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HCQU Staff

# HEALTHY CONNECTIONS

THE QUARTERLY NEWSLETTER OF COMMUNITY HEALTH CONNECTIONS

WINTER 2011



## Going Above and Beyond

Do you know someone that has gone the extra mile to help someone or just did something to make life a little easier for someone else. Maybe coming to work everyday with a smile, positive attitude, working extra

*(Continued on page 2)*

## Governor-elect Tom Corbett Addresses Provider Alliance

By: **Mary A. Nau, Director**

"It is a unique experience that a gubernatorial candidate takes the time to meet with a provider association to discuss our issues" wrote Provider Alliance head, Ed Picchiarini, in an email to his membership this past October. It was shortly before Election Day when, then candidate, Attorney General Tom Corbett, spoke to a special



**Governor elect Tom Corbett and Mary Nau.**

meeting of The Provider Alliance. The Provider Alliance is a trade organization of over 50 providers of ID/DD services in Western Pennsylvania. The group wanted a sense of what our future might look like under a Corbett administration. Besides learning how Mr. Corbett might approach the challenges ahead, we wanted to get a sense of the man himself...would he

approach us honestly? Did he have respect for the work we do, and the people we serve? When Mr. Corbett said he couldn't

support a mandatory COLA for our workers because of the current financial woes, one might conclude that he clearly wasn't about scoring cheap points. One Provider Alliance member challenged Mr. Corbett to

examine and eliminate redundancies in our system as well as nix programs that are wasteful. This member named a few programs as examples (the HCQU wasn't one of them). Mr. Corbett stated his commitment to reduce waste in the system and expressed his desire for input during his

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time, always doing something special to make someone smile, being involved in charitable activities, helping someone in need or giving back to the community? Whatever it might be, we would love to hear about it. Go to [www.hcqu.org](http://www.hcqu.org) and write a short paragraph about that special someone and what they did to make a difference in your life, someone else's life, or in the community. We would love to share your story with others in our next issue of *Healthy Connections* newsletter.

administration from providers about ways to make our system more efficient as well as effective.



**Ed Picchiarini, The Provider Alliance**

Ed Picchiarini summarized Governor elect Corbett's responses in his email to members. Mr. Picchiarini included:

- Holding D P W accountable for its contracts with providers
- His assurance that the regulatory process will be used (rather than bulletins and announcements)
- A commitment to address the waiting list
- A commitment to an open process with providers
- He strongly encourages a two-year budget to ensure that programs can plan strategically
- His commitment to ensure that providers know the rules and rates before the year begins, and not after

the year is closed

- He does not support a mandatory COLA due to the present financial challenges in PA
- A commitment to reduce redundancy and waste in the system
- His commitment to keep spending under control

Mr. Corbett wasn't the only one listening to provider concerns. Those of us from Community Health Connections were listening too, especially to concerns about inefficiencies. We want all providers who rightfully scrutinize the landscape of services to know that Community Health Connections believes that if we don't produce, and if we are not effective, and if we are not responsible stewards, then we don't deserve their trust. We take providers' trust seriously and continue our wholehearted commitment to producing maximum value for every dollar invested in the health and safety supports that we exist to deliver.

Our thanks are extended to The Provider Alliance and Ed Picchiarini for bringing in Mr. Corbett and consistently providing relevant forums that ultimately benefit the individuals receiving support.

## New! Drug Interaction Tool

By: Kelly Fisher, RN; Physical & Behavioral Health Consultant

Facts & Comparisons®  Answers

Do you support a person who takes multiple medications? Has the person you support recently been prescribed a new medication and you are concerned it might be interacting with their current medication regimen? According to Wellsphere, "The most complex patients are at highest risk for DDIs (drug to drug interactions). One should consider the potential for DDIs at all steps of the drug-delivery process. In a retrospective review of patients admitted to the emergency department, patients taking three or more medications or patients who were 50 years or older taking two or more medications had a considerable risk for DDIs. (17) Furthermore, as the number of medication administered increases, the risk for adverse effects increases. Patients taking two medications had a 13 percent risk while patients taking five medications had a 38 percent risk for DDIs. Patients taking seven or more medications had an 82 percent risk of developing adverse drug interactions."

