

# CONCURRENT SESSION A

October 18, Monday, 10:45 A.M.–12:00 P.M.

*Preparing for the Aging Tsunami: Hawaii and Pacific Rim Perspectives*

## A1. **Chronic Diseases and Hawaii's Aging Population (Panel)**

Ioani 1 & 2

*Ann M Pobutsky, PhD; Florentina R Salvail, MS; Kathleen Baker, PhD; Earl Bradbury, MSW, MPH*

Hawaii will have a 100% increase in the percentage of elderly (65+) and oldest old (85+) during the years 1995-2025 (U.S. Census Bureau, 2007). Hawaii's older adults are also living much longer than the national average, yet there is a growing percentage which will increasingly experience chronic conditions and/or some form of physical, sensory, or mental disability (EOA, 2004). The impacts of chronic diseases and disability on Hawaii's aging population will be unprecedented in the coming years (e.g. cardiovascular disease, cancer or diabetes). Planning ahead for chronic disease management and addressing health equity issues for Hawaii's elderly will be outlined.

## A2a. **The Role of Daily Money Management in Preventing Elder Abuse (Lecture)**

Honolulu 1

*Gary Powell*

Many seniors find that failing eyesight, changing technology and general aging issues (such as money) make it difficult to keep up with financial tasks that used to be routine. Paying bills, balancing checkbooks, making deposits, and generally organizing financial records become more and more frustrating and often are just left undone or turned over to a willing family member or friend. But, all too often this kind of pass-along responsibility results in intentional exploitation or fraud or unintentional neglect. Daily Money Management services help individuals take care of financial matters that have become burdensome or have placed the individual at risk of exploitation or fraud.

## A2b. **Financial and Estate Planning in Uncertain Time (Lecture)**

Honolulu 1

*Stephen B Yim, LL M Taxation; Michael Yee, CFP*

These times bring enormous economic and legal uncertainty. Our economy continues to suffer and the status of our estate tax remains in flux. This makes financial and estate planning more important than ever. While the economy and estate tax law remain uncertain, we believe that if we focus our efforts towards what is truly meaningful to us, we can remain prosperous during our lifetimes and provide well for our families when we die.

## A3. **Sex Does Not Stop At 65 ... It only gets better (Workshop)**

Ballroom 3

*Joseph Giovannoni, MS, MA, APRN BC*

Come on, older people do not have sex! This is a destructive myth that de-sexualizes the aged and deprives them from the freedom of sexual self-expression when faced with having to live in an assisted living and long term care facility. Health care professionals need to be sensitive and provide privacy to the aged in their care who desire to engage in prosocial sexual behavior. The myth attached to sexuality and aging will be dispelled. There is evidence that sexual activity in advanced years has health benefits. Twelve tips to continuing intimacy and hot sex after 65.

## A4. **Developing culturally relevant human resources for health in the US Affiliated Pacific Islands (Panel)**

Ioani 6

*Jeannette G Kojjane, MPH; Karen Heckert, PhD; Rae Seitz, MD*

In the US Associated Pacific Islands (USAPI) cancer is often diagnosed late and treatment options are few but traditional practices support home-based care of loved ones. Since 2008, the USAPI Cancer Programs collaborated with Pacific CEED, Cancer Research Center of Hawaii and Kokua Mau, Hawaii's Hospice and Palliative Care Organization to strengthen community programs and health services for cancer survivorship and palliative care. The collaboration led to development of an 8-module culturally-relevant palliative care curriculum as well as other materials to create a true continuum of care beginning with prevention, through early detection, diagnosis and treatment.

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## **A5a. An Innovative Practice Model for Health and Human Service Agencies to Partner with Health Science Students (Paper)**

Honolulu 3

*Nancy E Krusen, PhD; Ashley Becker, MOT; Melanie Hall, MOT*

In this innovative practice model, occupational therapy students worked with eldercare agencies to determine needs of agency intake staff, and elders and caregivers who wish to remain in their own homes. Students created an easily completed home assessment form which helps target needs for additional services. Students also recommended the use of a quality of life assessment to determine the needs for respite care and as a means to identify successful outcomes of agency services. Focus groups determined the effectiveness of and satisfaction with the model by intake staff.

## **A5b. The Giving Back Fall Prevention Project (Workshop)**

Honolulu 3

*Karen A Peterson, MA*

The Giving Back® Fall Prevention Project offers a simple way to address two areas of concern: By partnering active senior volunteers (mentors) together with trail elders (mentees) through the effective practice of Brain Gym®, vision improvement techniques, fall prevention techniques, and other integrative movements and games: (a) active well senior volunteers stay healthy and involved, and (b) frail and at-risk elders improve their balance and coordination and cognitive functioning, while receiving loving care. This unique approach provides a preventive wellness program since the well senior volunteers learn important awareness skills that become a permanent part of their lives. The frail elders learn important balance, coordination, and cognitive skills in a safe, loving atmosphere. Facilitated by the Program Director, all the seniors (mentors and mentees) work together in community.

