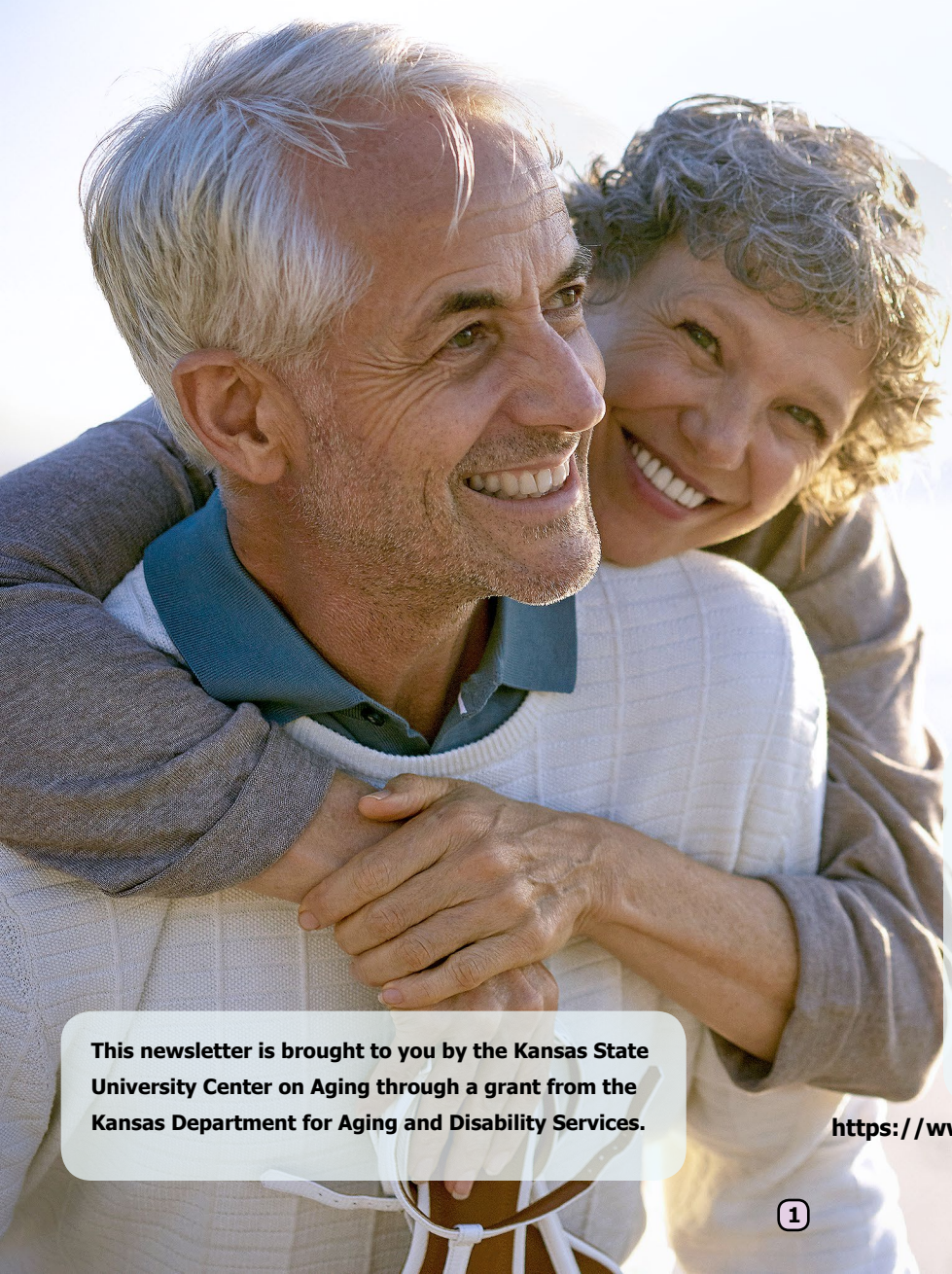


PEAK



2.0



JANUARY 2021

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This newsletter is brought to you by the Kansas State University Center on Aging through a grant from the Kansas Department for Aging and Disability Services.

Note From Laci

Happy New Year! It feels like this greeting carries a different kind of weight this year. Goodbye 2020 and bring on the new possibilities of 2021. I do not know where you are with this personally, but we can all relate on some level. I have thought a lot about what to say to you and I found myself at a loss for words. I tried to imagine what you are going through on the front lines, and without experiencing it first hand, I can't know what you know. It reminds me of a Brene Brown video about empathy vs. sympathy (if you haven't seen it, this is a short must-watch video). There is no "silver lining" to this, all I can say is this is hard and you are not alone.



