

HEALTH & WELLNESS

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Medicare
page 12



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Transitioning back to live and in-person support groups

BY M. LORI SCHNEIDER

The year 2020, for many of us, will be remembered as "the year that wasn't." When COVID first shut down the world just over a year and a half ago, everyone balked at Virtual this and Zoom that. These virtual platforms were a poor substitute for face-to-face engagement with family, friends, and physician appointments. The same can be said for ongoing Support Groups.

NAMI Sullivan County, NY has had support groups for families of people recovering from psychiatric illness (Sharing and Caring Family Support Group), for individuals themselves who live with a mental illness (NAMI Connection) and for people who have lost a loved one to Suicide (Suicide Bereavement Group). Prior to COVID, they met regularly, live and in-person.

The meetings are a free, confidential, safe place to share things with others having similar experiences – things you think no one else would understand. The live support groups were attended by a solid core of people, some of whom came every month, others, sporadically. When live meetings were not possible, NAMI Sullivan embraced ZOOM (and phone attendance at groups for those who couldn't access ZOOM) in place of live meetings. To get together, if only virtually, was felt to be a better option than not meeting at all.



CONTRIBUTED PHOTO

Nothing quite takes the place of face-to-face support groups that were unavailable throughout the pandemic.

Not everyone was keen on the virtual meetings, but as weeks turned into months and months without live meetings, those attending grew accustomed to the "new way of the world." Some months back, with COVID numbers down, NAMI Sullivan started up live and in-person meetings again – masked and socially distanced. Strange as it may seem, folks have grown accustomed to not coming out for support groups, and we're having some difficulty in getting them back. In speaking with people who attend other support groups, this phenomenon appears to be widespread.

Did people who stopped coming

when meetings went virtual find they no longer needed support? Did folks who were attending via ZOOM or phone get complacent about not having to leave their house and drive? Are some still not comfortable being indoors in a group – or others not happy about having to mask?

Perhaps all-of-the-above are true. It leaves support groups with a dilemma, however - we know that there are people out there in need of the type of support we provide and it's a question of how

to re-attract them to attending meetings.

NAMI Sullivan County, NY is the local affiliate of the National Alliance on Mental Illness. Primarily a family support and advocacy organization, NAMI Sullivan has been providing services in our area since 1983. Support Groups meet at 20 Crystal Street, Monticello (Sharing and Caring, NAMI Connection, Suicide Bereavement Group) and at Bon Secours Community Hospital in Port Jervis (Sharing and Caring). If you or someone you love has been diagnosed with a mental illness or are experiencing symptoms, or if you've lost a loved one to Suicide, you are not alone. For information about mental illness or the services provided by NAMI Sullivan County, phone (845) 794-1029.

M. Lori Schneider is the Executive Director of NAMI of Sullivan County, which is located at 20 Crystal Street in Monticello.

Health & Wellness

'How to keep healthy during the winter season'

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Sullivan County Drug Task Force improves and expands access to life saving Naloxone

BY WENDY E. BROWN, RN, MS

Sullivan County continues to have one of the highest opioid overdose rates in New York State. According to the NYS Opioid Dashboard, Sullivan's crude rate of opioid overdose deaths of 45.0/100,000 population in 2018 was highest not only in the Hudson Valley, but all of New York State.

This rate is almost triple the NYS opioid overdose rate of 15.1/100,000 population. In addition, Sullivan County has one of the highest opioid prescription rates in the state with a prescription rate in 2019 of 650.9/1,000 population. While there has been significant improvement, these numbers still indicate the potential for a large amount of unused and unwanted prescription medications in the community.

Sullivan County is a highly rural county with limited

resources and law enforcement agencies. For someone who is experiencing an overdose, these limited resources can mean a prolonged response time from either EMS or police.

These prolonged response times can mean life saving measures, such as Naloxone, may not be readily available in time, resulting in increased medical injuries or fatalities. In the effort to help reduce the number of fatalities, our county's Drug Task Force partnered with Sullivan County Opioid Overdose Prevention Program (SCOOP) to address an increased need for readily available Naloxone access in the community. While the SCOOP has always trained law enforcement, EMS, nurses and school personnel, there was an opportunity to increase public access to Naloxone.

To address this need, Narcan training was expanded, spear-

headed by The Hope and Prevention Pillar of the Drug Task Force, led by Sullivan County Public Health and the Bureau of EMS. Under this new design, the number of trainings offered to the general public increased by 50 percent while continuing to train and provide Naloxone to first responders. These trainings included Sullivan County Department of Family Services employees and clients, the District Attorney's office, Public Health Services staff, fire departments, law enforcement, Sullivan County Probation Department, and the county jail as well as trainings for the general community.

In the last two quarters of 2021, there have been over 170 people trained in Narcan administration, with 91 of them being in the fourth quarter alone. To gain support and to improve interest and accessibility to classes, the Drug Task Force

and SCOOP have partnered with local businesses and organizations to host trainings. Several establishments have provided incentives such as pizza, snacks, etc. to participants.

Additionally, virtual Narcan trainings are available to Sullivan County residents through membership in the Mid-Hudson Prevention and Education Collaborative. Virtual trainings were especially useful when challenged by the arrival of COVID and continue today as an option for those who may be interested in a virtual experience or who may not be able to attend an in-person class.

To further improve access to Narcan, a Narcan Leave Behind Program was implemented through collaboration with the Bureau of EMS. This program includes educating our dedicated first responders to provide "Just in

"Time Training" in the field providing Narcan kits to family and loved ones of someone with substance use issues.

