

The Veterans Voice



The Newsletter of the New Hampshire Veterans Home, Winter 2010

Family Involvement and Support - Bev Mac Quarrie's Journey



James Mac Quarrie served in the Army during the Korean War.

When life dealt Bev Mac Quarrie a whole lot of lemons, it took her a while to make lemonade.

Her husband, James (Jimmy) Mac Quarrie was a Korean War veteran. Born on May 26, 1936, he served in the U.S. Army in Germany from December 1953 to October, 1956. For most of his life he worked as a tool & die maker, retiring at the age of 65.

Bev recalls that after Jimmy retired, "he became quiet and we no longer were able to chat with one another. He was also depressed. A long diagnostic process led us to know the disease (Alzheimer's) was there, but we were in denial. He was officially diagnosed when he was 66 and he died when he was 72.

"In the beginning," she says, "I was very angry. He was so young. We thought we had so much to look forward to."

There were no Golden Years for Bev and Jimmy. She was still working full time at the NH Department of Health & Human Services as a Child Support Enforcement Officer and he was home alone. He would call her at work concerned because he thought strangers were in the house. He wasn't scared of them but they wouldn't "make eye contact" so he couldn't identify them. He also related that 12 to 15 men would come to the house every day and "do little jobs outside of the home" (like painting the fence). While in the kitchen with Bev, he would ask whether the (imaginary) people in the living room needed a ride home. She knew she needed help. She eventually hired a caregiver to stay with him during the daytime but then he would be up a lot at night. Finally she realized she just couldn't take care of him at home any longer.

Ellen Douville, New Hampshire Veterans Home Admissions Coordinator, gave her a tour and she filled out the application. Bev says, "I felt so guilty. It was our

second marriage and the expectation was that I would take care of him—no matter what." On August 22, 2005 Jimmy moved into to the Veterans Home's Life Enhancement Dementia Unit (LEDU) and was here for 3 ½ years.

Jimmy's initial adjustment wasn't easy, Bev explains. "Before he came to the Veterans Home he had been part of a study at Dartmouth. We didn't know if he was on the experimental medication or on a placebo. When he came here he had to stop taking the drug, and there was a huge deterioration. I was very upset. He was exit-seeking and wanted to come home. My feelings of guilt were overwhelming. I was very difficult to deal with.

"I kept asking myself if this was the right decision. My kids were very supportive; but Jimmy's were apprehensive. Ellen Douville said, 'Let me help,' and gave Jimmy's two sons a tour. As a result, they became supportive too.



June 30, 1990: The day Jimmy & Bev were married.

"After Jimmy settled in, he loved it here. I'd take him out for a few hours and he'd ask me to take him Home. He didn't mean our home, he meant the Veterans Home. He was so comfortable here. He slept and ate well. He was quiet and calm. He liked sweeping the floor. I think it was soothing to him. He was always a gentleman.

"Initially I didn't accept support from the Veterans Home social workers. I was angry, he was so young. I was beating myself up. I couldn't let go of the caregiver role—and that's why I was so difficult.

"When Jimmy first came here I was still working, so even though there was a support group for families, I couldn't come

"Although at one time I was so angry I couldn't see the forest for the trees, now I would like to help other people get past their anger and guilt."

- Bev Mac Quarrie

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Nursing Home Diversion??

by Barry E. Conway,
Commandant

I've heard of several different kinds of "diversion" programs and usually they have something to do with drugs or criminals. According to Wikipedia, "a diversion program in the criminal justice system is a program run by a

police department, court, or a district attorney's office designed to enable offenders of criminal law (usually minor offenses) to avoid criminal charges and a criminal record." Lately I've been hearing a lot about **Nursing Home Diversion**. To tell you the truth, it bothers me.

Some people think that the ideal solution to caring for elders is to have them live independently in their own homes and receive "home and community-based care" until they die. There are all kinds of articles written about how outrageously expensive nursing home care is, as opposed to home and community-based care. And besides, the authors say, living at home gives you a better quality of life.

