

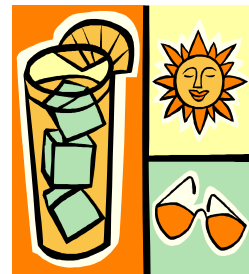
Volume 7, Issue 1



Department of Mental Retardation
Office of Quality Management
Living WELL



SPRING/
SUMMER
2007





*W*elcome to the Spring/Summer 2007 issue of "Living Well", a publication of the Department of Mental Retardation, Office of Quality Management. "Living Well" is published on a quarterly basis and features important information for individuals and their supporters.

In this edition, you will find helpful information to assist people you support to enjoy spring and summer activities in a safe and healthy manner. "Living Well" represents one component of DMR's continuing commitment to share information which will safeguard and improve the quality of lives of individuals we support. Information and knowledge is a powerful tool. We hope that this and future editions of "Living Well" will be used effectively to enhance our service system.

We'd welcome your feedback and suggestions regarding content areas for future editions of the publication. Please submit your suggestions to Sharon.Oxx@dmr.state.ma.us. Thank you!

*Gerald J. Morrissey, Jr. Commissioner
Department of Mental Retardation*

What is Adaptive Design?

“Adaptive Design” or ‘Assistive Technology’ are terms that are often used interchangeably to describe devices that are created or adapted in order to allow people with different disabilities to perform tasks and activities of daily living (ADLs). These devices can be as simple as a built-up spoon handle for someone with a weak grip or as complicated as a computer program that allows a person to speak.

When should I ask for an evaluation for an adaptive device?

Anytime you believe someone could become more independent or have more choices if there were a device that they could utilize to do such things as feed themselves, turn on a switch, communicate, bathe, walk, or work you should ask for an evaluation. You would be amazed at the variety of adaptive devices out there that can make a huge difference in someone’s ability to become more independent.

Where should I go for the evaluation?

Contact one of the design centers listed below. They will let you know how the process works. You will probably need an order from a health care provider (HCP) to get the evaluation. Staff of these centers are real problem solvers!

CONTACT INFORMATION FOR DMR ADAPTIVE DESIGN CENTERS

<u>Central / West</u> JoAnne Henry, Clinical Coordinator Adaptive Design Services 195 Industrial Drive Northampton, MA 01060 413-586-7424 Ext. 103	<u>Central/West</u> Cindy Brown, Director of Health Services 175 State Ave. Palmer, MA 01069 413-283-3411 Ext. 216
<u>Northeast</u> Tom Mercier Adaptive Design Center/ Assistive Technology Center Hogan Regional Center Box A 450 Maple St. Hathorne, MA 01937 978-774-5000 Ext. 505	<u>Southeast</u> Dottie Rother Adaptive Design Center Wrentham Developmental Center P.O. Box 144, Emerald St. Wrentham MA 02093 508-384-5550
<u>Metrowest</u> Darlene Hoey Therapeutic Equipment Center The Fernald Center 200 Trapelo Road Waltham, MA 02452 781-389-0305	

What's so bad about snoring?

What causes snoring?

When we sleep the muscles in our throats relax which leads to a narrowing of the throat and airway. Snoring itself indicates that the airway is not open enough or is blocked. The sound of snoring is made when the body is trying to force air through that blocked air passage. Approximately 10-30% of adults snore. In most cases snoring causes no serious health risks.

So why is it a problem?

For most of us that is no problem. But for about 20% of those who snore, very loud nightly snoring can be a sign of a possibly life-threatening condition known as **obstructive sleep apnea syndrome or sleep apnea**. In people with sleep apnea, the narrowing of the throat is so great that it becomes hard to breathe. So the brain signals the body to increase it's efforts to breathe which in turn briefly awakens the brain so that the airway can stiffen and open the throat. Effort to breathe then decreases again and the brain goes back to sleep. These interruptions in sleep can happen hundreds of times per night. If you have sleep apnea you may not get enough oxygen during sleep and probably don't sleep soundly. You are probably sleepy during the day and that can affect your work and social activities and even car accidents.

Who is at greatest risk for sleep apnea?