This concept was expanded to a similar program utilizing our Public Health Maternal-Child Health nurse working in collaboration with Child Protective Services. This dedicated nurse is a Narcan trainer who can reach out to the families she works with and provide Narcan training and Narcan kits to families who deal with substance use issues.

The goal of both of these programs is to provide Narcan to those who may otherwise not have easy access to the lifesaving tool. This program has resulted in 10 family members being trained throughout the past year.

While the number of trainings has increased, there is still much work to be done. The overdose rates in Sullivan County, as well as fatalities, are trending upward. The Substance Abuse and Mental Health Services Administration (SAMHSA) released findings from the 2020 National Survey on Drug Use and Health.

The data collected nationally from October 2020 through December 2020 indicated that the COVID-19 pandemic impacted the use of both drugs and alcohol nationally. Those surveyed reported that they had increased their use of substances during the period surveyed. In Sullivan County, ODMAP data was analyzed, and an increase in the number of overdoses was noted in the second quarter of 2020.

There is a continued need to

reach the community with this life saving tool, and expand into some areas that have not been previously served. To accomplish this goal, there needs to be a continued effort to foster community partnerships utilizing Sullivan County's Drug Task Force and collaborative partners, and think outside the box. Bilingual Naloxone trainings are needed to reach a large portion

of our communities which, to date, have been underserved.

There is a particularly continued need to provide education on substance use and reduce stigma associated with Substance Use Disorder (SUD). It is imperative to recognize that SUD encompasses all drugs and alcohol and is a disease that can affect anyone. There is a large portion of the population

who hold long standing beliefs that SUD is not a disease, and continue to perpetuate some of the associated stereotypes and stigma. That stigma prevents people from reaching out to get help.

Wendy E. Brown is the Deputy Commissioner of Health and Family Services/Coordinator of the Sullivan County Drug Task Force.

If you or your organization are interested in a Narcan Training Class, please reach out to:

Jill Hubert Simon, MS
Health Educator, Public Health Services
Hope and Prevention Drug Task Force Lead
845-513-2243
Jill.Hubert-Simon@sullivanny.us

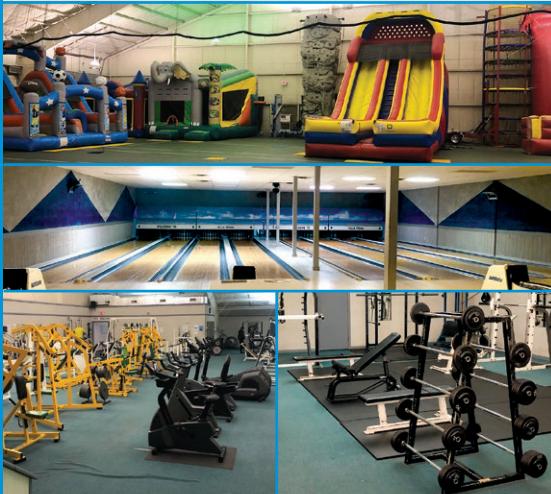
Alex Rau, EMT
Bureau of EMS/E 911 Coordinator
845-807-0508
Alex.Rau@sullivanny.us

Wendy E. Brown, RN, MS
Deputy Commissioner of Health and Family Services / Coordinator of the Sullivan County Drug Task Force
845-513-2259
Wendy.Brown@sullivanny.us

In addition, there is a need for bilingual trainers. If you are interested in becoming a bilingual Narcan trainer, please reach out to any of the above task force members.

If you have an issue with Drugs or Alcohol and need help, you can call our Hope and Referral Line at 845-832-5575 or you can text #HOPENY

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Strategies to overcome seasonal affective disorder

Winter can be an awe-inspiring time of year. Snow-covered landscapes and opportunities to enjoy sports like skiing and snowboarding make winter a favorite time of year for nature enthusiasts and athletes.

As fun as winter can be, many people struggle with the transition from warm weather and long, sunny days to cold weather and reduced hours of sunlight. Sometimes mistaken or misidentified as the "winter blues," this phenomenon is known as seasonal affective disorder, or SAD.

What is seasonal affective disorder?

According to the National Institutes of Mental Health, SAD is a type of depression. The NIH notes that a person must meet full criteria for major depression coinciding with specific seasons for at least two years to be diagnosed with SAD. The American Psychiatric Association says symptoms of SAD can be distressing and overwhelming and even interfere with daily functioning.

The APA notes that SAD has been linked to a biochemical imbalance in the brain that's prompted by shorter daylight hours and less sunlight in winter. As the seasons change, a shift in a person's biological internal clock or circadian rhythm can lead to them being out of step with their normal routines. That can contribute to various symptoms, including:

- Feeling sad or depressed
- Loss of interest or pleasure in activities once enjoyed
- Changes in appetite, usually eating more and craving carbohydrates
- Loss of energy or increased fatigue despite increased sleep hours
- Increase in purposeless physical activity or slowed movements or speech that



METRO CREATIVE SERVICES PHOTO

may be noticed by others

- Feeling worthless or guilty
- Difficulty thinking, concentrating or making decisions
- Thoughts of death or suicide

Overcoming SAD

The weather can't be changed, but people can speak with their physicians about the following strategies to overcome SAD.

