in the Mental Health and Outpatient Rehab Clinic for CMSU.

It is obvious to see her passion for helping others especially individuals with Intellectual and Developmental Disabilities and the Mental Health field. Her orientation is complete and she has hit the ground running in her new HCQU role serving Northumberland County.

Welcome Amy! ■

The Best Diet for Blood Pressure

by Berkeley Wellness | April 18, 2016

A diet rich in fruits, vegetables, whole grains, and low-fat or nonfat dairy foods provides potassium, calcium, magnesium, and other nutrients that help maintain healthy blood pressure. That's the basis of DASH (Dietary Approaches to Stop Hypertension), an eating plan that is also low in saturated fat and sodium. Similar to the Mediterranean diet in many respects, it is not essentially a weight-loss diet, but if you keep daily intake to 2,000 calories a day (what the standard diet provides) or less, and if you exercise, you're likely to lose weight. One aspect of DASH that appeals to people is that it offers many choices—a wide variety of foods prepared in different ways.

A sample day on DASH

The following DASH plan is based on a 2,000-calorie daily intake; you can adjust the number of servings, depending on your weight and activity level. You'll choose from a wide range of fruits (4 or 5 servings a day, including juice), vegetables (4 or 5 servings a day); grains (6 to 8 servings a day, preferably whole grains); dairy products (low-fat or nonfat, 2 or 3 servings a day); nuts and beans (4 or 5 servings weekly); lean meats, poultry, and fish (up to 6 ounces a day); fats and oils (2 or 3 servings a day); and sweets (no more than 5 servings weekly). Serving sizes are small: 1 slice of bread; half a cup of cereal; half a cup of cooked vegetables, rice, or pasta; 1 medium fruit or 6 ounces of juice; 3 ounces of meat, poultry, or fish.



If that sounds complicated, consider this sample DASH menu:

- ♥ Breakfast: 1 cup of bran cereal with a cup of nonfat milk and a medium banana, plus a cup of nonfat yogurt with fresh fruit added. Coffee and tea are fine. Breakfasts vary; some even include a bagel and cream cheese.
- ♥ Lunch: 3/4 cup chicken salad (made with a reasonable amount of low-fat mayonnaise) on 2 slices of whole-wheat bread with a tablespoon of mustard; a cucumber and tomato salad with low-fat vinaigrette dressing; and 1/2 cup fruit salad.
- ♥ Dinner: 3 ounces of lean roast beef; a small baked potato with nonfat sour cream and a small amount of reduced-fat cheddar cheese and scallions; 2 small whole-wheat rolls with soft margarine; 1 apple; and a cup of nonfat milk.
- ♥ You get snacks, too: 1/3 cup of unsalted almonds, 1/4 cup raisins, and a cup of orange juice.

You can also download a free booklet that explains DASH from the National Institutes of Health. ■

Did you know... 1 in 5 adults have a mental health condition. That's over 40 million Americans – more than the populations of New York and Florida COMBINED.

May Is Mental Health Month

When you or someone you love is dealing with a mental health concern, sometimes it's a lot to handle. It's important to

remember that mental health is essential to everyone's overall health and well-being, and mental illnesses are common and treatable. Yet, people experience symptoms of mental illnesses differently—and some engage in potentially dangerous or risky behaviors to avoid or cover up symptoms of a potential mental health problem.

That is why this year's theme for *May is Mental Health Month*—**Risky Business**—is a call to educate ourselves and others about habits and behaviors that increase the risk of developing or exacerbating mental illnesses, or could be signs of mental health problems themselves. Activities like compulsive sex, recreational drug use, obsessive internet use, excessive spending, or disordered exercise patterns can all be behaviors that can disrupt someone's mental health and potentially lead them down a path towards crisis.

May is Mental Health Month was started 68 years ago by Mental Health America, to raise awareness about mental health conditions and the importance of good mental health for everyone. Last year, Mental Health Month materials were seen and used by 22.3 million people, with more than 8,500 entities downloading MHA's toolkit.