## **A6. What's New at UH? Highlights of Aging Research and Education at Manoa (Panel)**

Iolani 5

*Colette V Browne, DrPH; Kamal Masaki, MD; James Pietsch, JD; Noreen Mokuau, DSW; Loriena Yancura, PhD; Michael Cheang, DrPH; Kathryn Braun, DrPH*

This panel discussion will update attendees on some of the exciting research and educational programs at the University of Hawaii at Manoa. The Center on Aging will provide an overview of university initiatives and introduce key faculty from the various of schools, colleges and departments on campus that are working to meet the needs of older adults in out state. The UH Elder Law Program (UHELP) will discuss its recent initiatives in promoting elder justice in areas of elder law, health law, and bioethics. The Geriatric residency program at JABSOM will provide an update on their educational programs for medical students, residents, fellows, practicing physicians, and allied health professionals; describe the department's clinical services; and discuss current and future research programs. Ha Kupuna, National Resource Center for Native Hawaiian elders, will highlight its community-based participatory approach to meeting the needs of na kupuna in health and long-term care. The Office of Public Health Studies in JABSOM will discuss evidenced-base programming in health promotion in the state that is producing dramatic results in our elder citizens. Finally, faculty from Family Resources will share results from the CARES survey which examined the needs and service use of family caregivers employed at UH, along with recommendations for service providers and families.

## **A7. Franciscan Vistas Ewa – A Model Community (Panel)**

Iolani 4

*Pamela A Witty-Oakland, MBA; Patricia Tompkins; Sister Norise Kaiser*

St. Francis Healthcare System introduces aging-in-place for older adults of limited means. Elder care practitioners are invited to learn from the Franciscan experience of coordinated care where physical, emotional, psychological and spiritual needs are cared for collectively. With decades of health care experience St. Francis Healthcare System designed Franciscan Vistas Ewa - a model community of affordable housing integrated with on-site care coordination. Residents are offered an ala carte version of assisted living with home assessments, pharmacist medication reviews and a concierge for additional care. Panelists offer details on cost-benefit analysis and spectrum of care available within Franciscan Vistas Ewa.

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### **A8. Surrogate Decision Making: Who Speaks for the Patient? (Workshop)**

Iolani 3

*Katherine Y Korenaga, BA; Susan M Hashimoto, BA; Roberta Lovely, RN*

When a patient cannot communicate or speak for himself and there is no advance directive, a surrogate or non-designated surrogate decision maker speaks on his behalf. Oftentimes, identifying the appropriate decision maker can be challenging. In some cases, the decision maker is unsure of his role and ethical questions arise. This workshop will review a case scenario involving a wife from the patient's second marriage and two adult daughters from a previous marriage. In this scenario, the patient did not appoint a surrogate decision maker, resulting in discord between the two parties and confusion among physicians and hospital staff.

### **A9. Successful Hawaii Caregiving Training Model Goes to Japan (Panel)**

Honolulu 2

*Lois Greenwood, PhD; Takeo Ogawa, PhD; Rita Barreras, MUA*

Explore an innovative compassionate caregiving training that boosts both quality of care and staff morale in nursing facilities. Five competencies of emotional intelligence and mindfulness-based stress reduction were custom-designed into a training program for a Maui long-term care organization. The training significantly increased staff morale and decreased resident-care mistakes by 56%. This program is being replicated locally through Maui County's Aging with Aloha Coalition and is being translated for use in Japan. The training model will be explained, as well as our challenges and successes in adapting and replicating this model in Japan.

## CONCURRENT SESSION B

October 18, Monday, 1:30 p.m.–2:45 p.m.

### **B1. Programs and Resources for Hawaii's Caregivers: Grandparents Raising Grandchildren and Adults Caring for Aging 'Ohana (Panel)**

Ballroom 3

*Heather Greenwood, MS; Norma Circle, BS; May Fuji Foo, MPA; Valorie Taylor, BSW*

Hawaii is a state of caregivers: approximately 126,000 caregivers in Hawaii provide over 135 million hours of care annually to older adults and over 14,000 grandparents are primary caregivers for over 33,000 grandchildren. Caregivers provide invaluable service to our communities – they keep families together, communities connected, and pass cultural values the younger generations. Join the panel presentation to learn about two specific programs, Powerful Tools for Caregivers and Maui's Hi'i Na Kupuna Coalition for grandparents raising grandchildren, that help family caregivers maintain their own health, manage difficult situations, and access needed services. Presentation attendees will learn about the effectiveness of the programs, implementing the programs in their community, and utilizing needs assessments to guide the direction and focus of projects that help caregivers.

### **B2. Creating a Community of Caring for Gay, Lesbian, Bisexual or Transgendered Elders through Project Visibility (Workshop)**

Honolulu 1

*Nancy E Krusen, PhD; Kristia Halverson, BA; Tyler Joy, BA; Reece Vernon, BA*

Project Visibility was developed by Boulder County Aging Services for care providers, friends, professionals and administrators of services to lesbian, gay, bisexual and transgendered elders. The training provides research, history, terminology, resources, and practical suggestions for providing culturally-competent care and service for the issues of aging as an LGBT. This presentation springs from the Train-the-Trainer program through which the information is disseminated to community agencies. Occupational therapy graduate students have created supplemental material for interactive learning and development of local resources.