- Light therapy: According to the APA, light therapy involves sitting in front of a light therapy box that emits a very bright light. In the winter, patients typically sit in front of the box for 20 minutes each morning, and they may see some improvements within one to two weeks of beginning treatment. Light therapy is usually continued throughout the winter.
- Medication: The APA notes that selective serotonin reuptake inhibitors, or SSRIs, are a type of antidepressant that are sometimes prescribed to treat SAD.
- Spending time outdoors: People with SAD who don't typically spend much time outdoors when the temperatures dip may notice their symptoms improve if they make a concerted effort to spend time outdoors in winter.
- Rearrange rooms in the home: The APA notes that rearranging rooms and furniture in a home or office to allow more natural light in during the daytime can help improve symptoms of SAD.

SAD is a legitimate concern for millions of people across the globe. Working with a physician to overcome SAD can help people successfully transition to days with fewer hours of sunlight.

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Mindful musings:

Life up the hill

STORY AND PHOTO BY NICOLETTA LAMARCA SACCO

Sometimes life gets lonely, having to be so careful of pandemic health concerns, social distancing, masking and interacting with strangers safely. It is convenient to place “no-touch” orders for goods online, but there can be delivery delays too. Also, people staying home to avoid Covid-19 are making improvements to their home, resulting in more gardening, sealing driveways, fresh paths or garden beds, and paint.

Once the bags of mulch from the garden center are delivered, it's time to dive in. Home improvement tasks can give a sense of accomplishment that helps ease feelings of isolation. One recent experience with a home delivery was so memorable and stress-free it seems worth sharing.

During the summer we ordered a new front door in jaunty red, but it didn't come with a storm door to match. Click. Storm door model so-and-so backordered till July. Click Click Click. Order now; delivery expected in August. Click. Click. Order at the end of August for almost certain delivery by September. The typical national chain online shopping experience.

By October, we finally had a delivery date. We're 10 miles up the hill from Roscoe. When we first came here in 2001, we couldn't get deliveries to this address. We're in the middle of the middle of nowhere. Firstly, USPS was on the fence about whether our address was actually in Roscoe or Hancock, NY. These are two different counties. I asked around and found out that's not unusual.

But back to the storm door.

We were clearing breakfast dishes. Something large and grey went past the window. We saw the delivery truck trundle right past our house. This happens often, as GPS directs people to a spot a mile or so down the



The newest door at the Sacco residence.

road. (Thanks, GPS). They were already a trail of dust before we could have run out the door to wave at them.

A few minutes later, the truck returned to deliver our storm door. I've been mindful of being masked when speaking with others. Interacting with strangers during Covid is no joke. I kept our barking dogs inside while my husband met the delivery guys on the driveway.

The two gentlemen greeted him courteously and explained, We didn't want to risk damage-

ing your driveway, so we drove down the road until we found a place we could turn around. Driveways are expensive. My husband was impressed with this explanation. They walked our red storm door up from the road to our garage, then packed up their gear and drove off to continue with their day. My husband says it was one of the best delivery experiences he's had in a long time.

In NY/metro, if we had asked them to be careful driving their huge, dusty truck on our newly resurfaced driveway, or insisted they park at the curb and schlepp a delivery to the garage out back, they might have laughed at us and given side-eye. I can still remember them saying: Hey lady, I'm just doing my job...

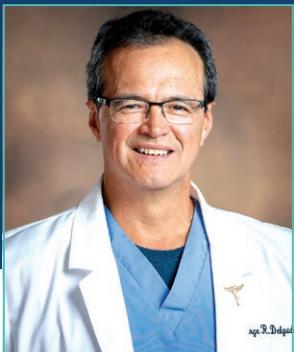
I've been “Ma'am'ed” many times since passing age 50, but I sure don't miss being called, Hey lady!

A few days after this delivery, I stopped to think about how much home deliveries have helped keep people safe during the pandemic. People wishing or needing to remain at home and make “contactless” purchases when they would otherwise have to mask up and interact with the general public are

able to because of workers who drive trucks and make deliveries. These delivery services, from local food co-ops to online orders, have helped the economy in so many ways. As a bonus, when we get a delivery with a smile and extra consideration, we feel grateful and mindful of the advantages of living “up the hill.”

It still costs nothing to be nice. I'll take a “Yes, Ma'am,” with that any day.

LaMarca-Sacco is a graduate student living in Roscoe with her husband, Steven, and their dogs, Pupcake and PomPom. Their children are grown.



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Dawn Roemer, right, leads a fun activity with a local youth.



Children's Home looks to bridge services gap

BY JOSEPH ABRAHAM

Children's Home of Wyoming Conference has been in the area working with Sullivan County for years. However their physical presence grew approximately 18 months ago at the start of the COVID-19 pandemic.

Leelani Voigtland, who serves as Children's Home Sullivan County Director, said they were called in because of a need for foster homes. Working with the County, they've increased the number of foster homes by 63 percent.

"We've been able to keep a lot of the children local and spend less tax dollars on foster care because we're not sending children out of the area," said Voigtland. "That's been a huge thing, which then allows us to further develop other programming. Although we made progress we have a dire need for foster parents who can foster children who have experienced trauma and teens! We do not have enough homes locally who are willing to open their doors to teens."

Children's Home was recently asked about additional programming. They now offer Child and Family Treatment Services in Sullivan County. Any child that has Medicaid is eligible for those services.

"The point of [our services] is to help children and families overcome whatever that child is going through," explained Voigtland. "Some kids might be having a hard time in school and need extra help. Kids' families might really be in a crisis. Their child might have a mental health diagnosis or other things going on, so they meet with our clinician, who does an assessment and sets goals. Then we have

providers who meet with them, sometimes multiple times a week, to start addressing their needs."

Children's Home also has providers in the area taking children to do enriching activities that they've never been able to do. They also help families locate resources (food, mental health providers, etc.).