This *May is Mental Health Month*, we are encouraging people to educate themselves about behaviors and activities that could be harmful to recovery – and to speak up (especially on social



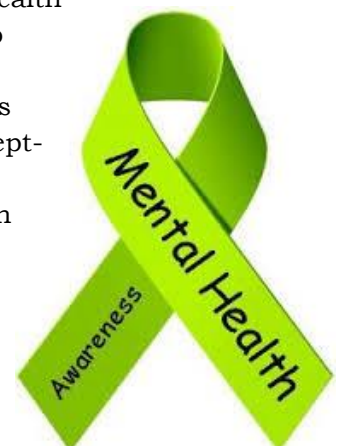
media) without shame using the hashtag **#risky-business** – so that others can learn if their behaviors are something to examine. Posting with our hashtag is a

way to speak up, to educate without judgment, and to share your point of view or story with people who may be suffering—and help others figure out if they too are showing signs of a mental illness.

It is important to understand early symptoms of mental illness and know when certain behaviors are potentially signs of something more. We need to speak up early and educate people about risky behavior and its connection to mental illness—and do so in a compassionate, judgement-free way.

MHA has developed a series of fact sheets (available at www.mentalhealthamerica.net/may) on specific behaviors and habits that may be a warning sign of something more, risk factors and signs of mental illness, and how and where to get help when needed. MHA has also created an interactive quiz at www.mentalhealthamerica.net/whatstoofar to learn from Americans when they think specific behaviors or habits go from being acceptable to unhealthy.

For more information on *May is Mental Health Month*, visit Mental Health America's website at www.mentalhealthamerica.net/may. ■



Did you know... There is a serious mental health workforce shortage. In states with the lowest workforce, there's only 1 mental health professional per 1,000 individuals. That includes psychiatrists, psychologists, social workers, counselors and psychiatric nurses COMBINED.

PADDNN

Pennsylvania Developmental Disabilities Nurses Network

PADDNN's inaugural meeting was held in March of 2000, beginning as an organization focused on recognizing the unique specialty and contribution of nurses working in the field of Developmental Disabilities.

PADDNN is dedicated to addressing the needs of Developmental Disabilities Nurses (DDNs) while recognizing the diversity of settings and roles in which DDNs function throughout the Keystone State.

Our reason for being is to support Developmental Disabilities Nursing in Pennsylvania. We continue to be a resource for the latest developments in Developmental Disabilities Nursing and the Office of Developmental Programs policies affecting I/DD nursing throughout the state.

Meetings are held on a quarterly basis, rotating throughout the various regions of Pennsylvania. The meetings are educationally focused, bringing members the latest updates in physical and behavioral health issues, legislative issues, and emerging practices.

Since October 2009, educational presentations provided at PADDNN meetings



and at our annual conference are used toward fulfillment of Pennsylvania's continuing education licensing requirements for RNs.

Additionally, we offer a great place to network with other professionals in the field, share expertise and experience. Any nurse, licensed in the state of PA, is welcomed and encouraged to attend. We strive to assure a nurturing and supportive environment for all in attendance.

PADDNN is an active local network, members strong across the state. We are also an affiliate of the national Developmental Disabilities Nurses Association (DDNA). We provide our members the latest updates from DDNA, encourage DDNA membership, and support DDNA's certification programs for RNs and LPNs for attendance

at the National DDNA Conference.

Currently, we are in the midst of our annual membership drive for PADDNN. Our membership year runs January 1, 2017 to December 31, 2017. Your membership includes free attendance to quarterly meetings (lunch provided), which allows you to earn CEUs. Also, you have a chance to win a free scholarship to the annual PADDNN and DDNA conferences.

We offer individual membership at \$35, group membership at \$30 for five or more, \$30 for students and retirees. If you are interested in joining and/or renewing membership, please contact Donna Filippi at dfilippi@pmhcc.org.

We welcome you to join us for some great speakers and networking time! Our next meeting will be at NHS in Bluebell on June 14, 2017.



PADDNN officers are: Sandy Corrigan, President; Sharon Falzone, Vice President; Cheryl Callahan, Treasurer; Donna Filippi, Secretary; and Carol Sumner, Education committee. ■

How to get Mental Health Help

by Berkeley Wellness | May 24, 2016

Mental wellness is as important to a healthy and fulfilling life as physical wellness. Most people understand it's important to see a doctor for certain symptoms or to treat a physical injury. And while annual physicals may not be necessary for everyone, most of us understand that periodic "well" visits with our regular doctor can mean long-term benefits as we get older.

