

Addressing Driving Wellness in Your Community

DRIVING, as an integral part of mobility in U.S. society, is a crucial activity of daily living. Yet, the risk of adverse driving events per mile driven for elders indicates a need to proactively address this area of concern. With aging, functional capacities begin to decline. Impairments in one or more areas of functional capability significantly increase a driver's risk of a crash. These include:

Reduced visual acuity—Approximately 90% of the input required for driving is visual. Visual acuity is critical to the clear recognition of the environment and to the ability to process information quickly. Individuals who have low visual acuity may not recognize a traffic sign or a traffic event until they are very close, which can reduce their reaction time to a stimulus.

Reduced contrast sensitivity may hinder a person's ability to see critical details in low light situations (poor night vision), or in situations where there is little contrast between an object and its surrounding environment.

At the Annual Meeting of the Continuing Care Community Residents of North Carolina in Greensboro, on October 25, 2006, Allison Darwin, an occupational therapist who works at Carolina Meadows in Chapel Hill, spoke at a breakout session about "Addressing Driving Wellness in Your Community." The session provided participants with a model of how one retirement community in North Carolina has chosen to address older driver safety, driving cessation, and provision of additional alternative transportation resources for its residents. Additionally, the session offered ideas and resources to enhance driving safety and wellbeing. This article was prepared by Ms. Darwin for publication in the *Hotline*.



Allison L. Darwin (photo by Maggie Kirk)

Less efficient visual searches—A visual-field loss may result in the person's missing critical information in one aspect of space while directing his or her gaze to another area. An example is the person who looks at directional signs positioned to the right of the road in a parking lot, and does not see the pedestrian who has stepped off the curb on the left.

Decreased depth perception—Depth perception is important in determining the relative position of the vehicle in relation to fixed objects, such as the curb or a fence, and in judging distance when moving, such as when approaching a stopped vehicle ahead at a red light.

Impaired selective attention, attention shifting—When driving, a person must maintain an ongoing awareness and capacity to divide his or her attention between the vehicle's operation, its position, its speed, the

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<CCCRofNC.org>

The CCCR of NC HomePage has been redesigned and revitalized—check it out!

Membership Application

One-year membership is \$5 for an individual, \$10 for a couple. Life membership is \$50 for an individual, \$100 for a couple. **Checks should be made payable to CCCR of NC and given to your community's CCCR of NC representative**, so he or she can keep an accurate tally of members. Please indicate whether you are a renewing or new member. If you are not sure who your community's CCCR of NC representative is, you may find out by contacting CCCR of NC President Willie Johnson, 2600 Croasdaile Farm Parkway, #A-328, Durham, NC 27705; e-mail [<williedjohnson@aol.com>](mailto:williedjohnson@aol.com). If your community does not have a representative, mail checks to: CCCR of NC, c/o Page, 278 Bean Road, Mocksville, NC 27028. The form below is provided for your convenience.

APPLICATION FORM (please print or type)

_____ (Your name) _____ (Spouse's name, if applicable)

Address _____

Status (please check one): Renewal New member

Enclosed is payment for (please check one):

One year: \$5 single \$10 couple Life: \$50 single \$100 couple

condition of the roadway, and the actions of other drivers. As adults age, processing is slowed, and their awareness of their limitations may decrease.

Less efficient working memory—Planning skills are needed to select a route to a given destination, the time of day for travel, and the amount of time allowed to make the trip. Many older drivers begin to have difficulties with these skills and may recognize the need to develop strategies to minimize risks by avoiding rush-hour travel, using familiar routes, and limiting travel distances.

Musculoskeletal losses related to range of motion and strength—Older adults may begin to have difficulty turning their heads or trunks to see behind or to the side. Additionally, lower-extremity range of motion and strength, particularly in the hips, knees, and ankles, may be decreased such that they have difficulty manipulating the pedals or moving their feet quickly.