# CONCURRENT SESSION B

October 18, Monday, 1:30 p.m.–2:45 p.m.

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## **B3. Ho`okele i ke Ola - Cancer Patient Navigation (Panel)**

Iolani 1 & 2

*Amanda L Allison, MA; Jeanine MF Yonashiro, MSG; J Mahealani McClellan*

Risk for developing many types of cancer increases with age. Besides causing death, cancer can deplete a patient's physical and emotional strength and challenge their social support networks. Treatments which preserve life also inflict debilitating side-effects which plague patients as they age. Cancer Patient Navigation programs can assist the Aging Network as it strives to provide adequate and culturally-appropriate services for elderly cancer patients and survivors. This panel will introduce the driving principles of Cancer Patient Navigation, share about Hawaii's Navigation programs, and invite discussion on establishing partnerships between the Aging Network and Patient Navigation programs.

## **B4a. Why Intergenerational Programs are need of the hour? (Paper)**

Honolulu 2

*Himanshu Rath*

Why Intergenerational Programs are need of the hour? India is a cultural & traditional society. Process of population ageing is very fast and elderly population has crossed 90 million mark in India. Traditionally, elderly have been most respected section of the society in India. With changed socio-economic scenario over the years, social attitude towards elderly has changed. Today older persons are being treated differently within four walls of home and outside. Socially, Indian are more inclusive, while individually they are becoming exclusive.

## **B4b. Asian male caregivers: A new model for caregiving (Paper)**

Honolulu 2

*Pamela S Arnsberger, PhD; Seiko Sato, MSW*

Recent surveys have found a surprising upsurge in the percentage of male caregivers especially in Asian cultures and countries. This paper will review the results of three caregiver surveys conducted in California, Hawaii and China (N=2200), focusing on a rarely studied group, Asian male caregivers. There are both similarities and differences between Asian male caregivers and those of other ethnicities in terms of tasks, experience of burden and formal services used. The results suggest an emerging new model for male caregiving in Asian cultures.

## **B5. Who gets it before you go? (Workshop)**

Honolulu 3

*Wayne M Tanna, JD/LL M; James Pietsch, JD; Lenora Lee, ABD*

We come into this world with nothing and we leave this world with nothing. What happens in between and what happens in the weeks, months or even years in which individual's receive care from family and non family members can make a major difference in how elders are treated in their last days on this world. How do assets affect the quality of care and what happens if you have none? Who takes care of the elderly when family is unavailable or unwilling to care for the elders. Do we still put elders on ice floes and let them drift to their ultimate death?

## **B6. Barriers to Optimal End-of-Life Care: What can be done to provide better care to more people? (Panel)**

Iolani 3

*Anna U Loengard, MD; Wen-yu Lee, MD; Kathy Hallock, LCSW*

Despite the fact that Hawaii's population is aging faster than the national average, we are among the lowest states in terms of hospice use. On the mainland 38% of those who are dying receive hospice services, while in Hawaii only 20% of decedents opt for this type of care. We will explore some of the reasons for this including cultural preferences, systemic problems (Medicare etc) and, as we see more patients with chronic illness, the difficulties physicians have in determining which patients have very limited life expectancy.

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### **B7. Training and development of Direct Care Workers in LTC? (Panel)**

Iolani 4

*Michael Cheang, DrPH; Toni Hathaway, MSW; Lois Greenwood, PhD; Madi Silverman*

In addition to financing and the development of more services, the expansion of Hawaii's long-term care workforce represents one of the most important long-term care policy issues. What sorts of training programs exist in Hawaii to develop home and community based health care workers? Who does the training? How do they differ? How many graduates do these programs produce? What can or should be done to increase the production of workers? What are some of the barriers? What recommendations do the panel have to improve the present situation?

### **B8. We're In This Together: Working Towards Preferred Outcomes in a Long Term Care Facility (Panel)**

Iolani 5

*John G McDermott, MSW; Felly Pula, RN; Shirley Kidani, MPH*

Residents, families, and staff have a number of experiences to share about life in a nursing home. This session offers attendees an opportunity to review a process of how a resident, family, and nursing home staff proceeded to achieve improved quality of life outcomes in a nursing facility.

### **B9. Seeing The World Through the Elder's Eyes (Workshop)**

Iolani 6

*David T Nakamaejo, MEd*

This workshop will teach you first-hand, some of the sensory changes older adults experience with the aging process. Through short exercises you'll learn the challenges and difficulties older adults face in everyday activities. Sensitivity training will open your "eyes" to the struggles of being an older adult who depend on family members for their care and well being. By understanding the changes that occur with aging, you'll become a more compassionate family caregiver. Come and experience dementia, glaucoma, macular degeneration, cataracts, being legally blind, corns on your feet and the 12 inches of your life.

## CONCURRENT SESSION C

October 19, Tuesday, 10:45 a.m.–12:00 p.m.

