summer 2019

ECHOES UNDER THE RIMS

DIGNITY

欲》 St. John's United

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ABIDING & ADAPTING

...hope, DIGNITY and love



THE WORD DIGNITY HAS LONG been intentionally embedded within St. John's statement of mission.

That mission is to provide living opportunities within nurturing environments of hope, dignity and love.

Dignity can be slippery word to define. It is an English word that originates from the Latin dignitas, which essentially means worthiness. People sometimes equate the concept of dignity with that of respect. To the contrary, dignity is not the same as respect. Dignity has to do with our inherent value and worth as human beings; everyone is born with it. Respect, on the other hand, is earned through one's actions or status.

Dignity is an inalienable gift given by God. Every other good thing in life depends on safeguarding this fundamental gift. On December 10, 1948, the Universal Declaration of Human Rights was adopted by the United Nations General Assembly. The Preamble of this document begins with recognition of the import that dignity holds. The Declaration states, "... the inherent dignity... of all members of the human family is the foundation of freedom, justice and peace in the world."

Current Roman Catholic Church Pope Francis has preached that "Human dignity is the same for all human beings: when I trample on the dignity of another, I am trampling on my own."

Modern and best-selling author, Laura Hillenbrand, writes that "Dignity is as essential to human life as water, food, and oxygen. The stubborn retention of it, even in the face of extreme physical hardship, can hold a person's soul in body long past the point at which the body should have surrendered it."

At St. John's United, we affirm in word and pursue through actions to uphold the human dignity of all. We recognize that as we honor one another's dignity, we strengthen our own dignity, and reflect the loving intent of our common Creator.

Enclosed within this issue of Echoes Under the Rims are stories related to matters of honoring and nurturing dignity among people served and cared for through St. John's United. We are grateful for our ownership congregations, our partners, friends, volunteers, and donors who encourage, sustain, and add to St. John's capacities to advance realities of hope, DIGNITY, and love every day for every age.



Tom Schlotterback
VP of Mission Advancement

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ADAM (NOT HIS REAL NAME) was not living a life of dignity. The weight of the world was on his shoulders, his personal relationships were faltering and he had trouble finding meaning and purpose in each day.

Until he called St. John's United Family Services.

Most widely known for adoption services, St. John's United Family Services (formerly Lutheran Social Services of Montana) is now able to expand the missional aims of providing hope, dignity, and love for all by serving people who are facing life's most vulnerable moments. Tending to mental health is as vital to human well-being as physical, spiritual, or other forms of health. Problems, such as those stemming from stress, depression, anxiety, grief or other mental health realities, cannot simply be wished away or coped with in unhealthy ways.

For many, recognizing the need for help and the benefit of counseling is either a new or unknown concept. Additionally, societal stereotypes or myths may deter people from seeking available assistance. With over 50 years of combined experience, the licensed counseling staff at St. John's United

Family Services strives to remove barriers and support individuals on their journey through life, encouraging them to face challenges, improve relationships, enhance communication skills, and change troublesome, self-defeating behaviors.

Trudi Paulson and Mike Nicholes are Licensed Clinical Social Workers (LCSW) utilizing a variety of therapeutic methods and counseling techniques with their clients. Janet Ross, SWLC, practices under their supervision as she works towards licensure. Her presence and work bring additional breadth and experience to the team. All three

counselors agree that working at St. John's United is a valued gift for them as they support their clients in finding healing, meaning, and purpose in their lives. They observe that there is a mutuality in the relationships between counselors and clients. Ross shares that she often learns something new from a client during a session that improves her own clinical practice and enhances her compassionate perspectives.

"...of Americans age
65 and over, 10.8%
have some sort of
mental illness"

Living within the St. John's United communities provides residents easy access to mental health services and supports. According to the report Mental Health, United States, 2010, released by the Substance Abuse and Mental Health Services Administration "...of Americans age 65 and over, 10.8% have some sort of mental illness" (www.samhsa. gov). Some have been diagnosed earlier in life and benefit from

support to cope with changes as they age. Others may experience impaired mental health later in life - perhaps due to physiological changes, significant loss, or environmental factors - and they, too, have improved quality of life with professional counseling.