- People who are overweight
- Men and women with large neck sizes: 17 or more inches for men, 16 or more inches for women
- Middle-aged and older men and post-menopausal women
- Ethnic minorities
- People with small throats, smaller than normal jaws, or a large tongue
- **Adults and children with Down Syndrome**
- Children with large tonsils and adenoids
- Anyone who has a family member with sleep apnea

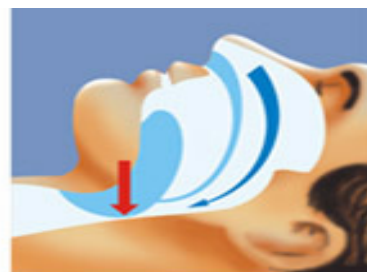
What are the signs of sleep apnea?

- Unrefreshing sleep/ frequent waking
- Daytime sleepiness
- Morning headaches
- Poor concentration and forgetfulness
- Mood changes: anxious, irritable, depressed



Normal Breathing

- Airway is open
- Air flows freely to lungs

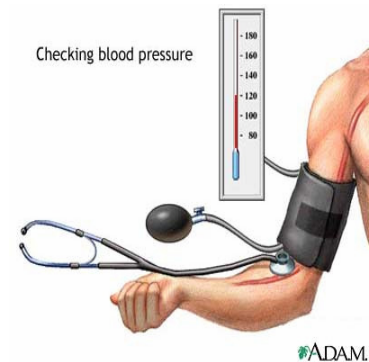


Obstructive Sleep Apnea

- Airway collapse
- Blocked air flow

What are the health risks associated with sleep apnea?

- Increased heart rate
- High blood pressure
- Increased risk of stroke
- Heart attack
- Impaired glucose tolerance and insulin resistance
- Frequent nighttime urination
- Depression
- Menstrual irregularities
- Increased risk for automobile accidents while driving

**Are there treatments for sleep apnea?**

There are several treatment options for sleep apnea. Some are as simple as losing weight or changing sleeping positions. For more serious cases there are machines called Continuous positive airway pressure (CPAP) that provides a steady stream of pressurized air to a person by using a mask. This pressure helps keep the airway open when sleeping. There are also oral devices that look like a sports mouth guard that help maintain an open airway by stabilizing the lower jaw, tongue or soft palate and uvula.

What should I do if I suspect someone I support has sleep apnea?

Talk to your Supervisor and let them know of your concerns. They can have the person evaluated for sleep apnea and prescribe the appropriate treatment.

*Fact sheet concerning sleep apnea, as well as the topics in this newsletter, can be found by going to the DMR website. Look for the Health Care Initiative and click on Guidelines for Observable Signs of Illness.



DEHYDRATION

(the lack of sufficient fluid in the body)

Because many people are on certain medications requiring a stable blood level to maintain effectiveness (like seizure and psychotropic medications), even mild dehydration can cause those blood levels to rise to dangerous levels, even toxic levels. This can create serious health consequences for the individual. Increasing fluid intake on hot days and offering them frequently can help prevent such an event.

Some signs of dehydration include:

- Decreased amount of urine
- Less frequent urination
- Dry skin or cracked lips

- Sunken eyes
- Less elasticity to the skin
- Fever
- Sleepiness
- Headache
- Increased heart rate
- Strong, dark urine



REMEMBER:

Popsicles, watermelon, cantaloupe, fruit salads and jello all contain a lot of water.

And summertime is the perfect time to indulge in such treats.



As many of the individuals supported by staff may not be able to express their increased need for fluids or are unable to access it independently, special effort must be made to anticipate this need by staff.

RULE OF THUMB:

If a staff person is consuming a beverage, the person that they support should have one as well.