"All of these services are voluntary," said Voigtland, noting that a referral isn't needed from the Department of Family Services (DFS) or Child Protective Services (CPS).

"Our providers are building rapport, and trying to individually tailor each plan to help that family meet the kids' goals. The goal of our programs here is to keep children and families together and help them live healthy lives."

Voigtland said they also support foster homes, who may be taking on a particularly challenging youth. Children's Home can put providers as support in the home to assist foster parents on helping children work on their goals and also giving them a break.

Misconceptions

Sometimes people think organizations like Children's Home are part of the DFS or CPS.

"We're not at all," said Voigtland. "We cannot take your kids from you. We are not going to do that. You don't have to have an open case with other departments. Sometimes [for example] it's just a grandparent who is raising a child and needs extra support, and it's okay to ask for that support."

Voigtland added that they have children who are receiving weekly counseling, and we are able to use our providers to practice those skills they are work-

ing on to meet their goals. She also notes that there is often a negative connotation with seeking out this kind of support but, at the end of the day, kids have different needs and Children's Home knows it's hard.

"We want to help by trying to bridge the gap by providing services the County doesn't have," said Voigtland.

Still growing

Children's Home currently has 12 full-time and 15 part-time employees in Sullivan County, varying from community-based providers to clinicians to foster care workers. They are continuously hiring as there is a great need for community based providers, as well as clinicians.

"We keep growing and adapting with the ultimate goal of going above and beyond to give families what they need," said Voigtland, adding that they don't want to be one of the services that simply show up.

If you're interested in working for Children's Home, learning about foster care, or want to inquire about their services, visit www.chowc.org, call 845-747-8057 or email Lvoigtland@chowc.org.

Help for the holidays

Children's Home is doing a Holiday Angel Drive. Kids in their program have made wishlists with items they may want for the holidays. If you, a coworker or group of friends have the extra resources this time of year, Children's Home can provide you with an anonymous wishlist. You can then purchase items on the list and donate them back, and Children's Home will make sure that child receives what they wished for, thus brightening their holiday!



CONTRIBUTED PHOTOS
Administrative Assistant Alyssa Wowk, right, works on an art project with one of the kids Children's Home works with.

The many seasons of Medicare

BY MEIR HOROWITZ

Although most of us focus on the frantic time during October and November when we are bombarded with direct mail, TV ads and telemarketing calls from Medicare providers, there are actually several different times when you can change plans.

Here is a quick summary ...

Annual Enrollment Period

Anyone can make changes to their coverage and enroll in a Medicare plan each year, from October 15 to December 7.

If you have Original Medicare, you can switch to a Medicare Advantage plan — or vice versa.

You can switch from a Medicare Advantage plan with drug coverage to one without — or vice versa.

You can join or drop a Medicare prescription drug plan.

You can also update your coverage by switching to a new plan from your

current insurer or switching to a new insurer.

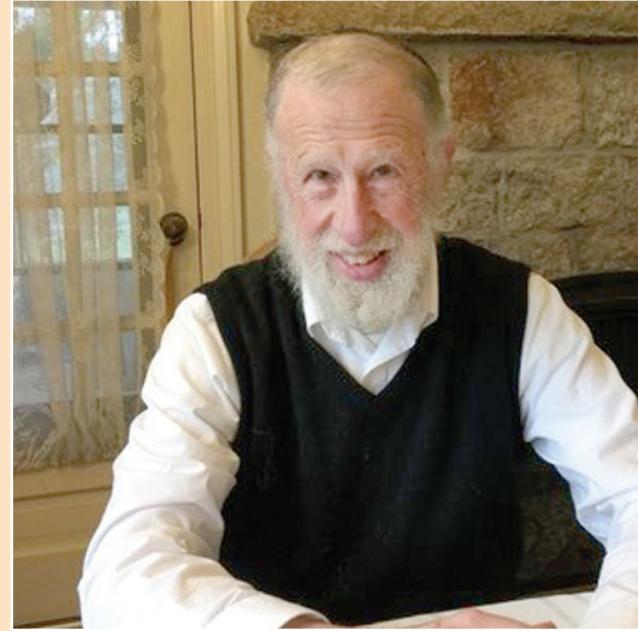
If you choose to make a change during the Annual Enrollment Period, your new coverage won't begin until January 1.

Medicare Advantage Open Enrollment Period

This period takes place from January 1 through March 31 annually. It allows individuals enrolled in a Medicare Advantage plan to make a one-time election to go to either another Medicare Advantage plan with or without prescription drug coverage or Original Medicare. You'll also be able to enroll in a Medicare prescription drug plan.

In either case, your new coverage will start on the first day of the month following the month you make a change.

Tip: If you go back to Original Medicare, you can also add a Medicare Supplement plan.