Don't get me wrong. I don't think everyone should live in a nursing home. I strongly support the concept of independent living and home and community-based care—and I also believe—just as strongly—that there is a time and a place for nursing home care. *Life is a continuum, and appropriate care should be available throughout that continuum.*

We have residents here at the New Hampshire Veterans Home who lived in their own homes or in community-based facilities until they needed 24-hour nursing care. As good as it was, home and community-based care could not provide everything they needed anymore. In addition, many of our current residents have had caregivers who could no longer care for them.

We have a resident here who lived alone in a third floor apartment and was wheelchair bound. Most of the time the only meal he had each day was from Meals on Wheels. He had not been out of his apartment for several years. Now he is a member of our Writers Group, Art Studio, and is a leader in our Resident Council.

We had another resident whose family took wonderful care of him at home and used many home and community-based services, but he needed to be lifted and moved—and his children couldn't take care of him at home anymore. They had to work and although he attended some adult day care programs, he was home alone a great deal, bored, and lonely. When he came to the Veterans Home he made new friends and participated in many activities.

We could cite countless other examples of why there is a place—a vital place—in the continuum of care for nursing homes. While we support home and community-based care programs, we have also seen many situations where there are gaping holes in safety nets for elders. Coordination of care and continuity of care are critical. Caregivers are usually consumed 24/7 with care-giving, and may not be able to find or coordinate numerous community-based resources that could help their loved one.

As advocates for elders, we at the New Hampshire Veterans Home believe that the network of home and community based programs should be much stronger. Organizations like ServiceLink are working hard to support caregivers in their efforts to find dependable, affordable, and appropriate resources for their loved ones. We applaud their work.

At the same time, we'd like people to look at nursing homes as a good option for long term care. At our nursing home the residents receive 24-hour medical care, social services, therapeutic recreation, three meals a day and snacks; they have opportunities to make new friends and learn new skills. We do their laundry, help them with personal grooming, take them to doctor's appointments, make sure they get their medication on schedule, and much more.

Home and community-based care is like ordering from numerous à la carte menus from many different restaurants, whereas a nursing home is more like ordering a complete meal at one restaurant. Either way, you have to pay, but nursing home care is far more comprehensive and coordinated. We think it's more cost effective as well—especially if you add up all the time, energy, and other resources it takes to locate, finance, and coordinate the care of a loved one.

So while we still support home and community-based care, we also hope people will stop using the phrase "Nursing Home Diversion," because language is important, and the word "diversion" can have negative connotations. People who wrestle with the decision to trust a nursing home with the care of their loved one usually experience a great deal of guilt—understandably—and we need to help relieve them of that guilt rather than reinforce it.

A Note from Admissions

If you would like to receive information about the New Hampshire Veterans Home or make an appointment for a tour, please contact Ellen Douville or Shirley Ray, Admissions Coordinators, at (603) 527-4400.

Social Work at NHVH: Family Involvement and Support



Tom Heald, MSW, the supervisor of the NHVH Social Workers, has been in the field of Social Work for 35 years. We asked him—and our other Social Workers—to explain their roles at the Veterans Home.

Tom Heald, MSW: We are here to help people through life transitions. As family members age and need long term care, there will inevitably be changes in the relationships people have with each other. The hopes and dreams they once had will need restructuring.



Marti Bolduc, MSW – Tarr South

Families enjoy the social benefits of having a loved one here as opposed to having them home alone. Sometimes a son or daughter will say, 'This is the best I've seen my father [or mother] in ten years.' One of our residents' family members told me that her father has a better social life than she does!

The Social Worker as Enabler (in a good sense)...

The social worker promotes and strengthens family members' motivation to deal with life transitions. He or she listens to, identifies, and manages feelings of guilt and anger—providing support. Entering into long term care is challenging for everyone, and in some cases, a family member may have positive or negative preconceived ideas about what their loved one is capable (or incapable) of doing. Social workers can help clarify and sometimes challenge those perceptions and help expand the resident's horizons.