But when it comes to seeking help for our mental health, we aren't always sure why it's necessary. That's unfortunate, since one out of every five people in the US will be diagnosed with a mental illness in any given year (most commonly depression or an anxiety disorder), and nearly half will experience at least one mental illness in their lifetime.

Mental illness itself is also a major risk factor for premature death. Suicide, commonly associated with depression and a history of other mental health problems, is the 4th leading cause of death among adults in the United States ages 18 to 65 and the 10th leading cause overall.

One major reason mental health does not get the attention it merits is the stigma that's been attached to mental illness. Many see it as a weakness rather than a disease, something that comes from a character flaw or a personality issue. Another misconception is that mental illnesses can neither be prevented nor cured once they occur. But people who get proper treatment do get better – and many recover completely.

When to get help

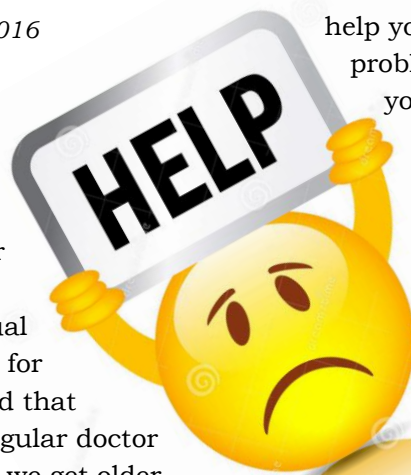
Whether it's your own problem or that of someone you care about, hiding a mental health problem—or denying that it exists – only delays the

help you need and increases the likelihood the problem will get worse. The type of help you or your loved one may need can only be determined after a diagnosis, and that requires a review of a person's symptoms, medical history, and circumstances. Where to start? You can begin by talking with your primary care doctor about symptoms that have been troubling you, such as persistent sadness, feelings of hopelessness or panic, or difficulty sleeping. He or she can help determine whether the symptoms may be caused by a physical problem (an underactive or overactive thyroid, for example) or whether you should speak with a mental health professional for more evaluation.

Some signs that may indicate a need to contact a professional include:

- ✓ anxiety or chronic depression that seems to have no immediate cause
- ✓ compulsive behavior
- ✓ difficulty communicating
- ✓ an eating disorder
- ✓ fits of weeping
- ✓ grief that becomes overwhelming and unmanageable
- ✓ signs of drug or alcohol abuse
- ✓ sudden or unexplained aggressive behavior
- ✓ sudden personality changes
- ✓ thoughts of suicide or a suicide attempt
- ✓ unreasonable fears or overwhelming feelings of panic

Contemplating, threatening, or attempting suicide is a medical emergency. If you or a loved one are at risk for suicide, don't hesitate. Call the National Suicide Prevention Hotline at 1-800-273-(TALK) 8255. If there is an imminent threat of harming yourself or someone else, call 911 for emergency help. ■



Stroke Basics...

(Continued from page 1)

What is a stroke?

There's more than one kind of stroke. A stroke, generally speaking, is a permanent injury to the brain resulting from a problem in blood flow to a specific area. More than four out of five strokes are ischemic (the word means "stopping blood"), in which a blood vessel supplying the brain is blocked. Deprived of blood, which brings oxygen and nutrients, brain cells begin to die. The other kind of stroke, called hemorrhagic or bleeding stroke, is less common but more likely to be fatal. It occurs when a blood vessel in the brain bursts.

A third kind—technically not a stroke—is the "mini-stroke," or transient ischemic attack (TIA). This temporary interruption of blood flow usually lasts only minutes. By definition, the effects of a TIA are gone in 24 hours and don't cause permanent damage. But TIAs are dangerous, since they signal an increased risk of an actual stroke, and about 1 out of every 3 people that have a TIA will have a stroke within a year.

Signs of stroke

Stroke symptoms come on suddenly and are often confined to one side of the body. For instance, the first thing you may notice is sudden weakness or paralysis on one side. Other symptoms include difficulty speaking or understanding speech, disorientation, confusion, memory loss, dizziness, loss of coordination and balance, and loss of consciousness. A sudden splitting headache—often described as "the worst headache I ever had"—may be a symptom of a hemorrhagic stroke.

