



COMMONWEALTH of VIRGINIA
Department for the Aging

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September 8, 2010

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COMMONWEALTH of VIRGINIA

Department for the Aging

James Rothrock, Interim Commissioner

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: James Rothrock, Interim Commissioner

DATE: September 8, 2010

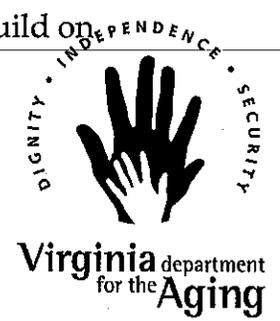
SUBJECT: Update

I trust you are back to work after a well deserved respite on this last weekend of summer. I plan to offer you periodic updates on my work with you and our efforts to establish what measures can be taken to *complement* the array of services to Virginians with disabilities and Older Virginians. In looking at the assignment given to me by Secretary Hazel, the verb *complement* pretty well sums it up –

“to complete, perfect, or go well with something else”

The current menu of services to these two growing groups is substantial – my interviews with most of the staff at VDA have opened my eyes to initiatives that are invaluable in supporting Older Virginians and responding to their needs. Yet my knowledge of disability programming supports my belief that we can all do better and, by doing so, our ability to serve those who look to us for supports and services improves.

Shortly, you will be getting a very simple survey that will invite you to tell us about how you already complement other programs found in your locale. As I have worked with many of you, I know that you work well with the *disability* state agencies in your area and / or have a positive relationship already in place with a CIL, employment program, or brain injury effort in your area. I know Secretary Hazel will be pleased with this foundation of collaboration to build on



I also plan to visit as many of you as my time will allow and for those I miss, I look forward to October 14th at the V4A conference in VA Beach, where many of you will be, for an opportunity to meet with you as a group.

I invite you to share your thoughts about complementary potential and the best email address for me at this time is— james.rothrock@drs.virginia.gov

Shortly, Secretary Hazel and I will be announcing a *stakeholder input process* to be sure that we involve you in the discussion that will lead to the increase in our complementary programming.



COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

AND: Nutrition Directors
Care Coordinators
Health Promotion and Disease Prevention Coordinators

FROM: Elaine S. Smith, MS, RD
Program Coordinator

DATE: September 8, 2010

SUBJECT: Webinar – Promoting Mental Health and Preventing Suicide Among Older Adults

The Suicide Prevention Resource Center (SPRC) Training Institute will host a web-based seminar on Tuesday, September 14, 2010 titled “Promoting Mental Health and Preventing Suicide Among Older Adults”.

Following is a flyer with the details. Please feel free to share information about this event. Note that this webinar is available free of charge, although participants need to pre-register.



Invitation

Promoting Mental Health and Preventing Suicide among Older Adults

Presenters: Chris Miara, M.S., Director of Training and Administration, SPRC
Rosalyn Blogier, LCSW-C, Public Health Advisor, SAMHSA
Yeates Conwell, M.D., Professor, Department of Psychiatry, University of Rochester

When: Tuesday, September 14, 2010 3:00 PM-4:30 PM Eastern Time

Brief description: Older adults die by suicide at a higher rate than the national average. Every year, more than 5,000 Americans over the age of 65 die by suicide, a death toll that is largely preventable. Elderly white men have the highest rate of suicide of all demographic groups in the U.S. Although suicide rates of older Americans have been slowly declining for many years, older men and women of every race continue to die by suicide, and the need for prevention is urgent. This webinar reviews the research associated with suicide among older adults, including risk and protective factors and effective suicide prevention strategies. In addition, this webinar will specifically address the issue of suicide risk and prevention in the context of community programs and residential facilities.

Objectives:

Participants will be able to:

1. Describe the scope of the problem, including risk and protective factors related to suicide among older adults
2. Summarize research findings regarding effective suicide prevention strategies for this population.
3. Report the key findings from focus groups and interviews with senior living center staff regarding their knowledge, attitudes and practices related to mental health promotion and suicide prevention.
4. Access a new toolkit funded by the Substance Abuse and Mental Health Services Administration titled "Promoting Mental Health and Preventing Suicide in Senior Living Communities."

Additional resources to be referenced during the webinar:

Promoting Mental Health and Preventing Suicide: A Toolkit for Senior Living Communities
<http://mentalhealth.samhsa.gov/publications/allpubs/SMA10-4515>

Register online

Space is limited. Please register at: <https://www1.gotomeeting.com/register/212444497>

After you register, you will receive an e-mail containing information about how to participate in the webinar via the phone and internet. If you have any questions about your registration, please contact Tiffany Kim, SPRC Project Coordinator at 202-572-3717 or tkim@edc.org.