### **C1. Improving Emergency Preparedness Among Older Adults in Hawaii (Workshop)**

Honolulu 1

*Edward Teixeira; David H Smith, BA*

Natural disasters generate key response challenges for communities, yet the experience of Hurricane Katrina illustrated older adults, especially those with chronic diseases or some form of physical or mental disabilities, are particularly vulnerable to emergencies and disasters. Hawaii is expected to have a 100% increase in the percentage of older adults by 2025. This fact plus the move to age in place makes emergency preparedness more critical than ever. State Civil Defense will explore the unique needs of our older population and provide tips and strategies for service providers, family, caregivers and our older residents.

# CONCURRENT SESSION C

October 19, Tuesday, 10:45 a.m.–12:00 p.m.

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## **C2. Health Care Fraud: Targeting the Elderly (Panel)**

Honolulu 2

*Adele Ching, MA; Steve Li, JD; Gary Senaga, JD; Paul Goto, JD*

Riding with the “aging tsunami” is a tide of health care fraud that leaves elderly victims in its wake. As much as \$200 billion is estimated to be lost to fraud each year. Medicare’s losses are approaching \$50 billion per year. Representatives from the Office of the Inspector General-Health & Human Services, the Medicaid Fraud Investigation Unit-State Department of the Attorney General, the Benefits Integrity Department-HMSA, and the Senior Medicare Patrol (SMP Hawaii)-U.S. Administration on Aging will discuss senior-targeted health care fraud: what to look out for and how and to whom to report suspected fraud.

## **C3. Aging Well in Kalihi (Lecture)**

Iolani 1 & 2

*Merlita Compton, MPH; Josie Sagisi, CCM; Cynthia Sturdevant, MD, MPH; Michiyo Tomioka, MS*

Kokua Kalihi Valley Elderly Services Health Maintenance Program (KKVES) devoted to encourage and motivate minority seniors to take charge of their health and lives, thereby enabling them to remain living independently as long as possible. KKVES offers variety of health promotion programs. It is useful and important to align these health promotion programs to fit within the client’s culture value system to maximize the effectiveness and benefits. This presentation will discuss key elements in planning community-based health promotion programs in ethnically diverse community settings, strategies to incorporate scientific methods to ensure program effectiveness, and impacts of health promotion programs.

## **C4. Role of Technology for Elder Care: PERS, Fall Detection, Medication & Vital Signs Monitoring (Panel)**

Honolulu 3

*Cullen T Hayashida, PhD; Dexter Suzuki; Bonnie Castonguay, RN*

The growth of the elderly population combined with the anticipated shortages in the health care workforce point to the importance of technology in an aging society. This presentation will provide an opportunity to view the products and features of a number of providers. What are their strengths and limitations? How much do they cost? What are some of the new technologies that can be expected in the years to come?

## **C5. Using Mindfulness: Enhancing Quality of Life for Aging Clients and Ourselves (Workshop)**

Iolani 5

*Linda A Hunt, PhD; Holly Edwards, MOT; Bobbie Wagner, MOT*

Learning stress management strategies not requiring equipment or cost may be highly valuable in any health-care environment. Older adults and health care providers may safely and effectively use mindfulness intervention to relieve stress. This workshop will report published evidence for using mindfulness with a variety of populations, teach participants how to start practicing mindfulness, and provide resources for continued practice. Furthermore, pilot study outcomes from a mindfulness intervention for certified nursing assistants (CNAs) working in skilled nursing facilities will be discussed. Data showed trends toward positive results for CNAs to learn compassion toward themselves, their co-workers, supervisors, and residents.

## **C6. Re-Visioning Home and Community Based Long Term Supports for the Aging Tsunami (Panel)**

Iolani 6

*Nancy D Moser, MN, APRN; Deborah Arendale, MC, CSAC, LMHC; agency staff*

Hawaii’s State Unit on Aging and its four Area Agencies on Aging together plan and implement a system of long term supports so that older and disabled adults can live with independence and dignity. In partnership with the U.S. Administration on Aging, Hawaii is transforming its long term care system to provide information and access through the Aging and Disability Resource Center statewide and across all ages, abilities and economic status. Consumer-direction, empowered care transitions from hospital to home, and family caregiver support are initiatives that create a person-centered support system and improve quality of life.

# CONCURRENT SESSION C

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## **C7. Small Community Based Residential Care Options – The New Focal Point for the 21st Century (Panel)**

Iolani 3

*Linda W Kim, MSN; Lani Akee; John G McDermott, MSW; Myriam R Tabaniag, RN*

Small community based residential homes have been an integral part of Hawaii's long-term care delivery system for decades and will continue to be in great demand as the population ages. At the same time, they are often fraught with challenges related to the lack of standardization in the types of homes, access to training, quality and oversight. Most recently, the homes have been closely involved with and affected by planned changes to the Certified Nurse Aide recertification process. This panel will highlight the role, size and complexity of these residential care options as well as issues related to the number of types of homes, training requirements, quality and oversight. Possible remedies will be discussed.