St. John's offers an Employee Assistance Program to its 700 employees for the times when loss, change, and struggles of life are overwhelming. For some, the challenges of being a caregiver are overwhelming and burnout is real. At these times, the ability to access SJUFS support at no cost for a limited number of confidential sessions is not only a relief, it may be a job saver.

Adam is one of the recipients of the goodness found after seeking help. He acknowledges how difficult it was to reach out for help because he really didn't want to face how hard life had become. "However," he says "working with [the counselor] has allowed me to understand better how things work with thoughts, moods, and emotions. Having a better understanding has given me more joy, peace, and kindness back into my life. Life's greatest treasures are often not found in the comfort zone."

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To learn more about counseling services provided by St. John's United, contact

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tpaulson@stjouhnsunited.org
www.lssmt.org/adoption/counseling-services



"Very truly, I tell you, when you were younger, you used to fasten your own belt and go wherever you wished. But when you grow old, you will stretch out your hands, and someone else will fasten a belt around you and take you where you do not wish to go." John 21:18 NRSV

The words of Jesus to Peter in John 21:18 are preceded by his command at the end of verse 17 to "Feed my sheep" and concluded in verse 19 by "Follow me." The pastoral care team at St. John's United answers that call for elders who may be feeling as though they are somewhere that they did not wish to go. Pastor Karl Guhn, Director of Pastoral Care, describes St. John's approach to spiritual care as an accompanying

presence of compassion and listening that creates space for each individual, regardless of their faith journey or tradition.

Unity in Diversity

Spiritual care defines St. John's. Few would question that the invitation of a higher power to daily life on campus has shaped the culture and mission of providing living opportunities within nurturing environments of hope, dignity and love. Pastoral care has been central to the work of St. John's since its early beginnings as a ministry of local Lutheran churches, yet St. John's has never been just for Lutherans; the majority of residents on campus today identify no particular faith affiliation. Of those who do profess a faith expression, Roman

Catholic is the most predominant.

A skillful approach to ecumenical pastoral care ensures that each person feels as though they belong. Pastor Pateng Makdoh, a campus chaplain of the Presbyterian tradition, is a valuable asset to the pastoral care team as a result of his background. Makdoh was raised in Northeast India, a region not far from the Himalayan foothills. Though from a predominantly Christian region, he is intimately acquainted with those who practice the native religion along with Hindus, Buddhist, Muslims and Sikhs. And he is no stranger to religious intolerance or ambivalence. With a lilt in his voice that draws the listener close, Makdoh declares "it is a privilege to relate [to our elders] from a

different perspective. They may be Roman Catholic, Baptist, or anything else, but they take me as I am, as I do for them. I listen from the heart. I am a pastor, not a preacher or evangelist."

Ministering to those with no faith or an uncertain faith is equally as important. "Of all the times that I thought prayer was not needed..." begins Pastor Elisabeth Daniels as she recounts the story of a woman residing in one of St. John's cottages who identified herself as an atheist. As family was gathering during her final days, the woman's son, also an atheist, reflected on the tradition of cottage staff gathering to pray in the moments after an elder has died. He asked Daniels if that tradition could be continued following his mother's death. "It was a beautiful, unexpected moment" she recalls, as petitions were offered to reflect on the woman's life and her transition out of this life.

On Aging, Dying, and Life For St. John's residents living

independently at Mission Ridge and WyndStone, in assisted living, or in skilled care settings, the realities of end-of-life matters are ever present. As current residents of the Novak Cottage at WyndStone noted, "at 97 years old, we need to talk about death more. We know that St. John's is our last home." Whether the topic is the need for advanced levels of care or matters of death and dying, addressing them can be very tender and must be approached with great care. However, Pastor Guhn believes it is his "privilege to be honest and direct. Being able to tell the truth with a compassionate and caring heart helps people accept what they already know."