Kimberly Michaud, BSW – Life Enhancement Dementia Unit, First Floor

Our philosophy is to help residents thrive and try new things. With earlier stages of dementia, people may not comprehend what they can or cannot do; they often can't explain how they feel, so they may be angry and frustrated. Rather than concentrating on limitations, we encourage residents to focus on areas where they can be independent.



Social workers provide support, legitimize concerns, validate strengths, convey hope, and reduce fear-based ambivalence and resistance. Social workers provide rewards for coping: positive reinforcement. They help show family members how to interact with a loved one who has dementia and is advancing. Affirmation, acceptance, and finding common ground are important to both the resident and family member. For example, a social worker may suggest that a wife take her husband (with dementia) to the Veterans Home Town Hall and play

music on the jukebox—he has happy memories of tunes from years ago. This is an experience which will be meaningful to both.

The Social Worker as Teacher

The social worker helps family members learn adaptive skills. For example, when the veteran lived at home, the caregiver probably spent a huge majority of his or her time taking care of the loved one. Most caregivers don't have time to take care of themselves. Their health may suffer; relationships with other family members or friends usually suffer as well. The social worker can help the family member relinquish some of that control, and reestablish relationships or help the caregiver learn to take better care of himself or herself. Social workers offer advice and suggestions that help residents and family members adapt to their new roles.

Kristen Griffin, MSW – Tarr North

"We help families let go. Let go of guilt, not love; let go of some control, so we can take over the caregiving duties and they can enjoy a better relationship with their loved one. Most people don't consider the idea of joining a support group because they don't know how much of a help it can be—in a support group you learn you're not alone. There are others like you who are going through the same thing. Just knowing that makes you stronger and helps you prepare for what's ahead."



The Social Worker as Facilitator

The social worker is the point person between family members and the resident. The long term care environment can be very complex and the social worker can help the family navigate through what may feel like strong currents or choppy waters. Our social workers provide resources, information, and support.

Marti Bolduc, MSW – Tarr South

"It's my job to be here for the residents—I want them to know they can come to me for anything, from laundry questions to grief. I will always listen and do my best to point them in the right direction. Part of what I do is to remind other staff of who this person is, his or her background, and the family. I am the liaison between the family and the Veterans Home."

When a resident needs a higher level of care, the staff on his or her unit may suggest "an Inter-Unit Transfer." This happens when the staff believes that the resident's needs have grown more complex—perhaps the resident needs to be fed, or lifted, or becomes totally dependent on staff for care—and he or she can receive this higher and more specialized level of care in a different nursing setting within the Veterans Home. The social worker will help the family with this transition, explaining why it is important—and more beneficial to the resident—to make the move.

...Social Work, continued on Page 4

James Mazzuchelli, MSW –

Welch & Intergenerational Programs



I work a great deal with families. It's hard for them to see their loved one decline. I try to help them understand and accept their loved one's condition; I want them to have a good visit when they come. This place is a huge team, and many different disciplines come together to give the residents outstanding care.

Tom Heald adds, "The NHVH social workers are a great group of talented people. They are committed, energetic, and enthusiastic. We meet weekly as a discipline and hold a monthly in-service with our psychiatrist (Dr. Wendling) and our psychiatric nurse practitioner (Jonna Prendiville). We also provide ongoing training in Abuse & Neglect Prevention."

Nancy Waugh, BSW – Life Enhancement Dementia Unit, Ground Floor

I love being part of the Home because the care is exceptional. The staff are really dedicated to the residents. They love the guys. They know what they like or don't like. The little things mean a lot: music, baths, special things to eat.



We'd like to create a new Support Group for families and friends of residents at the New Hampshire Veterans Home. For more information, please contact Kristen Griffin, MSW, at 527-4812 or Kimberly Michaud, BSW, at 527-4432.

A Journey to Green: Investing in New Hampshire

According to the New Hampshire Oil Heat Council, the average New Hampshire home that uses oil heat burns between 800 and 1800 gallons per year. The New Hampshire Veterans Home has been using around 96,000 gallons annually—or enough to heat between 53 and 120 homes per year. It's a lot of fuel, but if you consider the fact that we care for 200+ elderly and disabled residents 24-hours a day, seven days a week, 365 days a year—and provide a workplace for nearly 400 staff whose shifts are also spread 24/7—it's understandable that our energy use is what it is; however, we want to do much better.