## **C8a. Home-based Palliative Care for Underserved Populations (Paper)**

Ballroom 3

*Ritabelle Fernandes, MD; Riano Nazareth, AS*

Background: Kokua Kalihi Valley is one of the first community health center offering home-based palliative care (HBPC). Objectives: To measure symptom relief, resource utilization, and satisfaction with HBPC. Methods: Over 12 months 91 people were enrolled. Data were collected prospectively and utilization of resources was tracked. Results: The median age was 71 years, more than half had chronic neurodegenerative conditions. There was a decrease in hospitalizations ( $p=0.002$ ). Documentation of end-of-life wishes increased from 50% to 90% ( $p<0.01$ ). Caregiver satisfaction was high. Conclusion: Our experience demonstrates the effectiveness of palliative care approached in underserved Asian Pacific Islander populations.

## **C8b. Physicians Orders for Life Sustaining Treatments (POLST): An important new tool to help people have their wishes honored at the end-of-life (Lecture)**

Ballroom 3

*Kenneth L Zeri, RN, MS*

In July 2009, POLST legislation was passed in Hawaii, making Hawaii the 8th state in the nation to have this groundbreaking tool. POLST documents patients' wishes for end-of-life care, but different from an advance healthcare directive, POLST can be honored by EMS personnel and is transportable between settings. All providers for the frail and elderly should understand the importance of POLST, how it builds upon an advance directive and the opportunity it presents to ensure wishes are honored. The results of the first year of POLST implementation will be discussed. Kokua Mau is the lead agency for dissemination of POLST.

## **C9. Community Based Palliative Care – A St Francis Interdisciplinary Team Model (Workshop)**

Iolani 4

*Joy Yadao, RN; Aida Wen, MD; Libby McNamara, MSW*

The St. Francis Healthcare System of Hawaii now provides a tremendous community benefit in its Palliative Care program. Patients with serious illness receive physician consultation as well as an interdisciplinary team support to enhance quality of life while undergoing treatment. Learn how this has been a life-enhancing service for patients at home, in hospitals or nursing facilities. Review the model and services of an outpatient palliative care program designed to keep patients comfortable, informed and empowered despite serious illness.

# CONCURRENT SESSION D

October 19, Tuesday, 1:30 p.m.–2:45 p.m.

*Preparing for the Aging Tsunami: Hawaii and Pacific Rim Perspectives*

## **D1. Living well in Hawai'i: Hawai'i Healthy Aging Partnership (Workshop)**

Iolani 3

*Michiyo Tomioka, MS; Christina Volcalan, BSN, RN; Leslie Tanoue, MPH; Jo Reyes, BA*

The Hawai'i's Halthy Aging Partnership (HAP) is a partnership of public and private aging agencies dedicated to implementing evidence-based health promotion programs for seniors in ethnically diverse communities. HAP has adapted two evidence-based programs (Stanford's Chronic Disease Self-management Program and Enhance Fitness) to reduce older people's risk of disease, disability, and injury. Representatives from HAP will share how we built our capacity for evidence-based programs and adapted these two programs to our communities. Currently we are working to sustain these programs. We also will present challenges, successes, and outcome from HAP.

## **D2. Career Transitions for Boomers: Assessing the Value of Coaching (Panel)**

Honolulu 1

*Steven K Cook, DC, MA; Jay Bloom; Howard Gravel; Signe Godfrey*

Increasingly boomers are transitioning into retirement in large numbers. Many are deciding to focus on leisure, others in civic engagement and others still are interested in recareering or seeking continued employment. Nevertheless, the pathways for this transition can be filled with challenges and can be discouraging. This panel will report on this transitional phase that boomers are undergoing and will report on one program aimed at teaching boomers to navigate this change with more confidence. The panel will also report on the HR/Employer's perspective and what they need and why they hire or do not hire boomers. One area that seeks re-careered boomers is the non-profits. To what extent can non-profits provide employment and fulfill the civic engagement goals of boomers will also be discussed.

## **D3. Preventing Dementia: The Importance of Brain Stimulation & Other Key Factors (Workshop)**

Honolulu 2

*Thomas C Harding, PsyD*

Americans have a 50/50 chance of developing some form of dementia by their mid-80s. To help attendees reduce their odds of becoming demented, Dr. Thomas Harding will share topics of this new book, "You CAN Prevent Alzheimer's: A neuropsychologist's Secrets to Better Brain Health." Attendees will learn a time-tested neurotraining program designed to create and strengthen connections between brain cells. These stimulation principles and techniques have helped thousands of brain-injury survivors regain lost brain function. During the workshop topics will also include the most current known risk factors for dementia, and prevention strategies to reduce the odds of becoming demented during one's golden years. "An ounce of prevention is worth a pound of cure," especially when there is no cure such as the case with Alzheimer's disease. Learn how to protect yourself NOW.