The HCQU has a medication interaction program available to be utilized as a tool to look at the possibility of medication interactions. Please contact the HCQU if you would like further information or would like our agency to run an interaction for someone you are supporting.

## A Long, Hard Battle

By: Kelly Fisher, RN; Physical & Behavioral Health Consultant



Michael Douglas

On Tuesday, August 31, 2010, Michael Douglas, while appearing on the “Late Show with David Letterman”, revealed to the world his diagnosis of stage 4 throat cancer. Michael Douglas is a renowned Hollywood actor/director. He is the son of Kirk Douglas and Bermudian actress, Diana Dill. He is well known for his directorial role in *One Flew Over A Cuckoo’s Nest*. Douglas has always tended to play off beat characters. He has had roles in *Romancing the Stone*, *War or the Roses*, *Fatal Attraction*, and *Basic Instinct*. In 2009 he received the American Film Institutes Life Time Achievement Award.

Douglas defined his diagnosis of throat cancer, and attributed it to years of smoking and drinking alcohol. According to WebMD, physicians don’t

typically identify it as throat cancer as there are several types of cancer that may involve the throat or mouth. Douglas identified having a walnut shaped tumor at the base of his tongue. This is typically identified as an oropharyngeal cancer. As this area has no pain sensation, a tumor could become quite advanced before any noticeable symptoms appear. Smoking is a major cause for oropharyngeal cancer. Alcohol by itself does not show as high of a rate. However, when you put smoking and alcohol together, it becomes the worst combination for this type of cancer.

Oropharyngeal “throat” cancer is dramatically on the rise in the male population. In the past, it made up only 18 percent of head and neck cancers. It now accounts a full third. Research is currently showing a link between those with oropharyngeal cancer and those who have human papillomavirus or HPV. Recent research from Ohio State found that persons who have had six lifetime oral sex partners have the greatest risk of oropharyngeal cancer. It currently is unclear as to why some with HPV develop oropharyngeal cancer and others do not.

Symptoms may include a cough, changes in voice, such as hoarseness, difficulty swallowing, ear pain, bleeding in the mouth or throat, a lump in the throat or feeling that something is stuck in the throat. It is vital to follow up with your doctor if you are noticing any new symptoms that are persistent. This is especially important if you are a smoker. It may be advisable to see an ear, nose, and throat, or ENT, physician. The survival rate is truly dependent upon whether the cancer has spread beyond the throat. Douglas defined his cancer as a late stage IV cancer. This denotes the most advanced form. According to WebMD, there is a 60 percent survival rate if this cancer has not spread to the lymph nodes.

Treatment typically involves radiation and chemotherapy. In advanced cases surgery may be indicated. To Michael Douglas, we extend our heartfelt thought in his battle that lies ahead.

### My Deadly Appetite

*My Deadly Appetite* follows the story of Will, a young man that is diagnosed with Prader-Willi Syndrome, through his journey of seeking



Will

treatment at the Children’s Institute in Pittsburgh, PA. Will has been kicked out of school for his behavioral issues, is morbidly obese, and lives at home with his parents who love him, but are not able to provide all the supports that he needs. At the Institute, Will is put on a very low calorie diet and exercises daily. His behavioral needs are supported by a one-on-one staff and by Dr. Gregory Cherpes, M.D., who is the psychiatrist for The Children’s Institute. Dr. Cherpes is also the Medical Director of Community Health Connections. During Will’s stay, he loses about 60 pounds and learns different coping and social skills. Will’s food intake and health will constantly need to be monitored and his parents are receiving education in keeping Will safe. *My Deadly Appetite* is currently running on the Discovery Health Network. A copy of the program will be available for lending as soon as it is released.

## Exercise Is Not Just For The Young

By: Carol Oslosky, RN; HSC



Home-based exercises may protect high-risk elderly women from hip fractures, according to a study in the September 27, 2010, issue of the *Archives of Internal Medicine*,

Women who had issues such as severe osteoporosis, requiring walkers or canes, receiving osteoporosis medications or had bilateral hip replacements were not included in the study.

Of 160 women recruited, 84 were randomly assigned to an exercise program and 76 to usual care (the control group). The exercise group attended a supervised exercise program once a week for 6 months. The group was then asked to continue the exercises at home for 20 minutes a day.