HEAT ILLNESSES

- **Heat Cramps** occur after vigorous activities like running or playing tennis. The signs are painful abdominal spasms and cramps in major muscles such as the legs and abdomen. Cramps subside with rest, cooling down and plenty of water.
- **Heat Exhaustion** has many symptoms-fever, heavy sweating, fainting, rapid pulse, low blood pressure, clammy skin, ashen skin tone and nausea. Overexertion and not drinking enough water is the usual cause. To treat it, go indoors with a fan or air conditioning or to a shady spot, apply cool clothes, immediately lie down with your legs elevated, loosen tight clothes, and drink cool water or sports beverages.
- **Heat Stroke (Sunstroke)** can be life-threatening and requires immediate medical help. The symptoms include not only those associated with heat exhaustion, but also very rapid pulse and breathing, delirium, unconsciousness, and lack of perspiration to cool the body.

Risk factors for heat stroke include:

- Dehydration
- Age over 65
- Obesity
- Consuming alcohol in hot weather
- Having chronic heart or lung disease
- Taking medications that interfere with the body's heat-regulating system



To Prevent a Heat Illness

- Avoid direct sun from late morning until 4pm
- Limit vigorous exercise or chores to early morning or late afternoon
- Dress in light colored, loose-fitting clothes
- Continually drink plenty of water or juice
- Avoid caffeine or alcohol
- Eat light meals



SUN EXPOSURE

Whenever you or the people you support are in the sun, you need to apply sunscreen. Buy a quality product rated at least SPF (Sun Protection Factor) 15 and apply it liberally to all exposed skin at least 30-60 minutes before going out into the sun and frequently thereafter especially during peak sun hours or after sweating or swimming. Not only will this help prevent sunburn but skin cancer as well.

Too much sun is also a risk factor for cataracts, so use sunglasses that block UVA and UVB ultraviolet rays. And don't forget your wide brimmed hat

Remember:

Certain medications (like anticonvulsants, antipsychotics and high blood pressure medications) can cause people to burn more rapidly and more severely.

WATER SAFETY

Enjoying the water can be a special way to enjoy warm, summer days. With some precautions and planning as outlined below, these activities can be the basis of happy memories of a fun summer.

- Assess each individual's capabilities and needs when using different water venues, such as a pool, the ocean, or boating. Ensure staff are knowledgeable of people's capabilities and staff have water safety skills to support individuals while enjoying water activities.
- Know each individual's vulnerabilities and provide ongoing supervision to ensure everyone's safety. Remember, in sight supervision must be provided at all times to fully ensure safety.
- Before use, identify and utilize other available resources to ensure safety such as Lifeguard over sight of the beach or pool.
- Before use, identify any potential hazards and unique safeguards required for the specific water environments individuals will be using. Potential hazards, for example, could include finding out about surf conditions to determine whether swimming in the ocean is safe, or knowing the depth of the water or possible underwater hazards when swimming at a lake or river. Unique safeguards would include the use of life jackets when boating.



- Watch out for the “dangerous too's”—too tired, too cold, too far from safety, too much sun, too much strenuous activity.
- Pay attention to the weather and stop swimming at the first indication of bad weather. Know what to do in an electrical storm.

For pools at individuals' homes, ensure that the pool is maintained safely and that safeguards are in place when the pool is temporarily or seasonally not in use. For more information, refer to the DMR “Safeguards for Pools” issued on 1/8/97.

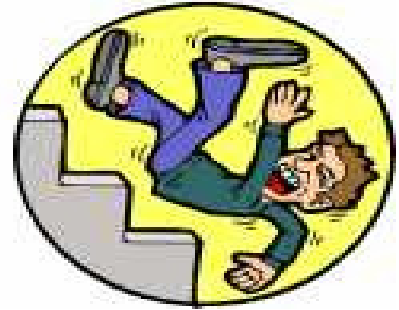


Even wading pools can pose a danger. Make sure the surfaces are not slippery as people step into the pool. Apply nonskid bathtub decals to reduce this risk. Ensure that individuals are well-supervised when using the pool, and empty the wading pools when not in use.



Incidents Involving Falls: Did You Know?

Based on a review of incidents entered into the Incident Management System known as HCSIS, between March 2006 and February 2007, 35% of all incidents that resulted in an injury were due to falls.



What's the good news?

While it is not expected that we can prevent every fall or mishap, having this information can really help us identify potential safety risks for people and thereby minimize the likelihood of injury.

What can you do?