Climate Controls

In 2008, we began a capital project which installed **climate controls and heat pumps** throughout all areas of the Home with the exception of the Life Enhancement Dementia Unit, which already had this technology. Thermostats in residents' rooms and staff offices can now be adjusted to suit their individual needs; the temperature in public spaces can be adjusted and monitored by the Facilities Plant Engineer and his department. This new computerized system provides both heat and air

conditioning. It makes residents and staff much more comfortable—whether the outside thermometer reads -10 degrees or 95 degrees. A controlled environment can help stabilize, and in some cases improve, our residents' health conditions and therefore, their quality of life.

Geothermal Heat and Cooling Systems

In 2009 we began an even more ambitious project: the installation of **geothermal wells** and about 156,000 feet (or almost 30 miles) of piping. We now have 90 wells at a depth of 310 feet, and four large horizontal well fields. The installation of geothermal technology will reduce our dependence on fossil fuels by 65%.

Geothermal heat pumps take advantage of the relatively stable ground or water temperatures near the earth's surface to heat or cool buildings above ground. Instead of creating heat, geothermal pumps "move" heat in the desired direction. In the winter, geothermal pumps capture the latent heat stored in the ground and use a compressor to warm the temperature in the facility to the desired level (e.g. 71 degrees). In the summer, the system captures the heat in the facility and moves it back into the ground. According to the US Environmental Protection Agency, geothermal heat pumps are the most energy-efficient, environmentally clean, and cost-effective systems for temperature control. Besides offsetting the use of fossil fuels and reducing our dependency on non-renewable energy, they are also safe and reliable.

...Geothermal, continued on Page 5



Going Green: We now have 90 geothermal wells at a depth of 310 feet, and four large horizontal well fields.



The installation of geothermal technology will reduce our dependence on fossil fuels by 65%.

State Government to Lead by Example in Energy Efficiency

On July 14, 2005, Governor John Lynch issued Executive Order Number 2005-4 to reduce energy consumption by 10%. The New Hampshire Veterans Home is confident that our installation of geothermal heating and cooling – renewable energy sources – will help meet that goal *and preserve funding for patient care.*

In addition to geothermal technology, we are also installing **energy efficient lights, windows and doors, low flush toilets, occupancy sensors, automated faucets, energy efficient motors, and variable frequency drives** to help us realize further savings in the cost of electricity as well as oil. These improvements will give us an immediate return on our investment.

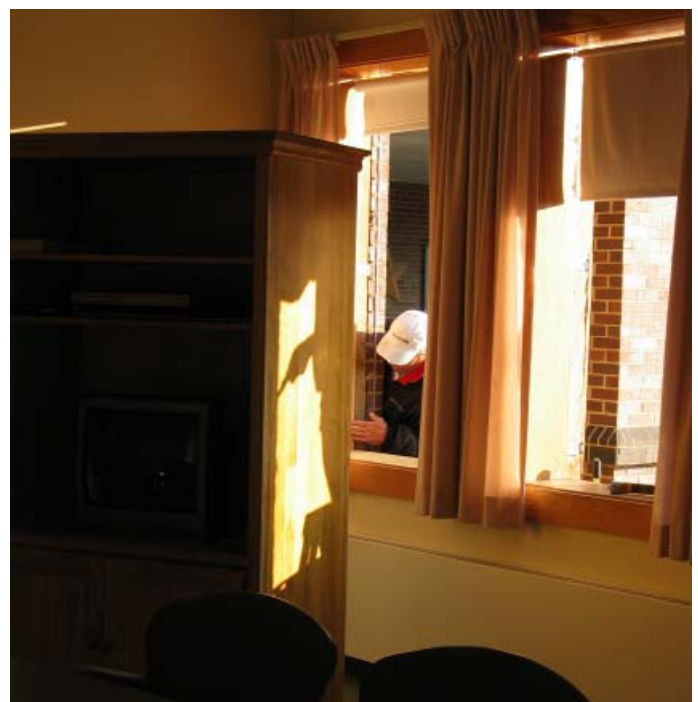
The Veterans Home continues to participate in **Public Service of New Hampshire's Energy Awards Program.** This program provides technical assistance and incentives to assist large commercial electric consumers with the installation of energy efficiency measures including lighting, controls, and mechanical systems. To date, the Veterans Home has received about \$8,000.00 in energy rebates and received PSNH Energy Efficiency awards in both 2006 and 2008. Additional financial incentives are expected from PSNH upon completion of both the geothermal system and new lighting upgrade projects.