Monitored in this study were bone mineral density (femoral neck - area just below the ball and socket of the hip), postural sway, and leg strength. Also tracked were hospital-treated fractures and measures of functional ability.

Activities of daily living were noted to have declined in both groups but to a lesser extent with the exercise group. The Mini-Mental State Examination scores and bone mineral densities also declined similarly in the both groups.

It is noted that one woman in the exercise group had died but eight from the control group had died. The exercise group had a significant increase in lower leg strength and maintained gait speed while the control group had declines. There were 17 hospital-treated fractures in the exercise group and 23 in the control group.

The study authors report that home-based exercises and voluntary home training seem to have a long-term effect on balance and gait and may even protect high-risk elderly women from hip fractures.

Although the study did not cover elderly men, it is probably safe to assume that similar exercises would also benefit them.



## The American Heart Association Teams Up With Nintendo

The American Heart Association teamed up with Nintendo to promote games like Wii Fit Plus and Wii Sports Resort for people of any age who don't exercise regularly.

Studies suggest that these types of programs promote fitness and better balance. Always talk to a doctor in advance of a new exercise program.



## Vitamin D and The Brain



Adults 65 and older with low blood levels of Vitamin D are up to 60 percent more likely to experience substantial mental decline, according to a study in the July, 12, 2010, issue of *The Archives of Internal Medicine*.

**HCQU Happenings:** To register, please visit our website at [www.hcqu.org](http://www.hcqu.org) or call (724) 283-0990.

### Everyone Can Communicate

**Presented by:** Augmentative Communication Specialist  
Temple University

**Date:** February 22, 2011

**Time:** 10AM - 12PM

**Location:** The CDC - Butler, PA

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### An Overview of Dental Care for People with Intellectual and Developmental Disabilities---Getting the Most From Your Dental Experience!

**Presented by:** Dr. David Pavasko, DMD  
Dental Director, Accessible Dental Services, Inc.

**Date:** March 22, 2011

**Time:** 10AM - 11:30AM

**Location:** The Arc of Indiana County - Indiana, PA

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### Aging with a Mental Illness (CEU)

**Presented by:** Dr. Gregory Cherpes, MD  
Medical Director, Community Health Connections

**Date:** May 26, 2011

**Time:** 1PM - 4PM

**Location:** McGuire Memorial Homes - New Brighton, PA

### Asperger's/Autism and Sexuality: Knowledge and Skills Necessary for Successful Relationship Development (CEU)

**Presented by:** Lawrence R. Sutton, Ph.D.  
Psychologist/Manager Western Region  
Bureau of Autism Services, ODP

**Date:** April 14, 2011

**Time:** 1PM - 4PM

**Location:** The ARC of Crawford County - Meadville, PA



### The Person Directed Framework: Partnering Through Feedback

**Presented by:** Guy Legare, M.Ps.  
Management and  
Clinical Training  
Consultant, PDSS  
Consulting, LLC

**Date:** April 20, 2011

**Time:** 8:30AM - 3:30PM

**Location:** The CDC - Butler, PA

## A Different Perspective

**By:** Christina Irwin, RN; HSC

Although I do not normally use a wheelchair, I was curious as to what the experience was like. I know spending an afternoon in a wheelchair can never compare to the reality of being dependent on a wheelchair to get around. But, I wanted to know what the experience was like--so I set out to the grocery store in a wheelchair. The first thing I noticed was that some people walk around not even knowing their zipper is down. Interesting! The second thing I noticed was that many people looked at me and smiled. There were a lot of looking and smiling people. Nice people--right? Maybe, but then again when I go in without a wheelchair I just run in and run out. No one makes eye contact or even looks in my general direction. I feel being in a wheelchair does bring attention, whether you want it to or not. Another thing I noticed was that people were willing to move out of my way. While moving down a busy aisle, everyone was willing to move to let me through. This was greatly appreciated, as I would have had to wait quite a while to try and move down the aisle. So what about the store? Well I was very lucky to have been in an updated store with wide aisles. Many of the products were stocked vertically, so the same items at the top were also at the bottom. This was very helpful; however, most of the items were stocked horizontally or only in one spot up high. This makes a short shopping trip turn into a long shopping trip, especially if there is no one to help you. My final observation when using a wheelchair was that after a short amount of time in a wheelchair, I became very sweaty. I felt as though I had sat in a damp chair. Yuck! I couldn't wait to get out of the chair and air out a little. It then occurred to me that someone who uses a wheelchair daily does not have the luxury of getting out of the chair and airing out. After spending the afternoon in a wheelchair, I feel I was able to have a glimpse into what I might be like to be wheelchair dependent. I know it was only a small glimpse, but I do think it helped me to see from a different perspective. I also feel everyone, especially those who are caregivers, should try this for an afternoon. You, too, will see how hard it is to move around or reach the items you want or have the ability to air out your sweaty behind.