- Survey the environment of the people you support. Look for tripping hazards like rugs and thresholds or items left on the floor like backpacks and remove them or make them more visible with reflective strips. Make sure stairs are well lit and visible especially if people in the house have vision problems. **Ask one of the Assistive Technology Centers to conduct an environmental assessment if you think there are safety issues.**
- Discuss ways to keep people who have seizures safer in their living environments.
- Provide hand rails in large open areas of a house for those who may be unsteady on their feet. Make sure all handrails on stairs are properly secured.
- Make sure all staff are using appropriate transfer techniques and know how to safely buckle people into wheelchairs and tie down wheelchairs in vans.
- Conduct regular equipment inspections (like brakes on wheelchairs, operating components of mechanical lifts, bathing equipment) and make repairs in a timely fashion to minimize the likelihood of a malfunction causing an injury.
- **Make sure the individual's Health Care Provider knows if the person is having frequent falls. It could be due to a number of things like medications, balance, foot problems, or vision.**



Car/Van Safety

With the coming of summer, individuals are eager to venture outside their homes and work places to utilize more community activities. Here are some important tips and information to keep in mind to help everyone stay safe when driving individuals during the frequent car/ van rides that occur throughout the course of the year.



Remember to:

- **Ensure that emergency contact information for individuals is readily available within the car/van and that everyone driving is aware of the emergency procedures and contact people, including what to do in the event of an accident**
- **Make sure that the car/ van is well maintained and ready to drive - inclusive of good tires and that it has at least half a tank of gas so that it is ready for use.**
- **Make sure that the car/van is ready for the season ahead. Ensure that the radiator has fluid, and that oil and windshield wiper fluid levels are acceptable. Keep water in the car for hot weather, and a blanket in the trunk in case of a problem in cold weather.**
- **Ensure that all equipment including specialized features is operational. This includes wheelchair lifts, seatbelts, brakes, turn signals, and headlights.**
- **Make sure that all seat belts and other devices used to secure wheelchairs are fastened properly.**
- **Keep your driver's license current and in good standing.**
- **Obey all traffic rules, including staying within posted speed limits, responding appropriately to traffic lights and stop signs, and following other markers.**
- **Drive defensively, and keep ever attentive to other vehicles sharing the road. Remember not everyone is a safe driver.**
- **Be sure to know the specific vehicle that you are driving. Know how responsive the brakes are, how the vehicle turns, and where the essential features such as hazard lights are placed.**



If the unexpected occurs:

- **Pull over as far to the right as possible**, away from the travel lane.
- If possible, pick a spot highly visible to oncoming traffic, **NOT** just over the crest of a hill, or on a blind curve. It may be safer to pull on to the grass.
- Park in a spot which allows room to get out, not on an overpass or bridge.
- **If the breakdown is at night, stay in the vehicle under a streetlight.**
- **Put on your hazard lights** and only if it is safe to do so, put up your hood. This signals to others your distress.
- Use your cell phone and **call 911** for any roadside emergency.
- One driver and one individual could probably safely exit the vehicle and stay behind a guardrail or on the grass away from the vehicle.
- When one driver is transporting more than one individual it is usually safer to stay in the vehicle with seatbelts buckled, hazard lights on and hood elevated.
- On any road or highway, **know when a “breakdown” lane is an active travel lane. In the Boston area**, during the morning and evening commuter rush **Routes 3, 93, 95 and 128**, allow breakdown travel. Posted signs show the hours.
- **If it is hot sunny day, remember to open the windows. If the windows do not open, open the doors on the side of the vehicle away from the traffic (usually the right side).**

Driving a van or SUV may be a different experience for some staff who are more accustomed to driving passenger cars. The following cautions apply to van use. Most importantly, don't be afraid to ask for help if you feel uncomfortable in any way.