CONTRIBUTED PHOTOS

Meir Horowitz

Special Enrollment Period

During a Special Enrollment Period (SEP), you can join, switch or drop a Medicare Advantage or prescription drug plan outside the basic enrollment periods. In order to qualify for an SEP, certain events must occur that require you to change your coverage. Common scenarios include:

- You move out of your plan's service area.
- You move back to the U.S. after living abroad.
- You move into or out of a skilled nursing facility, psychiatric facility, rehab hospital or long-term care facility.
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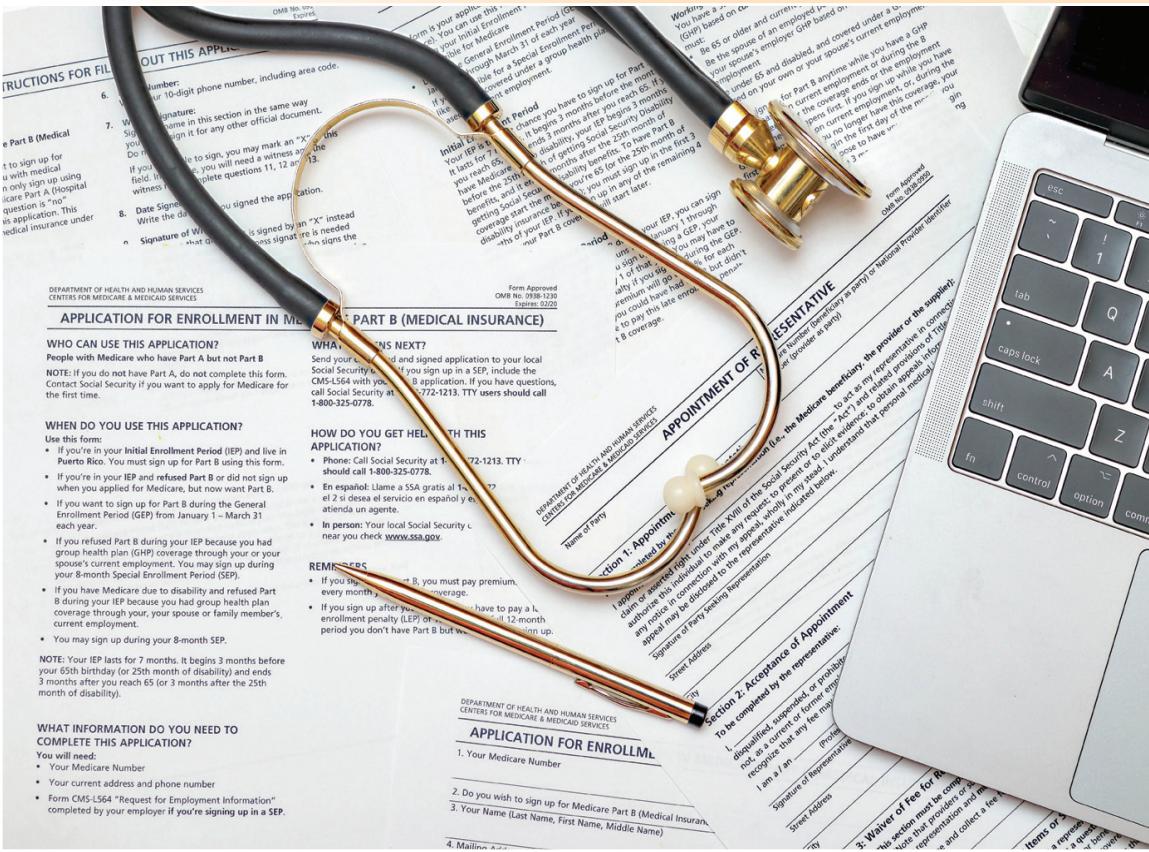
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Meir Horowitz is an Independent Medicare Agent at MEH Associates.



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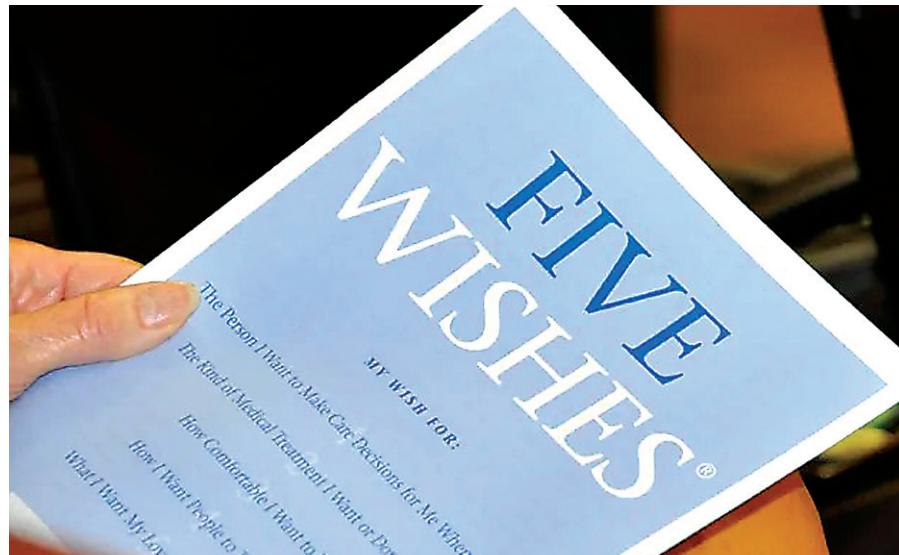
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November is Hospice Awareness Month

BY JANICE VALENTINO,
DIRECTOR OF MARKETING
AND COMMUNITY OUTREACH
HOSPICE OF ORANGE & SULLIVAN
COUNTIES, INC.

As November brings the start to the Holiday Season, a wonderful opportunity is presented to give ourselves and our loved ones the gift of preparation to prevent this all-too-common situation.

A family is at the bedside of a loved one who is seriously ill and nearing the end of life. Each



CONTRIBUTED PHOTO

Hospice offers two printable publications called Five Wishes and The One Slide Project.

member of the family has a different idea of what should be done and what their loved one would have wanted. Far too many people wait until they are amid a health care crisis before thinking about what options are available or what care they or their loved ones would have wanted.

Often, by waiting too long to

learn about possible options, like hospice care, people end up spending difficult days in the hospital or the emergency room and opportunities to be with loved ones at home are lost.