Why early help is critical

Brain cells can die quickly, but if you can get to an emergency room soon, prompt treatment can help prevent brain damage and increase the chance of survival. There are two emergency treatments for stroke, which may be given one right after the other. The first is an anti-clotting medication known as tPA. If given within 4.5 hours of the first sign of symptoms, this drug can help break up blood clots in the brain that are causing the stroke. The drug works very well for small clots that block smaller blood vessels.

For larger clots in larger vessels, a follow-up procedure can further reduce the chances of major, incapacitating brain damage. The procedure, administered after treatment with tPA and within 6 hours of the start of symptoms, is called a mechanical thrombectomy. It involves the insertion of a stent with a catheter threaded through an artery in the groin. The stent captures the remaining clot and then is extracted.

(Continued on next page)



Meeting
Reminder!

PPC Meeting

The next PPC meeting is scheduled for Tuesday,
June 27, 2017

at Hope Enterprises,
Williamsport, PA
from 10 a.m. until 12 noon.

Check our website
for updates and more details:
www.geisinger.org/hcqu

Did you know...

Youth mental health is worsening. Rates of youth depression increased from 8.5% in 2011 to 11.1% in 2014. Even with severe depression, 80% of youth are left with no or insufficient treatment.

Stroke Basics...

(Continued from previous page)

How to reduce your stroke risk

The first step toward preventing a stroke is to know what the risk factors are and then to take steps toward reducing those risks.

Those at highest risk for stroke include people with high blood pressure, those with a family or personal history of stroke or TIAs, and African-Americans. Smokers, too, are at higher risk, as are those with coronary artery disease. Risk also increases with age. More women than men have strokes, and the risk increases with use of birth control pills, a history of gestational diabetes or high blood pressure during pregnancy, and use of postmenopausal hormone therapy.

Certain conditions, including diabetes and atrial fibrillation (irregular heartbeat), also put you at high risk for stroke.

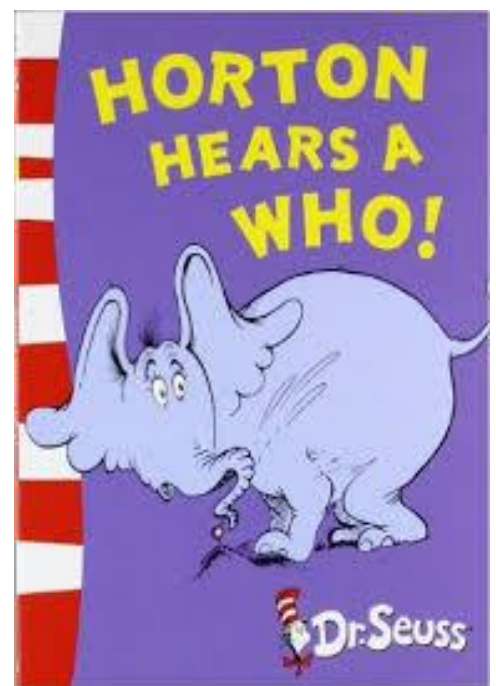
Some risk factors you can't control, such as age or family history. But you can take steps to reduce others by making changes in certain lifestyle choices. And the good news is that the same measures that may protect you from a heart attack may also help prevent a stroke. You get two kinds of prevention for the price of one. ■



Sunbury AMPES to Present....

The Sunbury AMPES (Arc Meeting Place for Expanding and Sharing) group of The Arc, Susquehanna Valley is thrilled to present their version of *Horton Hears a Who* on **May 9, 2017**, at 6:30 p.m. in the social hall of Zion Lutheran Church, 15 S. Fifth Street, Sunbury. Our Sunbury coordinator, Tammy Shutt, modified the classic Dr. Seuss story so our self-advocates could bring it to life on the stage. This is a free event; Donations will be accepted at the door.

The Arc, Susquehanna Valley is a membership organization made up of people with intellectual and developmental disabilities, their families, friends, interested citizens, and professionals in the disability field. Together we form state and local chapters of The Arc, the largest volunteer-based organization in the United States devoted solely to working on behalf of its constituency. Our Chapter offers several educational, social, and recreational programs: AMPES, DREAM, STEP, The Self-Advocates of the Susquehanna Valley, and Career Boot Camp. Additional social and community activities are planned throughout the year, such as bowling, dances, dinners, and bus trips. ■



E-mail!