SPRC
R2P
Webinar



COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Tim Catherman
Director of Administrative Services

DATE: September 7, 2010

SUBJECT: Multi-Agency Feeding in Disaster Preparedness

The following article addresses strategies for mass feeding during a disaster. I would encourage your AAA to facilitate the community collaboration to develop a community approach to a Multi-Agency Feeding Plan.

The article below is a shortened version of the one that appeared in the Emergency Management, Strategy & Leadership in Critical Times publication.

Emergency Managers Collaborate on New Strategies for Mass Feeding During Disasters
by Hilton Collins on September 01, 2010
from Emergency Management, Strategy & Leadership in Critical Times



Photo: Organized mass feeding stations, such as this one during Hurricane Katrina, were too few along the Gulf Coast. Photo courtesy of Win Henderson/FEMA.

According to a U.S. House of Representatives report, most shelters and hospitals lacked adequate food or potable water for days after the Hurricane Katrina's landfall. The Mayor Ray Nagin of Louisiana called the Superdome a "refuge of last resort," not intended to house and provide food and water for thousands of people over several days. Other evacuation points, like the Ernest Morial Convention Center, lacked food or water. A September 2005 *USA Today* editorial claimed that "every level of government that was supposed to prepare for the storm and its aftermath failed miserably."

“In 2008, when Ike and Gustav hit Louisiana and Texas, there were multiple problems in the delivery of feeding,” said Michael Whitehead, the state mass care officer for the Florida Department of Business and Professional Regulation. “The food was getting to the people, but the process was very ugly, and there was a lot of unnecessary pain and suffering by the emergency managers.”

Meeting of the Minds

Mott was one of several emergency management professionals who worked to get the correct words down on paper. She said a work group started with five volunteer organizations that met for a daylong strategy session, followed by biweekly webinars. This expanded to 50 participants from the private sector and all levels of government. The feeding plan template has undergone multiple iterations, and a recent version was released in spring 2010.

The template is a 50-plus-page, how-to guide instructing regional emergency management forces on how to work with the federal government to feed a public that's in chaos. It's customizable, so any group can adapt it to their need and region. An earthquake in California, for example, might involve different feeding players than a hurricane on the Gulf Coast or a tornado in Kansas.

The template is customizable and ready to go for any city, county or state group that's going to be in the field helping, since most feeding efforts will invariably involve more than one group with multiple, overlapping areas to service.

“It's a template for each agency to create a feeding plan,” Whitehead said. He and co-workers in Florida took the national document, adapted it locally and tested it during a June 2009 hurricane exercise. Whitehead said Florida is encouraging other states to use its template to develop feeding plans.

Customized Disaster Relief

Once the feeding plan has been adapted for a specific region, the local feeding plan should call for the creation of a Feeding Task Force to coordinate the organizations that will supply food, water and action plans. The meals will come from a variety of forces, including contracts with commercial facilities, mobile kitchens, mobile delivery vehicles, churches, community organizations and local businesses.

The template is meant as a proactive guide, not a reactive one.

“I hope it will spur discussions at all levels, so that before a disaster happens, we have a good working relationship to make sure that the transitions and the delivery of necessary feeding to the affected communities happens seamlessly,” said Scott Meyer, a mass care and feeding senior associate in the Disaster Services division of the American Red Cross. He said the template's goal is to keep things short and sweet — get everyone on the same page and working together smoothly.

The template also specifies feeding phases that organizations need to identify — immediate, sustained and long term — to determine how the process will work.

Whitehead thinks officials in Florida would have a good handle on things. “Step No. 1 is, we’re going to define how big this disaster is,” he said. “Is this a 50,000-meal-a-day disaster, a 200,000-meal-a-day disaster or a 500,000-meal-a-day disaster?”

“We expect that the documents will be updated as needed,” Mott said. “New lessons learned will be incorporated as they arise to ensure that we are always meeting the needs of disaster survivors and communities in the event of an emergency.”

And even those organizations with disaster experience don’t always see eye to eye.

“People aren’t always talking to each other, and different agencies have different expectations of what other agencies are supposed to be doing,” Whitehead said. “By doing the coordination required to develop the plan among all the stakeholders, you establish that communication you need in a disaster.”

Download the Multi-Agency Feeding Plan Template at www.nvoad.org/index.php/rl/mass-care.html.