Safety organizations such as the National Highway Transportation Safety Administration, and professional organizations such as AARP, the American Society on Aging, AAA, and the American Occupational Therapy Association emphasize the importance of addressing and assessing driving-related skills with older adults and preparing this sector of the population on multiple levels for effective use of community mobility resources when restricting or ceasing driving is anticipated. In particular, older adults do not often plan for the time when they need to stop driving. As a result, when they are faced with this reality, they can experience decreased connectedness to their communities, reduced feelings of self-efficacy and self-sufficiency, and minimized role engagement and activity patterns. Many community, state, and national efforts initiated in the past five years that are promoting a growing emphasis on older-driver safety, alternative community mobility options, and strategies

for preparing for driving restriction or cessation. They include publication by the American Medical Association, with support from the National Highway Transportation Safety Administration, of *A Physician's Guide for Assessing and Counseling Older Drivers*. This excellent manual provides physicians with a continuing education resource manual to encourage them to include screening for and conversation about driving with older adults during routine visits. The manual suggests that proactive measures be taken to: include driving history as a part of medical history, consider medication review specific to related driving impairments, and identify conditions that place adults at risk for driving cessation and refer them for preventive screening, rehabilitation, and adaptations as necessary. This resource is available at: <www.ama-assn.org/go/olderdriver>. Additionally, in 2003 a model protocol funded by research from the National Highway Safety Administration was established. This protocol, the Gross IMPairment Scale (GRIMPS), was based on tools that were found through research to predict on-road driving performance and that could be delivered in a timely, cost-effective manner in an off-road setting. This resource is available at: <www.nhtsa.gov/people/injury/olddrive/researchstudies/.html>.

THE CAROLINA MEADOWS PROGRAM

In the spring of 2003, based on resident and staff concerns, Carolina Meadows began to explore the possibility of establishing a driving screening program for its residents that would be a measure of capabilities and safe limits. The community realized that current protocols for addressing older driver safety were inadequate. At the time, the only method that the community had to address concerns was to report a driving-impaired resident to the Department of Motor Vehi-

Continuing Care Community Residents of North Carolina

BUDGET REPORT FOR FISCAL YEAR 2005/2006

(October 1, 2005 — September 30 2006)

Budget Line Item	FY 2005/6 Budget	FY 2005/6 Expenses
Annual Meeting	300.00	493.76
Board & Executive	600.00	463.16
Dues to Organizations	600.00	430.00
Dues Refunded	0.00	10.00
Hotline Publication	12,000.00	9,410.33
Membership Development	1,500.00	1,327.28
Membership Management	5,000.00	3,456.18
Miscellaneous	300.00	99.00
Officer's Expenses		
President	1,000.00	123.54
Secretary	350.00	0.00
Treasurer	100.00	145.35
Region Allocations		
Central Region	934.00	626.35
Eastern Region	1,483.00	755.58
Western Region	1,322.00	84.50
Representation Travel	2,000.00	1,687.09
Website	<u>500.00</u>	<u>332.35</u>
Total Expenses	27,989.00	19,444.47

Annual Meeting of CCCR of NC Eastern Section

Thursday, April 26

The Forest at Duke, 2701 Pickett Road, Durham

REGISTRATION FORM (You must use this form to register)

Name(s) (please print) _____

Address: _____

Telephone: _____ E-mail: _____

Community: _____ Amount of enclosed check: _____

Make check payable to The Forest at Duke for \$12 per person, which includes lunch, and send it with this form to:

Robin Harper
The Forest at Duke
2710 Pickett Road
Durham, NC 27705

I (we) have the following dietary restrictions: _____

I (we) would like to tour TFAD after lunch (check here) _____

Be the change you would like to see in the world.

—Ghandi

cles. When the resident received a letter from this agency asking him or her to come to the office for a test, the resident had the right to question who had reported him or her. The Department of Motor Vehicles was required by law to provide this information to the resident, and as one might imagine, the revelation often engendered frustration and anger. With a strategic goal in place to address driver safety within the community, Carolina Meadows was interested in establishing a non-threatening, non-punitive program.

A resident-led volunteer program also had concerns about addressing driver safety within the community. The Meadows Assistance Program (MAP) is a volunteer program where residents help other residents in various areas, such as driving them to appointments when the community's Transportation Department is overtaxed. The leaders of this program began to realize that it would be desirable to have some means of assessing the driving-related skills of their volunteer corps to ensure capability and promote safety.