When a family is coping with a serious illness and a cure is no longer possible, hospice provides the type of care most people say they want at the end of life: comfort and dignity.

HOSPICE of Orange and Sullivan's highly qualified staff of interdisciplinary team members focus all efforts on healing the emotional, spiritual, and physical issues making our primary objective to ensure you and your loved ones have the best possible today, with the wishes of the patient and family always at the center of care.

To make it easier to start the conversation, Hospice offers two printable publications called Five Wishes and The One Slide Project. Please go to our Community Resource page on our website: www.Hospiceoforange.com.

HOSPICE of Orange & Sullivan Counties has been named a TOP 10 Hospice in NYS and is the leading community resource for providing patients and families with compassionate physical, emotional, and spiritual end-of-life care, with comfort, dignity, and respect. 845-561-6111

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Your safety is our priority while accessing care at Wayne Memorial Hospital and our Health Centers. **For the latest information on Covid-19 safety and getting vaccinated, please visit www.wmh.org.** Thank you!

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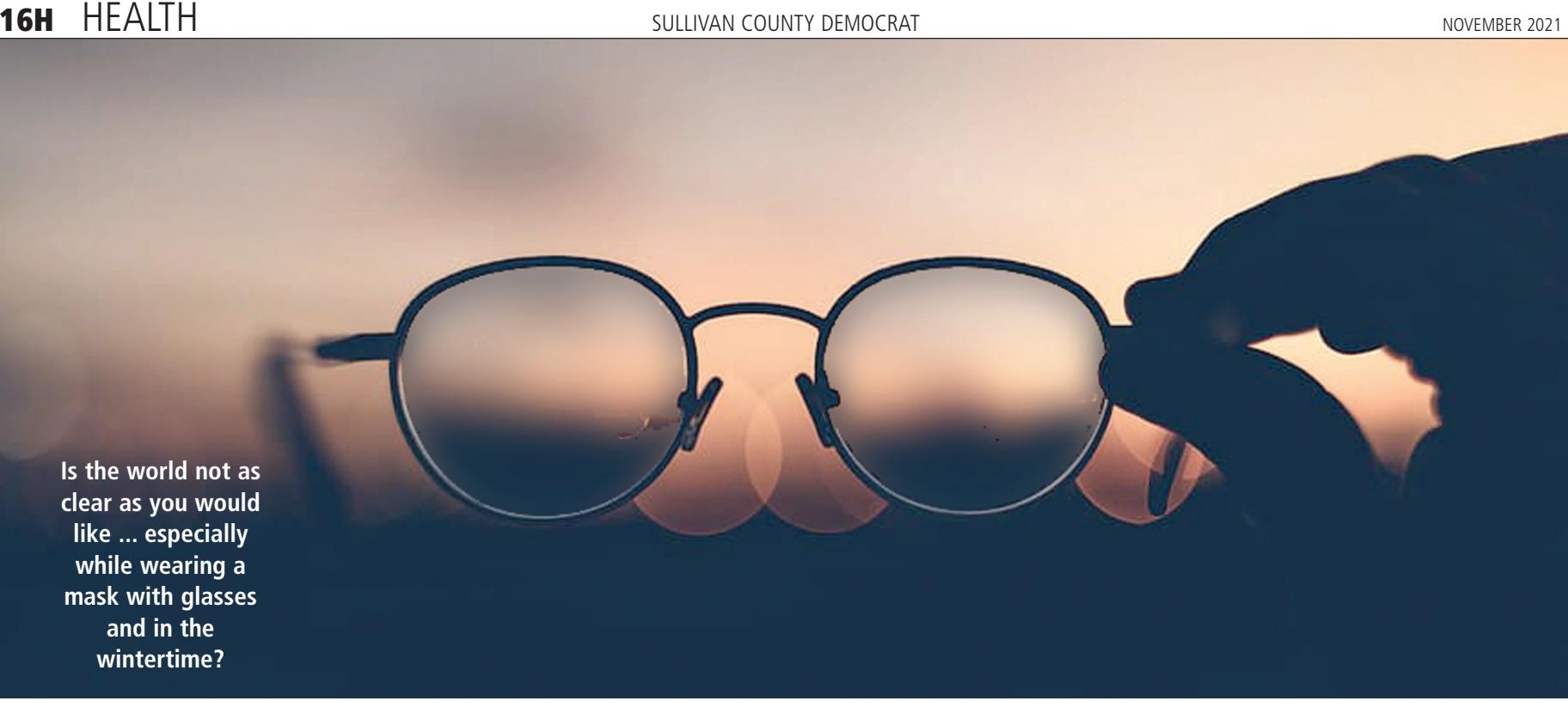
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Is the world not as clear as you would like ... especially while wearing a mask with glasses and in the wintertime?

CONTRIBUTED PHOTO

How to avoid foggy eyeglasses

Billions of people across the globe need eyeglasses to drive a car, read a book, watch television, and perform a host of other tasks of daily life.

Although glasses are highly effective, people who wear them understand they may have to make a few concessions while doing so. Unlike contact lenses, which sit directly on the eye, glasses rest on the bridge of the nose. They may slightly impede peripheral vision or even slip down if not properly fitted. Those accustomed to wearing glasses in the cold weather understand fogging of the lenses is a nuisance they may be forced to confront. That nuisance became even more profound when masks became a must-have accessory to help curb the spread of the COVID-19 virus.