## **D4. Preventing Falls – A Proactive Approach to Help Older Adults Age in Place (Panel)**

Iolani 1 & 2

*Mary K Farrell, DSc; Linda A Hunt, PhD; Nancy E Krusen, PhD*

When an older adult experiences a fall, he or she is more likely to experience a decrease in confidence, physical activity, and social activity. In addition his/her risk for long-term care placement increases significantly. Prevention of fall occurrence and management of risk factors following a fall are important strategies for keeping older adults in their homes. This presentation will review the common risk factors for and etiologies of falls, and present effective interventions for managing fall risk within the home. The focus will be on translating evidence into practice in the areas of improving physical function and home safety.

## CONCURRENT SESSION D

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### **D5. The Long-Term Care Commission: Assessing the Adequacy of Long-Term Care in Hawaii (Workshop)**

Ballroom 3

*Joshua Wiener, PhD; Stuart Ho, JD; Patricia Blanchette, MD; Eldon Wegner, PhD*

The 2008 Legislative Session created a Long-Term Commission to assess the adequacy of long-term care services and to recommend policies to the Legislature for financing long-term care and enhancing the quality of care in Hawaii. The Commission has contracted with Joshua Weiner of RTI, Inc., to carry out research as outlined in the Commission workplan and to make annual reports to the legislature in 2011 and 2012. In the workshop, Dr. Weiner will present the preliminary findings of the first year. The remaining panel members will provide a local perspective on the report and the work of the commission. The audience will be divided into small groups to respond to leading questions regarding long-term care in Hawaii and will be asked for their feedback on the preliminary report of findings. The audience participation should be useful to Dr. Weiner's work and the work of the Commission.

### **D6. Go For the Gold! Creating a Center Stage Experience for the Activities Program (Workshop)**

Honolulu 3

*Kareen King, MA, RDT*

"All the world's a stage, and all the men and women merely players," (Shakespeare). In the nursing home setting, why not let the "last scene of all," be the grand finale? Kareen King, MA, RDT offers practical ways to add dramatic flair to conventional activities, drawing residents into a world that nurtures their inner child. Ideas include effervescent exercise, boundless bus rides, animated announcements, curiosity evoking calendars, memorable music, and more!

### **D7. Aging in Place and the Role of the Reverse Mortgage (Panel)**

Iolani 5

*Percy D Ihara; Michael Yee, CFP; Ryker Wada*

Hawaii's population is aging at the fastest pace in the country and with the highest longevity which is good news. This boom will result with the challenge of families dealing with an aging parent or relative. Studies and research is showing that the challenges of caregiving needs and the financial strain this puts on a family needs to be addressed in a proactive way versus reactively. Aging in place is a goal; however, this comes with many challenges for the family. Learn the increasing role of the reverse mortgage and aging in place. Learn also the financial affects on a family's estate and the precautions one must take prior to applying for a reverse mortgage.

### **D8. Building Support for Family Caregivers in the Workplace (Panel)**

Iolani 6

*Michael Cheang, DrPH; Lorienta Yancura, PhD; Pamela Kutara, MS; Heather Greenwood, MS*

Over 78% of older adults living in the community and in need of long-term care depend on family and friends as their only source of help. Many family caregivers for older adults juggle the demands of full time employment, other family obligations, and caregiving responsibilities. The Building Support for Family Caregivers in the Workplace project explores the needs and challenges of University of Hawai'i at Manoa (UHM) employees who are family caregivers. This session will discuss how the findings from this study have been used to guide efforts to support UHM employees to reasonably continue their work while meeting their family caregiving responsibilities.

# POSTER SESSION

October 18, 2010, Monday

Preparing for the Aging Tsunami: Hawaii and Pacific Rim Perspectives

## 1. iHealthHome - Living Well, Living Independently, Living Safely

*Norine Wong, MSW; Dew-Anne Langcaon, MCAA; Bonnie Castonguay, RN*

iHealthHome is an integrated communication and wellness monitoring system that offers an inexpensive alternative to institutional care for seniors who desire to live independently. The systems' biometric capabilities allow seniors to monitor their health and provide reports to their family members and caregivers. Its motion sensors enable family members to monitor the recipient's daily activities and its messaging tools provide a convenient means for communication among caregiver and the care recipient. iHealthHome is available through Ho'okele Health Innovations.

## 2. Development of a Walker with GPS Navigation System for the use of older adults: A Pilot

*Tatsuya Oka, MPA; Hidetaka Ikeuchi, DrEng*

Walkers are expected to promote safety, independence and physical activity of older adults. However, a walker often has been regarded by older adults themselves as a sign of dependence and their physical decline. This pilot project bases on the belief that if walkers are interrelated with technology there can be huge improvements in the wellbeing of older people. The aim of the project is to change a person's emotional response to a walker as an assistive device and thus to promote social participation of senior citizens. A prototype GPS walker will be shown at the presentation.

## 3. The effects of Yosakoi dance practice on the physical status of the elderly in Japan

*Kinuyo Kanbe, MS*

The "Yosakoi Festival" is a popular dance competition held in Japan, Hawaii and Southeast Asia. The study examined the effects of continued dance practice on the physical status of the elderly in Japan. The sample size was 12 people who have been practicing the dance for the last 3 years. The results indicated that there were no significant differences in the muscle mass and the bone density between the two age groups: below 60 vs. 60 and above. Compared to 3 years ago, the body fat of the younger group was significantly reduced and the average bone density increased in the older group.