Thus, based on the concerns of this group as well as those of the administration, the impetus for a screening program evolved. A driving task force was formed, consisting of resident stakeholders, administration representatives, the Director of Health Services, the Director of Social Work, an occupational therapist on the faculty at UNC-CH who had expertise in addressing older-driver issues and programming, and two occupational therapy graduate students from UNC-CH, who were asked to work on developing the vision for an older-driver screening program as a part of their final field experience requirements for graduation. Over a three-month period, this team met frequently to formulate a program for Carolina Meadows. By the fall of 2003, the committee had decided that an in-house program that was low-cost, prevention-focused, and voluntary, and that would take less than an hour to

administer would be most desirable. Based on national research and available evidence about older-driver screening and assessment, Jenny Womack, a faculty member in the Division of Occupational Science at UNC-CH, designed a screening protocol that looked at driving-related skills in a variety of domains, including visual capacities, mobility and reaction time, and cognitive perception. The screening program was piloted by Jenny Womack with a group of MAP volunteer drivers, and based on its success and value to the community, the screening was made an annual requirement for participation in the MAP. By the spring of 2004, the driving task force was ready to market the screening program to the entire resident-driver community. The facility's occupational therapist, formerly one of the graduate students originally working with the task force, assumed responsibility for administration of the program. Emphasis was placed on a wellness rather than punitive focus and on the resident community's responsibility to safety of self and others. Since April 2004, over 60% of the resident driving community has been voluntarily screened at least once. Based on residents' comments, the benefits of the screening program are:

- The resident receives constructive and individualized feedback from a trained clinician about his or her strengths and limitations.
- The resident feels empowered and "in control" of his or her decisions about driving.
- The screening occurs in a quiet and confidential environment.
- A written report with details of the screening results and clinical recommendations for follow-up with a specialist, remediation, or strategies for maintaining driving health is provided to the resident.

A screening of driving-related skills and risk factors is a first-level option in a spec-

trum of services to address older-driver issues. The screening content that Carolina Meadows uses is based on sound research and experience regarding its relationship to driving performance. However, even though model programs may be excellent examples, they may not fully meet the needs of specific communities. It is important for each community to tailor its efforts to what will work best for its residents and to what will most closely be aligned with the community's overall culture by expanding on the base of existing initiatives.

Carolina Meadows has initiated several efforts to address issues "beyond the car." In late 2005, the driving task force recognized the importance of addressing not only concerns about driving safety, but also concerns about those residents who were limiting their driving or who were facing driving cessation. A survey was conducted in January 2006 to determine how satisfied residents were with existing transportation resources and to pinpoint how local services might be enhanced to better meet their needs. A 64% response rate to the survey resulted in informative feedback. Since January, Carolina Meadows has expanded its Transportation Department services to include formalized on-campus transportation after 5 PM. Another staff member was hired to meet this need. Additionally, the MAP has enhanced its service offerings. A new arm of the program called HERO (Helping Every Resident Out) was added so that a volunteer base of residents now exists to drive other residents to locations and appointments that are non-medical. The MAP has also added a program called WOT (Weekend On-Campus Transportation) where volunteers are on call during set weekend hours to transport residents to on-campus locations.

Carolina Meadows is also making an effort to offer continual educational resources to residents about driving safety, alternative

transportation resources, and preparing for driving cessation. A listing of available print and online resources that address these issues is available to residents. Also, an educational program called CarFit was recently hosted at Carolina Meadows. This program is a joint effort between the American Society on Aging, AAA, AARP, and the American Occupational Therapy Association that provides the opportunity for older drivers to check out how well their personal vehicles "fit" them by going through a 12-point checklist with a trained technician. The technician and an occupational therapist help the older adult to look at his or her car and determine whether adjustments might need to be made to promote increased safety and comfort while driving. Additionally, resources and consultation are available about simple strategies or "gadgets" that might enhance the ease of driving. This program is purely educational, is free of charge, and takes approximately 30 minutes to complete. The event at Carolina Meadows accommodated 72 residents and was considered a great help and success.

Allison L. Darwin, MS, OTR/L

Resources

1. Family Conversations with Older Drivers. <www.thehartford.com/talkwitholderdrivers>.
2. When You Are Concerned: A Guide for Families Concerned about the Safety of an Older Driver. <www.aging.state.ny.us/index.htm> (under "Families and Caregivers" category on the sidebar).
3. AAA. Roadwise Review: A Tool to Help Seniors Drive Safely Longer. (A CD-ROM created as a tool for older drivers, developed by AAA in collaboration with the American Occupational Therapy

If you have questions about developing a screening program, hosting a CarFit event, or about any of the resources that have been shared, please do not hesitate to contact Allison Darwin at (919) 932-4643 or <allison_darwin@med.unc.edu>.

And then, at last, the drill!
 The large, dull drill saved especially
 For children or even particularly for me.
 None of your sleek little postmodern,
 Painless, supersonic whizzers
 That finish the job in seconds.
 No, Dr. Miller's grisly apparatus
 Was designed to chip and burn its way
 Slowly through endless layers of enamel
 Down, down into the quivering dentine
 And yet on and on, searching,
 Searching for your very soul.