When those final days arrive, no one is left to die alone at St. John's – unless, of course, that is their wish. Vigils for the dying are conducted by family, staff and volunteers to ensure that an elder's needs are met on their own terms – often it simply means sitting quietly and extending one last moment of accompanying

presence. Director of Music Kristin LaVé recalls a time that she quickly worked up a version of "I'll Fly Away" for an elder who had requested it sung as she was dying. By the time LaVé arrived in her room, the woman was unresponsive, but as LaVé began to sing and play, the woman mouthed the words along with her. A true testament to the connecting power of music.

Pastor Daniels retold the story of a family gathered for vigil at the bedside of their husband, father and grandfather. The granddaughter was expecting a baby on what would have been her grandfather's birthdate. She added that the new baby would share his great-grandfather's name. "There was joy in what was also a sad moment," says Daniels. "In dying conversations, it's okay to talk about life."

Quiet dignity is found in the grace to meet people where they are. �



MIND THE GAP

MIND THE GAP IS AN AUDIBLE or visual message issued to rail passengers to take caution while crossing the spatial gap between a passenger train doorway and the train station platform. To fall through the gap can lead to harm. Supposedly, the phrase was first introduced in 1968 on the London Underground in the United Kingdom.

In the English language the word mind can be used as a noun or a verb. As a noun, mind refers to that part of a person that enables thinking, feeling, or to be aware of realities. As a verb, mind is a call to action, to take care, to be careful, or to pay attention to something.

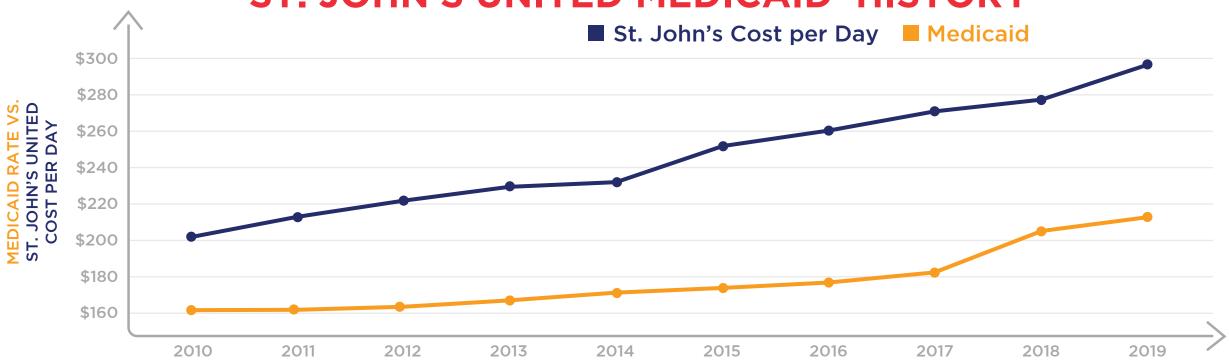
For more than half a century, St. John's United has quietly been minding the gap within its long term care communities. Older adults are provided compassionate care for as long as they desire to call St. John's their home. Once a person becomes a resident within a St. John's community, she or he is welcome to remain a resident even if financial resources are exhausted.

Federal and State assistance in the form of Medicaid funds helps to cover some of the cost. The gap between Medicaid assistance and actual cost of care, however, is absorbed by St. John's as an expense. In this current year of 2019, Medicaid reimbursement to St. John's per resident is \$213 per day. The actual average cost of long term resident care at St. John's is \$294. This is a gap of \$81 per day, per resident. As the adjacent graph indicates, this financial gap has doubled in the last decade. Total price of minding the gap for St. John's in 2019 will exceed \$2.5 million.