*Laci Cornelison, PEAK 2.0
Program Coordinator*

I do want to get a little vulnerable with you and share a personal story. Our family has experienced a tough transition during this pandemic. My husband of 19 years had to stop working because of chronic health conditions and go on disability. His illness has been bad for the last 10 years, but it all came to a head starting this past September. His illness has been a little like the pandemic, it feels like it is unrelenting and just when I think it is going to get better it gets worse.

There is no "silver lining" to this situation, either. It is tough, it is daily, and I don't know how long the intensity of it will last. Something that has given me hope through this experience is to look for spots of light through the darkness. Even though our family's world has changed drastically, there are bright spots throughout it. If I focus only on the bad, I see only bad. If I focus on the bright spots, I see more bright spots. These bright spots are what keep me persevering.

Are you tired and weary? Look for the bright spots, remember the difference you are able to make in the lives of the elders you serve and see more bright spots, and spread the love. Encourage others. Help each other know we are not alone.



***"When it rains look for rainbows,
when it's dark look for stars." – Unknown***

PEAK 2.0 Re-Visioning

In the last newsletter, we shared the process of re-visioning PEAK through the PEAK Advisory Team. To recap, the PEAK Advisory group has been meeting since early summer and developed a proposal for re-visioning PEAK 2.0. Renee Porter, Shawn Sullivan, and Laci Cornelison presented this proposal to the Nursing Facility Stakeholder group in December to field questions and get feedback. The next step is for the KDADS leadership to review the proposal, make their recommendation, and make decisions about next steps.

We were excited about the warm reception of the plan from the Nursing Facility Stakeholder group. A huge congratulations is in order for the PEAK Advisory Group for their hard work (during a pandemic) on the plan and we cannot wait to release the details to you. Because COVID-19 has continued for longer than any of us ever anticipated, all parties involved agreed that the release of the PEAK 2.0 re-visions (currently pending approval from KDADS) will occur starting in Spring of 2022 with an official start date of July 2022. PEAK 2.0 will continue unchanged until that time.

The PEAK Team's focus for the 2021-22 year of PEAK is to support homes in regrouping through the aftermath of the pandemic. Most homes have had to suspend some of their person-centered care practices during the pandemic and will need to put previously implemented person-centered practices back into place once restrictions are reduced from the pandemic.

Questions or Comments? Feel free to reach out to Laci or Renee for more information:

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PEAK 2.0 Enrollment Now Open! *What Does It Mean For You?*

Typically, at this time of year, we are frantically preparing you for evaluations. While a few homes are choosing to undergo evaluations, most have chosen to take a "bye" this year and remain at their current PEAK level due to the COVID crisis. We hope that this flexibility has served you well during this time. While the future is still full of uncertainty, we are beginning to look to the future with hope. The vaccines are starting to make their way to us and we will continue to move forward. PEAK 2.0 activities will resume starting July 2021 and return to normal operation.

What does this mean for you? As a PEAK home, you are already enrolled. While that means you do not need to enroll, you will need to do two things based on your level.

Foundation, Level 1 and Level 2 Homes:

1. Complete an action plan: Due April 15 (details to come via email)
2. Complete the KCCI survey (details to come via email)

Level 3, 4, and 5 Homes:

1. Begin thinking about mentoring activities you could do starting in July 2021
2. Complete the KCCI survey (details to come via email)

We also encourage you to spread the word about the program and tell others to get involved. Below is some information about why the program might be valuable to non-enrolled homes. Feel free to use this information to recruit others. A personal email or phone call from you will go a long way.

Recruit Others

Help us by sending your colleagues information about PEAK. Here is a sample letter that

PEAK 2.0 Enrollment Now Open! *What Does It Mean For You?* (cont'd)

includes why a home might want to get involved. Feel free to adapt it for a personalized touch.

Did you know that enrollment is open to participate in PEAK 2.0? We currently participate in the program and have found it very helpful in improving the quality of care and life for our elders. That being said, this year has been tough! The pandemic has caused us to put our primary focus on COVID-19 prevention, mitigation and treatment, but the program allowed us flexibility during this time. Now that a vaccine is on the horizon, we know it will soon be time to work on getting our systems back in place to support person-centered care. This is where PEAK can help. All of us have suffered. It will soon be time for all of us to look ahead to the new “us” as an organization. There is no better time to avoid going back to business as usual, but rather use this opportunity to improve your organization. Person-centered care is proven to improve quality of care and life, as well as have financial benefits through increased census and reduced turnover. PEAK 2.0 is a program that can help lead you through this and has many free resources. I'd love to share our experience if you want to learn more. To enroll, go to the following link: <https://www.hhs.k-state.edu/aging/outreach/peak20/enroll/>