## 4. The examination of supportive methods for centenarians

*Makiko L Tanaka, PhD; Toshiya M Mamashita, MS; Nozomi L Morioka, MS; Takeo Ogawa, PhD*

The "Talk Story" technique as a way to support the activity level of centenarians was examined. The text mining method was used to analyze the effects by examining the quantity of utterances and the conversational contents. The results shown by the quantitative change of utterances indicated that the centenarians having the "Talk Story" opportunities may be very effective in improving their activity levels. The results also indicated the importance of having continuous "Talk Story" opportunities without prolonged interruption. Focusing the past events rather than the present was the key to the successful improvement of their activity levels.

## 5. Production and Use of Handbook for Elderly

*Tomoko Watanabe, PhD; Kayoko Miyamoto, RD; Ayuho Suzuki, PhD; Maki Hirasawa, RD; Mamoru Nishimuta, PhD*

We conducted a questionnaire survey among the elderly to evaluate a handbook for frail and sickly elderly people to assist them continue desirable dietary habits. The survey result indicated that the handbook would be useful for understanding the dietary habit. All-color, gate-fold type A3 size handbook was completed and its use was recommended.

## 6. Sharing Information is Caring for Our Kupuna

*Raleigh Awaya, EdD; Kevin Costa, MSW*

Learn how today's technology is being used to support Hawaii's kupuna and their caregivers to make their caregiving task easier. Memory Vault is an online tool developed entirely in Hawaii that helps kupuna and caregivers organize, store, protect, share, and access key biographic, health, legal and financial information when ever and where ever it is needed. Sharing information this way allows the kupuna to prepare in advance for the time when they need caregiving support from others. Sharing information also eases the burden on family caregivers by ensure that everyone has access to the same information for decision making.

## 7. Study Regarding Food Services for House-bound Elderly

*Maki Hirasawa, RD; Kayoko Miyamoto, RD; Tomoko Watanabe, PhD*

Difficulties in preparing meals for house-bound elderly are increasing yearly. Solutions to the problem include use of ready-to-eat meals purchased from stores and of meal delivery services. We noted convenience stores in the neighborhood communities as the base for sale and delivery of ready-to-eat meals, and investigated their sales trend and uses by people in order to study how food preparation for house-bound elderly should be developed in future.

## 8. Study Regarding Food Service in Group Home for Demented Elderly

*Mitsuyo Kageyama; Hideko Nagura, PhD; Kaori Horibata*

We attempted to evaluate nutritional aspects of food service in a group home for demented patients by analyzing the menu and observing how meals were ingested. Based on the result, a nutritionist intervened in order to increase interests in meals for demented elderly and to prompt positive participation in meal preparations.

## 9. Study of Meal Delivery Service for House-bound Elderly

*Ruriko Sasaki, MS; Reiko Sato; Naho Kobayashi, MS*

From the viewpoint of diminishing the need for nursing care, importance is attached to how meals should be delivered to house-bound elderly. Quality control of the meal delivery system is necessary in addition to support of self-sustenance of elderly and individual nutrition management. We studied efficient cooking and delivery services in Scandinavian countries in order to improve and diversify the meal delivery services in Japan. Nutritional Care management of Patients With Bedsores in Medical Care Facilities in Japan.

## 10. Nutritional Care management of Patients With Bedsores in Medical Care Facilities in Japan

*Hiroshi Shiraishi; Hisako Yoshida; Hirotaka Kubo, PhD*

Many patients develop bedsores because of contraction of the pudendal muscle due to under-nutrition, bed-bound condition, or paralysis. Japanese patients who develop bedsores are characterized by the pathological bone process due to "emaciation". Under-nutrition may develop bedsores easily and delay healing of wounds. The current status of elderly patients with bedsores in the Jikei university Hospital warrants timely nutrition care management and adequate nutritional supply.

## 11. Effect of Soft Diet for Nephropathy Patients

*Kayoko Miyamoto, RD; Toshiko Sato; Yukiko Arakawa*

Diet for nephropathy patients requires controlled protein, energy, salt and water contents, and tends to be dry because of its rich fat content. The diet is therefore not necessarily welcome by elderly patients. We devised soft diet by adjusting hardness and choice of food items within the target dietary allowance. This diet accounted for 30% of that for nephropathy patients and was close to those preferred by patients. Patients found it comparatively easy to accept the nephropathy diet.

## 12. Examination of Dietary Reference Intake in Medical Facilities for Elderly in Japan

*Yoshiko Kontai, BA; Hiroko Arai, BA; Akiko Ishijima, BA; Kayoko Takahashi, PhD*

With the rapid aging of society, Japan is currently experiencing sharp increases in the number of bed-ridden and demented elderly patients, largely caused by cerebrovascular diseases. Such patients tend to stay longer in hospitals as they need prolonged nursing and care. Of 302 in-patients in a medical facility for elderly, 44% had the history of cerebrovascular diseases. Nourishment assessment of the patients revealed that 57% were under-nourished in terms of body mass index (BMI), even though they ingested 90% of meals orally. We report here the study on the dietary reference intake, assuming that offered meals were digestible.