This reality has prompted St. John's management and board leaders to pursue increasing philanthropic support to sustain high quality of care for all residents, and to ensure that no resident be denied the gifts of dignity and care. •



ST. JOHN'S UNITED MEDICAID HISTORY





MORE THAN JUST A JOB

Alycia Boheman, CNA is pictured with Sandy and Marie

"TAKING CARE OF A FAMILY member with dementia is hard," says Sandy Persha, daughter of Garden Court resident Marie Howard, "and I take it seriously." Marie, a native of Worland, Wyoming, celebrated her 102nd birthday in April. "When we moved her to Chapel Court 7 years ago, I didn't expect her to make it a year," recalls Sandy. Marie had already lost her husband of many years and given up so much of what she loved- her home, her car, her kitchen- but instead of languishing, Marie thrived. She began enjoying the activities, the people, the food, and daily visits from Sandy.

Home

St. John's has a person-centered philosophy, where staff endeavor to create a home-like environment where people afflicted with dementia, like Marie, can thrive. "As we get older, our world gets smaller. For the people who live here, this becomes their world. We try to make their world the best it can possibly be," Lorin Olson, PT and Culture Development Trainer. We do this by incorporating resident animals such dogs, cats, birds, and fish as well as with well-cared for grounds. We also have flexible meal and bathing programs. In the cottages, all residents have their own private bathroom. In all areas, "we try to create a spa-like experience. Residents can choose a shower or bath on the timing that works best for them." All of this helps people to feel comfortable and have their individual needs met.

Health

In addition to creating a personalized physical environment, an important component of person-centered care is training staff to meet the needs of each individual. All staff who work at St. John's must complete an hour

of dementia training with Lorin; CNAs and nurses an additional three hours. "Taking care of someone is the hardest job we'll do," asserts Denise Price, RN, St.

"...we are caring for people, it's not just about the task being performed"

John's Certified Nursing Assistant (CNA) Program Instructor, "and sometimes you make it harder by not thinking about the kind of care you are giving." Denise has added a 45-minute experiential exercise to the course she teaches at St. John's. The exercise is designed to simulate what it's like not to have control over one's environment or care.

The students are told they can't use their hands or leave their chairs during the exercise. They are subjected to loud repetitive noises such as beeping and white noise – symptoms common of dementia and hearing loss - and the temperature in the room is made too hot or too cold. Denise uses a strategy she calls "treating them like an object, not a person," demonstrating what it's like to be fed and cared for in a state of complete helplessness. Students must drink warm, thickened milk and eat cold, pureed liver and fish. The students are fed from behind, without warning and Denise might put food on their face and tell them they can't wipe it off or mess up their hair or clothing. "They need to understand that we are caring for people, it's not just about the task being performed," explains Denise.

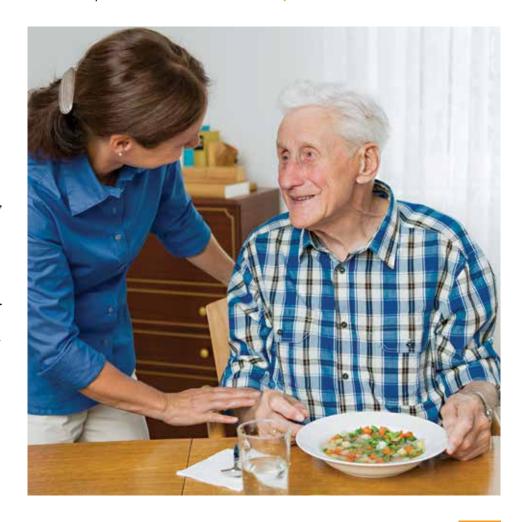
By the end of the simulation, the students are often experiencing a myriad of emotions including anger and frustration but reach the goal of leaving with a better understanding of what it's like not to be able to perform any self-care. "I was mostly sad," says CNA and St. John's At Home Coordinator Taylor Ostwald. "The class helped me to give better care and be more focused on the person and not the task. It's our job as caregivers to learn more about the residents and to give them better care."

Family

"For the people who work here, it's more than just a job," says Shannon Shannon Hodges, Lead CNA in the Memory Care Cottages. Care extends beyond the physical needs of the resident. "One thing I've learned is the more you know about the person, the better you can serve them. You

also get to know the family, and they become a part of your family as well."