*** Active participation and incentive payments begin July 1, 2021.*

COVID-19: Perseverance, Hope & Healing

If you have watched or read the news, looked at your social media accounts, went to work, or talked with friends and family, chances are you are inundated with the effects of COVID-19. The effects on our personal lifestyle, the lives of the elders we serve, the economic and human loss, and the political strife. It is heavy. With a vaccine on the horizon, there is hope; a careful hope laced with the reality that today is still hard. How do we as leaders and frontline workers keep persevering, instill hope, and acknowledge and affirm all that has happened over the course of the last year?

Depression, Anxiety, Isolation, & Burnout:

Frontline Healthcare Workers (You):

One of the difficult truths is that our mental health has suffered during this pandemic. Fifty-three percent of adults in the US reported that their mental health has been negatively impacted by the pandemic (Kaiser Family Foundation). Prior to the pandemic, 1 in 10 people reported symptoms of depression and anxiety. Now, more than 1 in 3 report these symptoms. The impact on healthcare workers is even higher with workers experiencing; difficulty eating and sleeping, increased alcohol consumption, and worsening chronic conditions (Kaiser Family Foundation).

COVID-19: Perseverance, Hope & Healing (cont'd)

Hope & Practical Tips:

One piece of hope is that vaccines are starting. This helps remind us that a new normal may be on the horizon. We also know that vaccines will not change our situation overnight. The continued fueling of our spirit is important to continue persevering. Here are some ideas:

BE INTENTIONAL ABOUT SELF-CARE	FIND HEALTHY OUTLETS: WALKING, EXERCISE, MEDITATION	ESTABLISH A GOOD SUPPORT SYSTEM	USE TELEHEALTH COUNSELING WHEN NEEDED
MINDFULNESS	FOCUS MORE ON WHAT YOU CAN DO AND LESS ON WHAT YOU ARE NOT ABLE TO DO OR FIX.		
GRIEVE	ACKNOWLEDGE LOSS	SUPPORT ONE ANOTHER THROUGH LOSS	MAKE RESOURCES AVAILABLE ON GRIEF

Minnesota Department of Health, American Medical Association, and the World Health Organization have additional resources that might be helpful for you as a leader and your team.

Elders in Nursing Homes:

Elders are particularly vulnerable to COVID-19. The level of isolation and restrictions of freedoms for elders in nursing homes is at an all-time high. The presence of severe loneliness is already twice as high for elders living in nursing homes on a normal basis (Simard & Volicer, 2020).

The increased isolation only fuels an already existing challenge. Loneliness can lead to complications like depression, suicidal thoughts, acting out behaviors, anxiety, and failure to thrive (Simard & Volicer, 2020).

Hope & Resources:

The vaccine is also a source of hope for elders. Transparent communication about the vaccine is important including what you know about timelines. As staff, we also need to foster resilience and good mental health. Remember that we have two COVID resources that can help your teams with this: Resident Voice and COVID and Visitors (there is a section on mental health in this resource).

COVID-19: Perseverance, Hope & Healing (cont'd)

Healing from Trauma:

Nearly 40% of the COVID deaths are happening in nursing homes. IT IS NOT YOUR FAULT! You needed to hear that. What this statistic does not describe is the tidal wave of grief and loss this leaves behind for staff and elders. This means you have lost your elders and elders have lost their friends. This has produced an unexpected amount of trauma that you and your elders have not fully experienced nor had a chance to heal.



As a team along with your elders, acknowledge grief, provide time to talk about and process feelings and celebrate the lives and memories of those that are lost during the pandemic. Be creative in how you celebrate those lost to continue to keep elders and staff safe. Consider offering spiritual support to both staff and elders. For staff, it may help to have a dedicated time for team members to download or decompress after shifts. Know your specific community resources and share them with your teams, elders, and families.

Resources:

The Centers for Disease Control and Prevention (CDC) has multiple resources worth checking out: [Grief and Loss / Tips for Survivors / Tips for Healthcare Workers Responding](#)

References:

Simard, J. & Volicer, L. (2020) Loneliness and isolation in long-term care and the COVID-19 pandemic. *JAMDA*, 21(7), 966-967, doi: 10.1016/j.jamda.2020.05.006

Panchal, N., et al. (2020). The implications of COVID-10 for mental health and substance use. Kaiser Family Foundation, Retrieved from: <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>