Glasses may fog due to the formation of condensation on the lens surface, which happens when moving from a cold outdoor environment into a warm indoor one. This is a problem that has affected eyeglass wearers for some time, including health professionals who often wear masks. The issue has become even more widely known due to the sheer

number of people who have been wearing face masks as a public health safety measure.

So how does one counteract the condensation and fogging that occurs from both winter weather and increased mask usage? There are a few different methods, but eyeglass wearers should always consult with an optometrist to verify the safety and efficacy of any method before trying it.

Use soapy water

A 2011 study published in the Annals of The Royal College of Surgeons of England found that washing eyeglasses in soapy water and shaking off the excess can help reduce fogginess. Afterward, let the spectacles air dry before putting them back on. The soapy water leaves behind a thin surfactant film that reduces surface tension and causes the water molecules to spread out evenly into a transparent layer. This can help prevent fogging.

Use a commercial product

Antifogging products are widely used to prevent fogging of scuba masks or ski goggles.

Get a mask that fits tightly

Make sure the mask fits securely over the nose, advises The Cleveland Clinic. Also, a mask with a nose bridge will help keep warm exhaled breath from exiting up to the glasses. Use your glasses to help seal the mask on your face by pulling the mask up higher on the nose.

Block breath with a tissue

The AARP suggests placing a folded tissue between your mouth and the mask. The tissue will absorb the warm, moist air, preventing it from rising up to reach the glasses.

Adjust the fit of glasses

Choosing glasses that sit further away from the face can improve air circulation and reduce the formation of condensation.

Consider other options

If these tricks seem like a lot of work, you also can speak to an eye doctor about contact lenses or eye surgery.

Fogging of glasses has been a problem for some time, but has become more widespread thanks to the use of masks during the pandemic.

These award-winning special sections should keep your business hopping!

fall is here and so are cooler days...

and the Sullivan County Democrat has ideas to keep your business hot!



SULLIVAN COUNTY BUSINESS EDGE

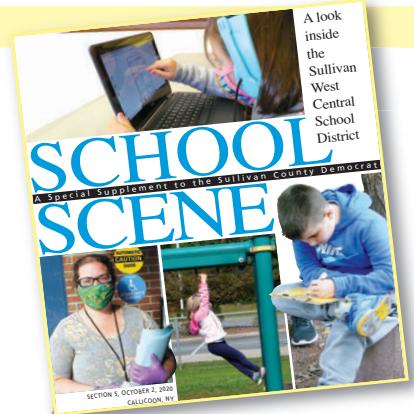
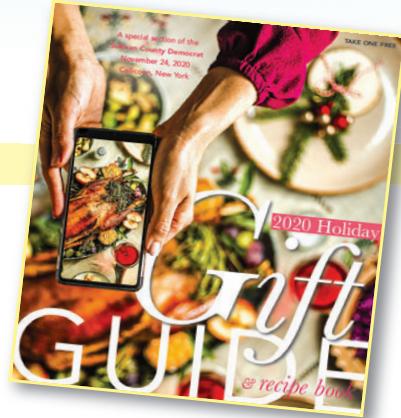
This in-depth look at Sullivan County's business community follows what's hot in economic development.

Advertising Deadline - December 3

Gift Guide No. 1

Could Thanksgiving – and Black Friday – be only 26 days away? You bet. Now is the time to start planning for sharp Holiday sales and there's no better way than with an ad in our award-winning Holiday Gift Guides.

Advertising Deadline - November 16



SULLIVAN WEST SCHOOL SCENE

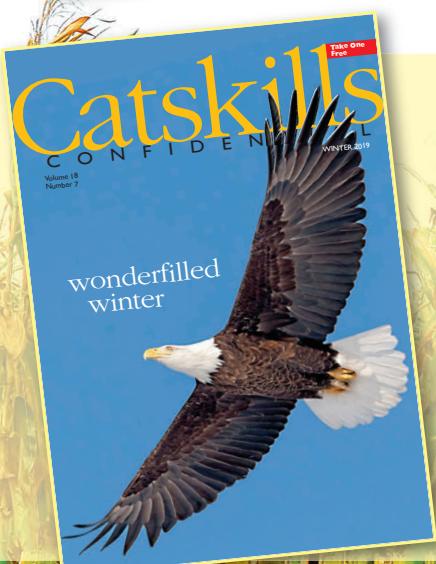
Read about all the activities going on in the Sullivan West School District and reach a market of administrators, teachers and students.

Advertising Deadline - November 24

Gift Guide No. 2

Now is the time to start planning for sharp Holiday sales and there's no better way than with an ad in our award-winning Holiday Gift Guide.

Advertising Deadline - December 2



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Garnet Health Medical Center to offer free, virtual Gastrointestinal Cancer Support Group

Garnet Health Medical Center, formerly Orange Regional Medical Center, will offer a free, virtual gastrointestinal (GI) cancer support group the second Tuesday of each month beginning November 9 from 4:00 p.m. to 5:00 p.m.

"The GI cancer support group provides an ideal setting for information sharing, insight, advice and encouragement," said Sara Sargent, Garnet Health Medical Center Head and

CONTRIBUTED PHOTO
Sara Sargent

Neck and GI Cancer Navigator. "It offers participants an opportunity to learn from others who face the same challenges and allows them to talk about their experiences."

Garnet Health Medical Center's GI Cancer Support Group brings together those who have been diagnosed with any GI cancer including colon, rectal, stomach, anal, esophageal, biliary, gallbladder, liver and pancreatic cancer. This group will provide education,

resources and a confidential forum for patients and their families or caregivers to share their common fears, concerns and experiences. This group hopes to assist in guiding preservation and restoration of physical and emotional health while living with a gastrointestinal cancer diagnosis.