"So much of what we do for elder care is the relationship building with the family," Mike Weber, RN, Nursing Administrator of Garden Court, St. John's memory care wing. "We help them with losses they experience every day. When someone has dementia, families, and the elder themselves, are grieving multiple times." Sandy agrees, recalling her family's own struggle with accepting Marie's memory loss and the anger and confusion that often accompanies it. For Sandy, the relationships she's built with the staff have become vital. "I am all alone here caring for my mom. I've had to depend on all these people. I trust them implicitly. I trust them with my mom and trust them with me."





Back row, L-R: Bonnie Lorenzen, ST, Heather Schwab, PT, Sarah Parker, PT, Nicole Gross, OT, Mike Kouwenhoven, PT. Front: Rachelle Sparks, PTA and Carol Scovill, PTA

Individuals living with Parkinson's disease (PD) face years of physical deterioration. In addition to the telltale tremors most commonly associated with the disease, people with PD experience a decrease in voice volume and a decrease in movement that profoundly affects their quality of life. Changes happen gradually and the first symptoms typically cause such a small disruption that they go unnoticed and untreated. However, without early and consistent therapeutic treatment, people living with PD often succumb to what speech therapist Bonnie Lorenzen calls imposed isolation. Activities and movements that used to be simple become so difficult that people living with PD slowly stop participating in activities they enjoy.

People with PD struggle to speak loud enough for others to hear them in a crowded restaurant so they stop going out to eat.

Movements most of us take for granted such as getting in and out of a car and walking are so challenging that it's easier to just stay home.

Social connections are harder to maintain, especially for older adults with PD, as communicating verbally with friends who have hearing impairments themselves and writing notes by hand become impossible.

One of the most studied and effective treatments for neural movement disorders like PD are evidence-based speech, physical or occupational therapies called the LSVT Big and LSVT Loud programs. LSVT stands for Lee Silverman Voice Treatment. Developed by Dr. Lorraine Ramig in the late 1980's, the therapies were named for Mrs. Lee Silverman, a woman living with PD, and are considered one of the most researched and effective treatments for PD.

The LSVT Big and LSVT Loud programs are more than just exercises. These research-based treatment protocols are designed to focus on the disease-specific motor, sensory, and non-motor symptoms that many people with PD face. Physical, occupational, and speech therapists must become certified in this methodology. The St. John's Outpatient Rehabilitation group are all certified practitioners and see anywhere between 10-20 patients per year.

The LSVT Loud treatment addresses the verbal symptoms of Parkinson's disease. This 16-week treatment program consists of four individual 60-minute sessions per week and is designed to develop neural plasticity with motor learning and skill acquisition while incorporating sensory awareness training to help individuals recognize that their voice is too soft.

It is considered the global "gold standard" for speech treatment for people with PD. It has also been shown effective for sub-types of PD such as Shy-Dager Syndrome, progressive supranuclear palsy, and has recently been applied to select individuals with stroke, multiple sclerosis, Down Syndrome and cerebral palsy.

The LSVT Big is a customized treatment program to address the physical symptoms of PD. The course typically mirrors the 16week outline of the LSVT Loud treatment but is tailored to the individual goals of each person. People with PD and other neurolo gical disorders experience a decrease in range of movement and their actions become smaller. LSVT Big addresses both small motor skills such as buttoning a shirt and large motor skills such as rolling over in bed and can be used at any stage in the disease.

Early treatment is found to be most effective. People who see the most success continue the treatment exercises on their own after the program ends. Heather Schwab, PT, reports that she has seen her patients regain the ability to participate in physical activities such as rejoining their bowling league, volunteer positions, and international travel. Mike Kouwenhoven, Director of Transitional Care and Rehab observes, "I've seen patients barely walking in the door and after just four weeks they are walking out tall with only a cane."

For more information, visit https://www.lsvtglobal.com/ or call St. John's Outpatient Rehab at 655-5600.