# Bed Bugs

By: Margie Fend, RN; HSC

Have you ever heard the saying, "Sleep tight and don't let the bed bugs bite?" Always though bed bugs were a myth and this was just a saying? Bed bugs are real, and they are returning!

Bed bugs (*Cimex lectularius*) are becoming more widespread in the United States, and bed infestations have been increasing since about 1995. Bed bugs are elusive nocturnal feeders that hide in bedding, mattresses, and bedroom furniture. They pierce the skin of victims and take a blood meal. Like mosquitoes and lice, their saliva contains proteins that anticoagulate blood and very often cause localized allergic reactions. The bites appear as recurrent erythemic (red) pruritic (itchy) papules on the face, neck, and extremities. Bed bugs are small, reddish-brown wingless insects that feed on human blood during the night. They are about the size of a lady bug or an apple seed. Bed bugs do not fly; they either crawl or are carried from place to place in a person's belongings. Before a bed bug feeds on blood, its body looks flat with a circle shaped abdomen; however, after it has fed, the body lengthens and becomes narrow. Bed bugs can survive for weeks to a month with a blood meal.



Bed bug bites are usually self-limiting and have durations of three to ten days, but the bites can result in scarring. Oral or topical antihistamines or low potency topical corticosteroids will relieve the itching.

## Signs of infestations can be:

- Blood stains from crushed bugs
- Rusty sometimes dark excrement on sheets or mattresses, bed clothes, and walls
- Eggshells and shed skin may be found in the area of their hiding places

- An offensive, sweet, musty odor from their scent glands may be detected when bed bug infestation is severe

The Rest Easy spray is an EPA approved spray for bed bugs. Consult with a physician before using any over the counter pesticide and check with pest control specialist for professional advice on confirmation of bed bugs and products safe for bed bug extermination. Unfortunately, bed bug sprays will not work on severe infestations.



## The following precautions can help to prevent a bed bug infestation at home:

- If buying secondhand furniture-check the furniture, beds, and couches for any sign of bed bug infestation before bringing them home
- Use a protective cover that encases your mattresses and box springs, which eliminates any hiding places
- Reduce clutter in your bedroom to reduce hiding places for bugs

## When traveling:

- In hotel rooms, use luggage racks to hold your luggage when packing and unpacking rather than setting your luggage on the floor, bed, or cloth furniture
- Check the mattress and headboard before sleeping
- Upon returning home, unpack directly into the washing machine and inspect your luggage carefully

For more information, go to [www.cdc.gov](http://www.cdc.gov) or contact us at Community Health Connections, [www.hcqu.org](http://www.hcqu.org) or (724) 283-0990.

## From onHealth Magazine:

**Is needle phobia a real disease? Yes, it is a recognized mental disorder that can be severe enough to cause fainting. It even has its own name: belonephobia.**

## Westmoreland County Prosecutors Seek Death Penalty in Jennifer Daugherty Case

By Cheryl Parker, M. Ed; BHC

Jennifer Daugherty was killed last February after hours of torture, her body then dumped in a middle school parking lot. Following the murder, there was an outcry from the community and efforts made to remember Jennifer's life. In recent months, there has been less activity; however, Jennifer's family is still battling forward as preparations for trial continue.

There are currently six people charged with Jennifer's torture and murder, and prosecutors are seeking the death penalty for three of the accused. According to testimony, 17 year old Angela Marinucci, was a major instigator in the events which ended in Jennifer's death. Some testimony alleges that she was disappointed that the Christmas lights used to bind Jennifer were not battery operated. Reportedly, Marinucci stated that she wanted Jennifer's body to be discovered with blinking lights. Prosecutors cannot seek the death penalty for Marinucci; however, they are pursuing death for three of the alleged perpetrators: Ricky Smyrnes, 24; Melvin Knight, 21; and Amber Meidinger, 20. Also charged are 36 year old Robert Masters and 27 year old Peggy Darlene Miller. Masters and Miller are currently discussing possible plea agreements in exchange for their testimony against others in the group. Masters is currently providing the bulk of information being used against the group and has been placed in a separate area from the others for his safety.