To register for the GI cancer support group, please visit www.garnethealth.org/events.

Honor and Remember with WMH Auxiliary's Love Lites

The annual Love Lites display, a project of the Wayne Memorial Hospital Auxiliary, will light up this year on Monday December 6th at 6:30pm. The public is invited to sponsor lights on trees near Wayne Memorial Hospital's Main Entrance in honor or remembrance of loved ones.

The lights are \$5.00 each and the names are placed in a Memory Book available in the hospital lobby from early December through the first week of January 2022. The book will also be posted on the hospital's website at www.wmh.org. Coupons can be printed from the website and mailed along with a check payable to WMH Auxiliary. Send it to Kathie Carlson, 33 Tennis Club Circle, Lakeville, PA 18438.

Everyone is welcome to the outdoor ceremony which includes a blessing of the Memory Book by a

member of the clergy. The brief observance also features appropriate Christmas music performed by members of St. Tikhon's choir and the Honesdale High School chorus along with grab-and-go light refreshments.

Love Lites originated in 1991 as an Auxiliary fundraising project and as a service to the community during the holiday season. By the symbolic lighting on the trees outside Wayne Memorial Hospital for the community to see every day throughout the season, Auxilians say the public is reminded of the love and caring of family and friends.

CONTRIBUTED PHOTO

By the symbolic lighting on the trees outside Wayne Memorial Hospital for the community to see every day throughout the season, Auxilians say the public is reminded of the love and caring of family and friends.



Wayne Memorial Administrative Director receives State-Level Award

Wynter Newman, administrative director, Wayne Memorial Community Health Centers (WMCHC), received the Career Achievement Award from Pennsylvania Community Health Centers (PACHC). PACHC is a statewide membership services organization representing community health centers in rural and urban communities across the Commonwealth.

The presentation was made at the APEX Award Luncheon on October 13th during the 2021 PACHC Annual Conference & Clinical Summit in Lancaster, PA.

The Career Achievement Award is given to an individual who demonstrates employee excellence and a work ethic consistent with the health center mission, started at a lower position to achieve career advancement and serves as an inspiration to others.

Newman joined WMCHC as a dental assistant in 2010. By 2013, she was promoted to Administrative Assistant to the Executive Director. As her duties evolved and she became a Practice Manager, Newman was instrumental in WMCHC initiatives including the opening of the Honesdale VA Outpatient Clinic

and achievement of Patient Centered Medical Home (PCMH) designation for primary care. She is responsible for the management of multiple primary care sites including overseeing 46 staff members and 14 providers. Newman was promoted to the senior management position of Administrative Director in 2020 where she carries out several system-wide responsibilities.

WMCHC Executive Director Frederick Jackson characterizes Newman as the "most organized and efficient person I have ever known with an eye for process development, efficiency and



Wynter Newman

improvement unparalleled in our organization."

WMCHC is a federally qualified health center clinically affiliated with Wayne Memorial Health System, Inc. For more information

Wayne Memorial Hospital, Nursing Home and Health Centers enhance staff pay

Over the next four months, Wayne Memorial Hospital, Wayne Memorial Community Health Centers (WMCHC), and Wayne Woodlands Manor together will invest \$2.75 million dollars in payment enhancements for all staff, excluding senior management. Those monies, in the form of hourly rate hikes, are intended to recognize all Wayne Memorial staff in these entities for their commitment to working in healthcare jobs during the COVID pandemic.

The hospital will also offer further enhancements to those working in critical-and-hard-to-recruit positions such as clinical staff in the acute COVID inpatient unit, the Emergency Department and COVID testing site, as well as provide "essential shift incentives" for clinical staff filling specific shifts in designated areas.

"Our employees are our most precious resource," said David Hoff, CEO of Wayne Memorial Hospital (WMH), "and without them we cannot fulfill our mission to care for our community in their times of need."

In communicating the initiative, Frederick Jackson, executive director WMCHC, told his employees that "recognition of the effort you all have made professionally and personally throughout the pandemic is important. I have never been more proud of the job you all do day in and day out in service to our patients and community in these troubled times. It is an honor to be your coworker."

The pay enhancements took effect retroactively to mid-September and will end in early January – eight pay periods.

Both Hoff and Jackson called the payment enhancement initiative a sound investment

at a critical moment in the healthcare industry. According to the American Hospital Association and a 2021 Washington-Post-Kaiser Family Foundation survey, nearly 30% of health care workers are considering leaving their profession altogether, and nearly 60% reported impacts to their mental health stemming from their work during the COVID-19 pandemic. WMH, Wayne Woodlands and WMCHC officials all admit to staff shortages in both clinical and non-clinical areas.

"Working in a healthcare environment, caring for people when they are sick or injured, whether you are a nurse or a lab technician, a medical assistant or a housekeeper, calls for very special skills," said Hoff, "and we want those who do it well to continue to work in the field and to want to

work for organizations such as ours that support and respect them."

Wayne Woodlands' Administrator Michael Freund, BSW, NHA echoed Hoff, saying, "Our hope is that these incentives show potential employees that we value them. We offer a great place to work."

None of the organizations—WMH, WMCHC and WWM—have implemented a COVID vaccine mandate, but as entities that accept Medicare and Medicaid, each would be subject to President Biden's vaccine mandate for all healthcare workers. Hoff and Jackson said the payment initiative was developed ahead of such a mandate and would stand regardless.

"This is a short-term plan but we hope it sends a clear and positive message to our employees present and future," said Hoff.



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