2019 ANNUAL MEETING AWARDS



BUSINESS PARTNER OF THE YEAR

Mountain Plains Equity Group

St. John's United publicly honored Mountain Plains Equity Group (MPEG) as its Business Partner of the Year. MPEG worked with St. John's leadership to pursue and receive an award of \$8,023,000 in low income housing tax credit dollars for purpose of constructing new affordable housing that includes 54 apartment units on the St. John's campus.



PHILANTHROPISTS OF THE YEAR

Claudia and Jerry Baker

St. John's Foundation publicly honored Claudia and Jerry Baker as Philanthropists of the Year. The Bakers have embodied the nature and goodness of philanthropy in the life of St. John's for over two decades. Their investment as volunteers and financial donors has helped to sustain St. John's capacity to provide the valued gifts of hope, dignity and love to the lives of many.



THE DUST CAN WAIT

REMEMBER WAKING UP ON A LAZY summer morning as a kid only to find a checklist of chores waiting at the breakfast table? Tasks that had to be done before any fun could be had. Tasks often done with little joy. But the completion of those tasks made life easier for someone else.

The unsung heroes at St. John's United are the team under the direction of Patty Copeland, Director of Environmental Services. For more than forty years, Copeland has worked with her staff to develop and maintain a culture that exhibits dignity for residents by doing the daily chores that they may no longer be able to do for themselves. "My staff is the largest presence in our residents' lives," explains Copeland. "They are physically present in resident homes on a daily basis and I encourage them to engage and visit as much as they need to." When asked what keeps her staff motivated, Copeland responds, "they don't do this for the pay or because they love mops and brooms it's the friendships that they build with the people they serve."

A nineteen-year veteran of St. John's, JoAnn Peters works on Chapel Court, St. John's affordable retirement living with assisted living options. When residents first arrive at Chapel Court,

many are still very used to doing for themselves and will express feelings of guilt or frustration that someone else is now doing their household chores. JoAnn tells them that it's "our time to take care of you so you can relax." In addition to easing residents' concerns about being tended to, JoAnn remembers each one of them on their birthdays and makes special gifts for them at holidays. "For those without a lot of family, it might be the only gift they receive during the year," says JoAnn.

Brenda Grotbo takes great pride in her work in the Cottages at St. John's explaining that her work is not about the cleaning – it's about being a part of the residents' lives, treating them like family. "Dust can wait," she says. "When a resident needs my attention, that's my first priority." Brenda finds little ways to bring special touches to residents' lives - conversations over lemonade on the patio on a warm summer's day, handmade holidaythemed barrettes to lock errant tresses in place, and strands of beads shaped into hearts left on the nightstand – all small symbols of love that make a big difference.

Even behind the scenes the less visible members of the environmental services team, particularly those who

work in the laundry, orient their work around the resident relationship. One of the hallmarks of dignity maintained by Copeland and her team is returning clothing and linens to the right owners and in good condition. For all the socks that are eaten by dryers or mismatched in the average household, just imagine the effort that goes into returning complete pairs of socks to more than 100 residents on a daily basis.

A man of few words, Scott Meyers takes a quiet, steady approach to his work. Unaware that he was being observed as he finished vacuuming in a resident's home, Scott gave a gentle nod and said, "thank you, Bob. I'll see you again." The two exchanged a few more pleasantries and Scott made his way down the hall to the next resident. Uneventful, to be sure, but Scott works in one of the skilled care areas where residents have higher personal care needs and can, at times, be rather demanding. They often don't feel well. More often than not, this will be the last home the resident will know. When asked what he likes about his role at St. John's, Scott humbly shrugged, "the work is easy." One of his colleagues answered more fully on Scott's behalf, "when you love the residents, the work is easy."

MEMORIAL GIFTS

JANUARY 1, 2018 - DECEMBER 31, 2018

We give thanks for all of these lives remembered this year and extend our gratitude to the donors whose memorial gifts now support living opportunities within nurturing environments of hope, dignity and love. If we included or omitted a spouse in error, please let us know.

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