Effective Now!

The HCQU Training Coordinator, Patricia Patterson, recently got married! Her new name is Patricia Brofee and her new email address is plbrofee@geisinger.edu

Wholistic Practices COMMUNITY BODYWORK CLINICS!



Our specialty is offering helpful, calming, and educational treatments to people with disabilities; those in chronic pain, trauma, grief, or with ongoing illnesses; seniors; and caregivers.

During Clinics, various body and energy work treatments will be available such as Reiki, reflexology, massage, breathing exercises, meditation assistance, and more. 15-20 minute individual sessions as well as small group instructions are available. We just ask you to consider making a donation to help our services be available to others.

For more information and to schedule an appointment, contact Networks for Training and Development, Inc.
570-286-7694
1-888-683-3651

registrar@networksfortraining.org
www.networksfortraining.org

For Strokes, Think FAST!



To help increase awareness of strokes and emphasize the importance of early response, the American Stroke Association (a division of the American Heart Association) is promoting the acronym **F.A.S.T.**:

F -- Face drooping: One side of the face may be drooping compared to the other or numb. If the person tries to smile, the smile will likely be uneven.

A -- Arm weakness: This is likely to occur on one side of the body. If the person lifts both arms, one may tend to drift downward. That arm may also be numb.

S -- Speech difficulty: A stroke can slur a person's speech, making it difficult for the person to speak or to be understood. If you're unsure, ask the person to repeat a short simple sentence. A stroke can make it hard for the person to repeat it correctly.

T -- Time to call 911: If any of these symptoms occur, even if they go away, call 911 and get immediate help. Doing so can save the person's life.

Another helpful acronym is **S.T.R.** (as in stroke), which stands for three simple tests you can give to someone who you think is having a stroke: ask her to **Smile**, **Talk** (speak a sentence), and **Raise** both arms. If she has trouble with any of these, call for help, but keep in mind that many people having a stroke may pass this test. ■

Integrating Supports Across the Lifetime...

LIFECOURSE Tools



LifeCourse Framework was created BY FAMILIES to help individuals and families of all abilities and all ages develop a vision for a good life, think about what they need to know and do, identify how to find or develop supports, and discover what it takes to live the lives they want to live. Individuals and families may focus on their current situation and stage of life but may also find it helpful to look ahead to think about life experiences that will help move them toward an inclusive, productive life in the future.

THE CORE BELIEF: *People with disabilities and their families have the right to live, love, work, play and pursue their life aspirations just as others do in their community.*

We highly encourage you to take time to explore this valuable resource by checking out our website: www.lifecoursetools.com. The LifeCourse toolkit is for individuals, families, and professionals. This resource is for having conversations with individuals and families about a vision for a good life and how to achieve it. The website has corresponding handouts that are intended to be used to supplement, further understand, and generate ideas.

THE CORE BELIEF: *People with disabilities and their families have the right to live, love, work, play and pursue their life aspirations just as others do in their community.*

Even though it was originally created for people with disabilities, this universally-designed framework may be used by any person or family making a life plan, regardless of life circumstances. ■



Health & Wellness Fair

OCT. 19, 2017

9 A.M. – 2 P.M. | First Baptist Church | 20 Brookside Dr. | Danville, PA

REGISTER TODAY TO ASSURE YOUR VENDOR SPACE!

Register by Sept. 1, 2017 (limited to 45 vendors). 8-foot tables (table covers not provided) and vendor lunch are provided. In lieu of a table/space fee, vendors are asked to donate a wellness raffle item (\$10+ value) for our visiting public.

Join us for a day of interactive healthier lifestyle education, screenings, events and drawings for the public, especially individuals who receive support services for behavioral health and/or intellectual and developmental disabilities along with family, caregivers, and support staff.

ALL ARE WELCOME!

Sponsored by the Central PA Health Care Quality Unit, CMSU Behavioral Health and Developmental Services, Northumberland County Behavioral Health and Intellectual Developmental Services, Hope Enterprises, Inc., and Suncom Industries

FMI: lgmurphy@geisinger.edu, 570-271-7240