In early November, Jennifer's family attended court hearings during which Masters described the hours of torture and the subsequent calculated murder of Jennifer. According to Masters, the group voted to kill Jennifer and Smyrnes and Knight then entered the bathroom where she was held and stabbed her repeatedly over thirty minutes. Upon realizing that she was still alive, they also cut her throat and wrists and later returned after discussing also breaking her neck. One can only imagine the pain these statements caused for Jennifer's family as they listened to the details of these horrific events.

As Jennifer's family battles forward, so must those of us who are dedicated to the safety of people with disabilities. The long awaited Department of Justice report released in 2009, indicated that in one year, 716,000 people with disabilities were the victims of violent crimes, and people with disabilities are almost twice as likely to be the victims of violent crime as their non-disabled peers. There is still much work to be done, and as Jennifer's family strives for justice, we can join them in ensuring that others are educated about the magnitude of crimes against people with disabilities and help put an end to it. Perhaps from the tragic loss of Jennifer Daugherty, others will be kept safe.



Jennifer Daugherty

## HCQU Contacts

**Barb Conniff**  
CEO, Milestone Centers, Inc.

**Mary Nau**  
Director  
mnau@hcqu.org

**Gregory Cherpes, M.D.**  
Medical Director

**Natalie Symons, RN**  
Clinical Services Coordinator  
nsymons@hcqu.org

**Leslie Dollman**  
MIS Administrator  
ldollman@hcqu.org

**Denise Quinn**  
Training Coordinator  
dqquinn@hcqu.org

**Amy Simon, RN**  
Health Services Consultant  
asimon@hcqu.org

**Brian Speakman**  
Behavioral Health Consultant  
bspeakman@hcqu.org

**Carol Oslosky, RN**  
Health Services Consultant  
coslosky@hcqu.org

**Cheryl Parker**  
Behavioral Health Consultant  
cparker@hcqu.org

**Christina Irwin, RN**  
Health Services Consultant  
cirwin@hcqu.org

**Danna Haffey**  
Behavioral Health Consultant  
dhaffey@hcqu.org

**Kelly Fisher, RN**  
Physical & Behavioral Health  
Consultant  
kfisher@hcqu.org

**Margie Fend, RN**  
Health Services Consultant  
mfend@hcqu.org

A Division of



## COMMUNITY HEALTH

### C-O-N-N-E-C-T-I-O-N-S

a Health Care Quality Unit

The Bantam Commons  
120 Hollywood Drive, Suite 201  
Butler, PA 16001

P: (724) 283-0990  
F: (724) 283-1012  
[www.hcqu.org](http://www.hcqu.org)



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## A Note From The Director



Dear Valued Readers,

Individual to Individual abuse. It's a concern for many who provide care in residential and day programs, and a focus for ODP as they examine the magnitude of this problem. How much of a role does anger play in this type of abuse? If we can moderate anger, can we also moderate the frequency and severity of I to I abuse? Researchers at the University of Georgia studied men with "high trait anger" (explosive-type personality). During the study, these men were each fitted with high-tech hairnets containing multiple sensors that could read electrical activity in the brain. By measuring the electrical activity and also using questionnaires, the men were given anger-inducing experiences and were then measured on their degree of anger. When the men exercised for 30 minutes (in this case, moderate bike riding), they showed much better control of their anger. Without going into great detail, the results of the study suggest that "exercise, even a single bout of it, can have a robust prophylactic effect" against the buildup of anger, said Nathaniel Thom, the lead researcher in this study. "It's like taking aspirin to combat heart disease," he said. "You reduce your risk." At the risk of sounding simplistic, but with research to back it up, we might consider looking at exercise as an effective agent for anger reduction as well as mood enhancement (research also shows exercise elevates depressed mood). Those receiving supports, especially those we support who might themselves have "high trait anger" could respond positively to regular exercise...and reduce risk of I to I abuse arising from anger.



Best regards to all,

Mary A. Nau