Facility Upgrades/Asbestos Abatement:

This project is removing asbestos from floor tile, mastic, and pipe fittings throughout the Tarr North and Welch Units. At the same time **we are upgrading the Home** to include new colors and patterns, replacing flooring, cove base, paint, window treatments, and ceiling tiles to create an environment that therapeutically enhances quality of life. For residents who suffer from anxiety, dementia, Post Traumatic Stress Disorder, or depression, this environmental approach can improve mood, reduce behavior issues, and limit the need for additional medications. In addition, new built-in cabinets will give residents more storage space, and relocation of the nursing stations will create additional gathering space for residents and their guests.

Life Safety Infrastructure Upgrade and Multi Purpose Emergency Operations Center Capital Project.

We recently received approval from the State of New Hampshire for a **Life Safety Infrastructure Upgrade and Multi Purpose Emergency Operations Center Capital Project.** We have submitted our application to the Department of Veterans Affairs (VA) through the State Home Construction Grant program. We are very hopeful that the VA will support our request. This project will review and upgrade any remaining unresolved issues and also design and build a Multi Purpose Emergency Operations Center that will provide additional logistics and operational space. If we are successful, we hope to begin in the Spring of 2010.



A worker replaces the old windows in the Tarr South Conference Room with new, energy efficient ones.

...Geothermal, continued from Page 5

Main Street and Town Hall

Our **Main Street /Town Hall** project continues to move forward. When complete, we hope to have a state-of-the-art entertainment system that supports our hearing-impaired residents. Window treatments and a new stage in the Town Hall are also in the plans.

Master Plan

For nearly 120 years, the New Hampshire Veterans Home has responded to the long-term care needs of eligible veterans who have served our country in times of war. Although we are proud of what we have accomplished, we want to be better prepared to meet the needs of our future residents: more women veterans, more veterans with Traumatic Brain Injury and PTSD, and vets who need specialized care (like bariatric care or kidney dialysis). We want to be proactive, rather than reactive, so we are creating a flexible Master Plan for NHVH to address our anticipated needs for the next 20 to 25 years. Our Master Plan Committee has been meeting monthly since January of 2008 and we are pleased to report that we have received funding from the State of New Hampshire to hire Lavalley Brensinger, a New Hampshire architectural/master planning firm, to help us consolidate all the data we've collected and work with us to set priorities for future renovation, new construction, stewardship of land, and much more. We will keep everyone posted!

Special Thanks!

As a State agency and as taxpayers ourselves, we recognize that economic conditions have caused great hardships across our state and our nation. At the same time, our commitment to veterans who need long term care will never waver. Our veterans made a promise to defend all of us—to keep us free—and now it is our turn to keep our promises to them. We are grateful to the people of New Hampshire, our Governor, State and Federal government officials, and the Department of Veterans Affairs, for investing in the New Hampshire Veterans Home. We pledge that we will always be wise stewards of the funds you allocate to us. We also thank the Bureau of Public Works Design and Construction, Concord, NH for their expertise and assistance, and the following contractors for their work on these projects:

- D.L. King and Associates, Inc., Nashua, NH
- Longchamps Electric Inc, Manchester, NH
- James S. Piscopo, Winnisquam, NH
- RTH Mechanical Contractors Inc, Brentwood, NH
- Skillings and Sons Inc, Amherst, NH
- Turnstone Corporation, Milford, NH

Photos from Old Home Day, Veterans Honor Day at the Hanover Inn, and Family Fun Day at NHVH





...Journey, continued from Page 1

during the week, but after I stopped working I finally joined the group and got past the angry stage. It took about a year. Finally I was ready to share. It was a wonderful experience. I met other wives and children of residents. We would seek out other visitors and invite them to the support group.