- **Bear in mind that vans typically have larger blind spots than cars. Know where these spots are and know when you will need to look to your right or left to ensure that there is no one coming prior to making turns.**
- **Visibility is also different when backing up. Make sure that you always look behind the van at least twice before backing up. You may want to have another staff guide you from outside the van.**
- **The height of vans also makes them more sensitive to wind and to high speeds, typically resulting in a less smooth ride with more instability and rocking. Be cautious when driving under these conditions.**
- **Know how to control the van in the event of a skid as these vehicles often respond differently in snow, ice, or slippery surfaces.**

And remember:

Never, ever leave an individual unattended in a vehicle.



CREEPY CRAWLEES and OTHER PESTS

- **Bee, wasp or hornet stings** can cause a medical emergency if one is allergic to them. You should be aware of those you are responsible for who have this problem and follow protocol if they should get stung. Most people, however, only experience a sharp pain that goes away after a few minutes. It is important to remove the stinger promptly: use a flat edge such as a credit card to scrape it from the welt, Wash the area and apply ice. Continue to monitor for signs of infection or increased inflammation.
- **Deer ticks** are tiny insects that live in low brush and can spread Lyme disease in a small percentage of the people they bite. *Use bug repellant with DEET whenever out in such areas to keep these pests and others away.* Wear a light colored long-sleeved shirt, long pants, socks and a hat if you are in tick country. When you get home, carefully check yourself and the person you support for ticks. And don't panic! Generally, a Lyme disease carrying tick usually has to be attached for at least 24 hours to spread the disease. Ticks can be difficult to kill so it is best to flush them down the toilet whenever possible.
- **Mosquitoes:** Avoid outdoor activities at dusk or dawn. That is when they are most active. Use a mosquito repellant. Most repellants are effective for many hours so there is no need to keep reapplying it. Wash it off carefully after going back inside. Wear light-colored clothing as mosquitoes are attracted to dark or bright colors.

If you would like further information on these topics or others, we suggest you visit the following websites: www.state.ma.us/dph



MAP REMINDER:

A HCP order is NOT needed for the use of

Bug Spray

Or

Sunscreen



Summer Dining

Fresh food, picnics and dining out are part of the great summertime experience. When eating out, just remember:

- Be aware of individuals' allergies, dietary restrictions and needs, especially with the availability of more and different summertime and outdoor foods.
- Ensure that family and friends are equally aware of the individuals' allergies and restrictions.
- Ensure that specific dietary plans are clear, and that any protocol in place for eating at home is also implemented in community settings. For instance, ensure that the individuals' food is of the appropriate consistency.
- Remember that typical picnic and barbecue foods are not always optimal for all individuals, and come prepared with alternatives. For instance, certain individuals may not be able to eat sandwiches, peanut butter, and/or hot dogs safely.
- Keep cold foods cold and hot foods hot to avoid food poisoning from bacteria.
- Keep track of any new reactions to new foods eaten- breaking out in hives when eating different fresh fruit, for instance.
- Encourage individuals to sit and dine, rather than to eat on the run.
- Closely supervise individuals during meals. Be alert to any signs of choking or difficulty eating, and know what to do in an emergency.

Call 911 if the person is:

- Blue, can't talk or make a sound or is not breathing (**Attempt Heimlich Maneuver**)
- Having difficulty breathing
- Looks very ill

If you think there might be a problem with swallowing:

- Document what you see
- Tell other staff, the nurse, and your supervisor what you see
- Stop the meal if the symptoms worsen and report it to the nurse or your supervisor according to your agency's policy
- Have the person eat at a slow pace
- Tell the doctor what you see

A common problem for many of the people that you work with is dysphagia (any problem a person may have with swallowing). Swallowing problems can lead to aspiration. Aspiration is a word that means food or fluids that should go into the stomach go into the lungs instead. There are several ways to tell if someone has dysphagia or aspiration problems. You may first notice these signs and symptoms when out and about. Make sure that you report any of these signs and symptoms to your supervisor. The person's doctor will order the tests that they think will be best for each person.