## 13. Development of Soft Diet for Facilities for Elderly and Its Evaluation After Introduction

*Chouko Kikuchi; Kazuko Nishimura; Hidenori Shinkai; Takehiro Nishio*

As aging of those living in facilities for elderly advances, meal services are becoming increasingly complex due to their lowered abilities to chew and swallow. Aiming at improving the efficiency of culinary service, we attempted to develop "soft diet". Even though some problems still remain, we managed to meet the specific needs and improve the ratio of consuming foods served and under-nutrition. We report here the result evaluated.

**14. An Idea of 'Painted Easy-to-swallow Meals' and Their Practical Use***Yoshiko Kameyama, PhD; Makiko Terui, RD; Mariko Tanaka, RD*

We invented an idea of meals for swallowing difficulties to improve intake rate and degree of satisfaction for patients, called 'Painted easy-to-swallow meals' and inspected its effectiveness upon practical use from the following three aspects. First is kitchen staff's point of view, second is from patient, and third is from care staff. For each of aspects, we compared the case of painted easy-to-swallow meals with that of conventional ones, to show that the painted easy-to-swallow meals have some merits from the above points of view, and also in the cost management. This type of meals may function as universal design.

**15. Food Preference Survey on Elderly With Lowered Swallowing Ability***Maki Nakahigashi, RD*

Elderly persons whose ability to swallow foods is lowered find it increasingly difficult to ingest foods, and tend to develop malnutrition. It is essential to offer safe and delicious meals that meet the tastes of such persons. We investigated the changes in food preferences among elderly persons with dysphagia, and report here differences in food preferences in the group with dysphagia and the group with normal swallowing functions.

**16. Nurse initiated discharge planning in the rehabilitation unit***Miho Matsui, PhD; Mizuho Nisikido*

Rehabilitation unit provides services mainly to patients who have undergone a period of acute hospital care such as stroke and hip fracture in Japan. This study investigated places after discharge and implementation of discharge planning by nurses in Nagasaki, West Japan. Seventy-seven patients aged 60 and over participated. The mean age was 80.3 years old, and 68.8% were female. The places after discharge were shown that 72.7% went home, 11.7% transferred nursing home, and 5.2% hospital. Discharge planning was conducted such as risk management to prevent fall (61.0%), medication (59.7%), and relieving patient anxiety (51.9%).

**17. The relationship between the frontal lobe and physical strength***Koji Terasawa, PhD; Koichi Wakimoto, BA; Kenjiro Yoneyama, PhD; Saiki Terasawa, MA; Kinoshita Shinya, BA*

The purpose of our study is to investigate the relationship between the physical strength and the function of the frontal lobe. We adopted the go/no-go task used by Masaki et al (1979) and the physical strength measurement used by the Japanese Ministry of Education, Culture, Sports, Science and Technology for people of ages 65 through 79: grip strength, sit-up, sit-and-reach flexibility, eyes-open-single-leg stance, ten-meter obstacle and six-minute walk. The subjects were 1384 Japanese (male: 524, female: 859, and ages from 3 to 77). Significant correlations were seen between the measurement items and the number of errors of the go/no-go tasks.

**18. An epidemiologic study on the relationship of mid-band and serum lipids in adult Japanese***Kunio Miyanishi, PhD; Fusako Arai, BA; Yoshiko Kontai, BA; Asako Tamura, PhD; Hideyuki Sone, PhD*

To investigate usefulness of mid-band by a method of polyacrylamide-gel electrophoresis (PAGE) in estimating of quantity and quality of serum lipids of total cholesterol (TC), triglyceride (TG), high density lipoprotein cholesterol (HDL-C) were tested on sera of 304 (male: 98, female: 206) in adult Japanese in Niigata. When analyzed by serum-lipids and the positive rates of normal-serum-lipids groups in male and female were 13.8%, 20.0% (in 1991); 18.3%, 14.8% (in 2001), respectively. The relationship of the mid-band positive rates by PAGE and increasing triglyceride was recognized in this epidemiologic study.

**19. Comparisons between two measurements of resting energy expenditure in bedridden elderly Japanese female patients***Noriko Mihara, MS; Kayoko Takahashi, PhD; Toyooki Sagae, MS; Asako Tamura, PhD; Masayuki Totani, PhD*

The resting energy expenditure (REE) measured using an indirect calorimeter were compared with the estimated resting energy expenditure (E-REE) by the Harris-Benedict formulas in the bedridden patients of percutaneous endoscopic gastrostomy (PEG:93 women, average age 85.1±6.3 years) and the oral nutrition ingestion (ON:298 women, average age 84.0±7.8 years) of Japanese woman. From these results, it was suggested that 1st; the quantity of energy requirement calculated by E-REE were overestimated for the bedridden patients, 2nd; the quantity of energy requirement in the patient of PEG should be decreased until about 90% of that in the patient of ON.