Novocaine? Nonsense!
 For an amputation, perhaps,
 But for kids? Never!
 "How will they react to real pain when it comes?"
 At last, with one sadistic flourish
 The last offending cavity was disemboweled
 And ready for packing with amalgam
 Blessed relief! The session was nearly over.

Shaken, but recovering, I descended the stairs,
 Into the sunlight holding my mother's hand
 As we turned into the drugstore
 To sit high on stools before the soda fountain
 Awaiting my reward;
 A cool, delicious vanilla ice cream soda
 Sure to revive the spirits
 And begin a new cycle of carefree neglect,
 Decay and eventual penance at Dr. Miller's.

Ned Arnett
 The Forest at Duke



Tryon Estates Memorial Gardens

A MAJOR IMPROVEMENT has recently been made to the Memorial Gardens at Tryon Estates. It was made possible because of a sizeable donation by MGEN Harry Evans, USAF (ret) in memory of his wife, Dixie. The donation permitted the installation of an attractive brick wall (pictured), other improvements and a beautiful bronze plaque. The plaque contains the names of all residents that have passed away since Tryon Estates opened through 2005. Additional similar plaques will be added on a yearly basis.

The gardens, with the mountains in the background, are a beautiful place to meditate and remember friends who have passed on to their eternal rest.

Paul Sunderland
 Tryon Estates

From Our Communities

The “Any Soldier” Program

A GREAT WAY to give a lift to our troops in Iraq and Afghanistan is through the “Any Soldier” program. This was established to supply names, addresses, and the needs of our men and women in these countries. They are in need of some very basic supplies: food, hygiene items, snacks, batteries, clothing, towels, games, T shirts, socks, blankets, MAIL, MAIL, and anything that reminds them of home. By going to the <www.anysoldier.com> web site, you can find all the information as to what to send, where to send it, and how to send it. The post office offers two sizes of flat-rate Priority mailing boxes at no cost and the postage is a set \$8.10. They are fairly small, but with practice you can cram a lot into them. The post office also sells other sizes of boxes and you can pay to send them surface mail or Priority. A customs form, available at the post office, is required. Priority covers only to the APO address and then they go military transport mail.

When you read the listings from our troops, you cannot help becoming involved. Their touching messages show their need for our assistance. They are there, away from home and family, and they need our support.

Carol Clise
Abernethy Laurels

The Dentist

Across the Bridge of Sighs,
Up the steps to the scaffold
Or rack or worse, if possible,
My gentle mother led me,
Like a lamb to the slaughter,
Up the endless dark staircase
From the grim little door
Beside Liggett’s drug store
Where Dr. Miller, or was it
Torquemada?
Was waiting for me
In his dingy little torture chamber
With the sharp, bright little instruments of pain:
The chair of penance for the sin of sloth;
Evasion of duty with my toothbrush.

After endless hours of waiting
With sweating hands,
Savoring the agony that lay ahead,
I was led in, while my mother and Dr. Miller
Discussed in conspiratorial tones
My sins of dental neglect
And what would surely come of them.

After putting on my bib,
No doubt to spare the floor
From flying blood and tissue,
The interrogation of my mouth began
With sharpened chisels and probes,
Eliciting an occasional triumphant cry
“Aha, there’s a new one!”
As each new bacterial pocket
In my teeth was uncovered.

Association and noted transportation safety researchers. It allows seniors to measure in their own homes the eight functional abilities shown to be the strongest predictors of crash risk: leg strength and general mobility, head/neck flexibility, high/low contrast visual acuity, working memory, visualization of missing information, visual search, useful field of view. The CD-ROM can be obtained from AAA for a nominal cost. <www.aaapublicaffairs.com/Main/> (scroll to the bottom of the page and click on “Senior Driver Safety and Mobility”).

4. AAA Foundation for Traffic Safety Senior Driver Website <www.seniordrivers.org>. (Brochures, “Safe Mobility for Seniors” document with links for many programs and materials; “Supplemental Transportation Programs for Seniors” report.)
5. AARP Driver Safety Program <www.aarp.org/families/driver_safety/>.
6. AARP, in collaboration with the University of Michigan Transportation Research Institute, a comprehensive document, “Promising Approaches to enhancing Elderly Mobility.” <www.deepblue.lib.umich.edu/bitstream/2027.42/1536/2/97337.0001.001.pdf>.