Common signs of dysphagia and/or aspiration are:

- Coughing before or after swallowing
- Much drooling, especially during meals
- Pocketing food inside the cheek
- Choking on certain foods, for example white bread
- Nose running or sneezing during dining
- Trouble chewing
- Trouble swallowing certain types of food or fluids
- Taking a very long time to finish a meal
- Getting tired during the meal
- Refusals to eat certain foods or finish a meal
- A complaint of feeling like something is caught in the throat
- A gurgly voice during or after eating or drinking
- Much throat clearing after a meal
- Repeated episodes of choking, frequent colds, pneumonias or “allergies”
- Unexplained weight loss
- Unexplained fevers that come and go
- Coughing when lying flat or sitting up quickly from a reclined position



Picnic Checklist

As you head out this summer to enjoy the warm weather and outdoor activities, here's a checklist to help you make sure you have everything you need to make it a safe outing for you and those you support.

☐ **Sunscreen (SPF 30 or greater)**
☐ **Plenty of water or caffeine-free beverages**
☐ **Lightweigh clothing to cover up if very sunny**
☐ **Eipens (if ordered for anyone allergic to insects or food)**
☐ **First Aid Kit**
☐ **Equipment to allow food to be prepared to correct consistency (if applicable)**
☐ **Plenty of gas**
☐ **Portable ramp for access (if applicable)**
☐ **Information about site you will be visiting (directions, bathroom access, parking, WC access, etc.)**
☐ **Towels if swimming planned**
☐ **Bug spray**
☐ **Fully charged cell phone for emergencies**
☐ **Emergency fact sheets for all individuals**
☐ **Lots of ice and coolers to keep cold foods cold**
☐ **Hats to protect from the sun**
☐ **Food that can be safely maintained in hot weather (to prevent food poisoning)**
☐ **Enough staff to assure safety**
☐ **Adapted utensils (if applicable)**
☐ **Change of clothes for swimmers or those with toileting issues**
☐ **Blankets and chairs for seating**


Graphic By: Nick Obloy

West Nile Virus

(And we don't live anywhere near the Nile)

So what is it?

West Nile Virus (WNV) was first diagnosed in New York City in 1999. This potentially fatal disease has spread across the country more quickly than expected. Its continued spread means that it is here to stay.

How do I get it?

WNV is principally a disease of birds. It grows inside an infected bird and is spread to other birds, animals and people through mosquito bites. Not all species of mosquitoes carry the disease. Even in areas where mosquitoes carry the disease, much less than 1% of the insects are infected.

Although adults are more likely to be bitten by mosquitoes than children and men are bitten more often than women, anyone can become infected with WNV. The disease cannot be spread through normal contact with infected animals or people.

What are the symptoms?

Most infected people will not know that they have the disease because they will have either very mild symptoms or no symptoms at all.

The symptoms may include:

- **Fever**
- **Headache**
- **Body aches**
- **Skin rash (rare)**
- **Swollen lymph nodes (rare)**



The symptoms usually occur within a few days to a couple of weeks after infection. Persons who have flu-like symptoms that continue for more than 2-3 days should contact their physician immediately. If a mild infection exists, fluids and rest will be prescribed. Those who have symptoms of a more severe infection will be given a blood test to see if there are antibodies to the virus present.

What if I have a severe case?

Because so specific treatment currently exists, people who develop a severe infection are hospitalized to receive supportive care to help their bodies fight the disease. That care might include intravenous fluids, respiratory support, and prevention of other infections which can weaken the body's ability to fight the WNV. Most people fully recover from WNV.

So what can I do to prevent it?

There are several things you can do to lower the risk of WNV by lowering the risk of mosquito bites:

- **Remove all open containers of water and fill all pools of standing water near your home**
- **Stay indoors at times when mosquitoes are most active-dawn, dusk, and early evening**
- **When outdoors, wear long-sleeved shirts and long pants**
- **Be on the lookout for dead birds, especially crows and jays, and report them to local and state authorities**
- **Avoid floral-scented perfumes and toiletries, such as soaps, lotions and shampoos**
- **Spray clothing with insect repellent that contains 35%-50% DEET. Use repellent sparingly on exposed skin, and follow manufacturer's instructions**
- **Vitamin B and ultrasonic devices are not effective against mosquitoes**

The risk from WNV is real but extremely low. By taking a few precautions and being aware of the WNV symptoms, you'll be ready to enjoy all of the pleasures of summer.