"I realize now that guilt is normal—and

overwhelming—but it will go away. You have to think about what will be best in the long term. This was the right place for Jimmy. I'm very lucky. On a scale of one to ten, the Veterans Home is a 14."



Bev visited her husband every day, so much—in fact—that many people thought she was a staff member or volunteer. She says, "I wanted to soak up as much of Jimmy as I could because I knew we were losing him. I wanted to be there on good days and bad days—and I have no regrets. He did and said so many things and I have such wonderful memories of him. I still feel connected. I think it's important to be there during the whole process. For me, it was the best thing I could have done.

"The staff knew both of us so well—they even knew if I was having a bad day. They were incredible! I learned from Judy Brown (Recreation Therapist) how to deal with residents with dementia, and therefore I learned how to deal with my husband. You take what they can give and expect no more.

"I learned not to argue, I learned to join their little world; I learned that they will never be part of our world again. I also enjoyed spending time with other residents—both those without dementia and those with it.

"At the end of his life, Jimmy had hospice. It was a great experience. We had the hospice nurse, aide, and the chaplain had the service at the Veterans Cemetery."

Bev still comes once a week—or sometimes more often—to volunteer. She says, "I can't stay away—I would miss the residents too much! We make each other smile and laugh—we give each other hugs."



Bev would love to meet and help other family members who are on this journey. She adds, "Although at one time I was so angry I couldn't see the forest for the trees, now I would like to help other people get past their anger and guilt. I've been in their shoes and felt what they were feeling. I learned to try to find something every day to laugh about—it was such a positive experience and helped me grow so much. Having Jimmy here was one of the most positive experiences of my life. Of course, bringing him here was the hardest decision I ever made, so I understand exactly how other families feel."

Photos: Above left: Jimmy and Bev cutting their wedding cake, June 30, 1990; left: Jimmy on the day he joined the Veterans Home community, August 22, 2005; above: Jimmy and Bev at Park City Utah, 23 years ago; below: Bev volunteering today on LEDU 1, joking with NHVH resident Eino Laine.



Would you like to join a free Support Group at the New Hampshire Veterans Home? By helping you, we can also help our residents, and improve everyone's quality of life. Please contact Kristen Griffin, MSW, at 527-4812 or Kimberly Michaud, BSW, at 527-4432.



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Contact Us....

Interested in attending a free Support Group for families and friends of residents at the New Hampshire Veterans Home? By helping you, we can also help our residents and improve everyone's quality of life. Results of this questionnaire will help us determine times and days that would be convenient for most families and other caregivers. Questions? Please call Kristen Griffin, MSW, at 527-4812 or Kimberly Michaud, BSW, at 527-4432. Please mail this form to us at the New Hampshire Veterans Home, 139 Winter Street, Tilton, NH 03276. Thank you!

NHVVH Support Group Questionnaire

1. Would you be interested in attending a Caregiver/Family Support Group at the New Hampshire Veterans Home?

Yes No Maybe...

2. Would a NHVVH online support group be more convenient for you than a face-to-face group?

Yes No

3. What would you hope to get from a support group (education, emotional support, advice for caregivers, connection with others)? _____

4. When would be the best time for you to attend a support group (ex: weekend, afternoon)?

1st Choice - Day/Time _____

2nd Choice - Day/Time _____

Sorry, I'm unavailable

5. Where does your loved one reside?

LEDU: _____ Tarr: _____ Welch: _____

I'd like more information.

My name is _____

Please call me at _____

The New Hampshire Veterans Home social workers will be in touch with families when the results of the questionnaire have been tallied. Thank you for participating, Kristen Griffin, MSW, and Kimberly Michaud, BSW.