7. University of Michigan Transportation Research Institute. Driving Decisions Workbook. <www.aota.org/olderdriver/docs/AssessUMI.pdf>.
8. National Highway Transportation Safety Administration. Safe Mobility for Older People. <www.nhtsa.dot.gov/people/injury/> (brochures, reports, materials).
9. American Society on Aging. Drive Well. <www.asaging.org/drivewell/index.cfm>.
10. American Society on Aging. Road Map to Driving Wellness. <www.asaging.org/cdc/index.cfm>.
11. Administration on Aging. <www.aoa.gov/prof/notes/notes_older_drivers.asp>.
12. American Occupational Therapy Association. A website dedicated entirely to addressing the needs of older adults related to driving and community mobility. Occupational therapists are trained and knowledgeable in addressing and assessing older driver safety and in counseling/advising about alternative transportation options and driving cessation. <www.aota.org/olderdriver>.



Winter scene at Grace Ridge (photo by Henry Liles)

Jury Duty Scam

MOST OF US take those summons for jury duty seriously, but enough people skip out on their civic duty that a new and ominous scam has surfaced. Fall for it and your identity could be stolen, reports CBS. In this con, someone calls pretending to be a court official who threateningly says a warrant has been issued for your arrest because you didn't show up for jury duty. If you protest that you never received a summons, the scammer asks you for your Social Security number and date of birth so he or she can verify the information and cancel the arrest warrant. Give out this information and bingo! Your identity just got stolen.

The scam has been reported so far in 11 states, including Oklahoma, Illinois, and Colorado. This scam is particularly insidious because they use intimidation over the phone to try to bully people into giving information by pretending they're with the court system. The FBI and the federal court system have issued nationwide alerts on their websites, warning consumers about the fraud.

This information has been verified on Snopes.com and by the FBI, <www.fbi.gov/pressrel05/092895.htm>.

Henry Piles
Grace Ridge

IDENTITY THEFT

Identity thieves target seniors heavily, often because they have substantial savings, little debt, or real estate that is no longer subject to a mortgage. Many scams and frauds are ploys for securing credit and checking account numbers and stealing from those accounts. In other transactions identity thieves take over a target's identity completely. Elderly people have learned of attempts to sell their homes, farms, and automobiles out from under them. Some have found that mortgages have been placed on their homes and money disbursed to scammers who used their names. Identity theft is the fastest growing scam in the United States and has been the leading consumer complaint category of the Federal Trade Commission for the past several years. Always check all bills and account statements carefully for unusual charges and activities. Contact the bank or creditor immediately if you notice something suspicious. Check your credit report annually. Each of the three national credit reporting services must provide you with a free copy of your credit report once per year upon request. Contact the North Carolina Attorney General's Office (tel. 919-716-6000 or toll-free in NC 1-877-566-7226) or the Federal Trade Commission (I-977-ID THEFT) for an Identity Theft Victim Kit if you find you have been victimized by this crime. File a police report with your local law enforcement agency if you are a victim, as this will help when you contact the credit reporting services and try to clean up your credit file.

Reprinted from "Some Frauds, Scams and Questionable Business Practices Currently Targeting Our Seniors," published by the North Carolina Department of Justice.

Regional Reports

From the Center

MEETINGS of the Central Region's Steering Committee were convened May 3 and September 22, 2006, and January 16, 2007. At the May meeting it was decided that the Central Region would have one regional meeting only, in the spring. The issue of banning smoking in communities was considered. Discussion of relations between residents and governing bodies of communities led to agreement that Don Hasty would prepare a questionnaire to elicit information about residents' participation in governance. The committee also recommended that CCCR of NC have a legislative committee that would work with other agencies concerned with the needs of senior citizens.

At the September meeting, Don Hasty reported the results of his questionnaire survey about residents on governing boards, which showed considerable variety. Conflict of interests was dismissed as a problem relative to residents on governing boards. Hope Davis passed out copies of NC Law 55A-8-31, which deals with the

matter, albeit in a wordy and cloudy manner. At Don's request, he was replaced as Central Region Coordinator, having served two years. Charlotte Blount also asked to be replaced, after serving two years as regional Secretary. New Co-coordinators are Hope Davis and Gray Calvert, of Trinity Oaks, but a new Secretary has not yet been found. Charles Fitzpatrick remains the regional Treasurer.

At the January meeting, Salemtowne, in Winston-Salem, was selected for the spring regional meeting, which will be held in May or early June. The next meeting of the Steering Committee will take place at Twin Lakes, in Elon, March 20. The preparation of regional bylaws and the non-smoking issue were discussed. Co-coordinator Hope suggested checking an Internet site for information about the annual medical tax deduction, <www.ustaxcourt.gov/inophistoric/Baker4.WPD.pdf>, pages 66 and 67.

From the West

THE WESTERN REGION'S steering committee will meet in

February to plan the regional session, which will be held May 24 at Tryon Estates.

From the East

THE ANNUAL MEETING of the Eastern Region will take place Thursday, April 26, at The Forest at Duke, 2701 Pickett Road, in Durham. To register to attend, please use the form that appears on page 14 of this issue. You are encouraged to register early.

To reach The Forest at Duke, follow these directions:

From east or west on I-40, get off at exit 270 and turn onto U.S. 15-501 heading towards Durham. Turn left at the third traffic light after leaving I-40 onto Garrett Road and follow it to the end. Turn right onto Pickett Road and go 1.5 miles to 2701 Pickett Road, which is on the right.

From the north, take I-85 south and take left exit onto U.S. 15-501 S. Exit at Cornwallis Road and turn left. Follow Cornwallis to traffic light and turn right onto Academy Road (NC 751). Turn right at next light onto Pickett Road. 2701 is .5 mile ahead.

of the problems. Willie wants community managers to participate, and asked us to encourage them to do so. An organization will pay \$79 to participate.

Willie asks that each region send her an updated list of all community representatives and alternates in the region, with their mailing addresses, e-mail addresses, and telephone numbers.

Dates and places were set for future meetings of the Executive Committee: March 15, April 19, June 21, and September 20 (all at Friends Home West); Board of Directors (May 17, hopefully at Thomasville); and Annual Meeting (October 18, 2007, again at Christ United Methodist Church, Greensboro). Members are encouraged to offer suggestions for breakout sessions and other business to be transacted at the Annual Meeting. Changing our fiscal year to the calendar

year was skipped at last year's meeting and needs to be resolved in 2007 (see below).

Willie passed out the state bylaws asking for suggestions for improvement. They need some editorial and perhaps other revision.

The question was asked whether a resident who is not on the Executive Committee could come to its meeting. The consensus seemed to be that if there was a matter that needed to be discussed any resident could come to present the matter after arrangement with the president.

A resident at Friends West had raised the question whether all our communities should have defibrillators on their campuses. A committee will investigate and report later.

Ted Blount
Secretary
Arbor Acres

Proposal to Change CCCR of NC Fiscal Year to Calendar Year

Your Executive Board intends to initiate a proposal to change our fiscal year for consideration at the Spring meeting of the CCCR of NC Board. The CCCR of NC fiscal year, which is now October 1 through September 30, would be changed to coincide with the calendar year. If the Board approves of this proposal, it will be presented at the October 2007 Annual Meeting for final approval by member attendees. If the change is approved, dues received by our treasurer, or his designee, after July 2007 would be counted as dues for the calendar/fiscal year 2008. Any dues received in the calendar year 2008 would be credited to 2008, any received in 2009 to 2009, etc. At the present time, dues received after July are counted as dues received in the following fiscal year beginning October 1. This policy often causes confusion, which would be eliminated by matching the fiscal year to the calendar year.

Phone Scammers on the Move—Beware!

SCAMMERS LIKE TO TARGET OLDER PEOPLE, who are often easy marks, living lonely lives with no family nearby, and susceptible to the lures of contests, sweepstakes, and lotteries. The elderly also conveniently tend to enjoy financial liquidity, with easy access to funds; they may have limited incomes and be looking for a break; and their discriminatory abilities may be hampered by medication effects, chronic illness or frailty; and cognitive impairment.

Telephone scams are among the most common. Target lists for these scams start with announcements of lottery/sweepstakes eligibility, mailed to potential victims with come-ons such as "You may already have won \$\$\$\$" and "All prizes will be awarded." The recipient is asked to write in personal information on the bottom of a form and

This information was excerpted from slide materials prepared by David Fox, Consumer Protection Specialist, North Carolina Department of Justice, for presentation at the Annual Meeting of the CCCR of NC, Greensboro, October 26, 2006.

return the form to validate eligibility. Returned forms are bundled together and shipped to telemarketers in Canada daily. Frauds committed by telephone amount to \$40 billion each year, and half of the money is lost by elderly victims. Some are targeted repeatedly, sustaining substantial losses of thousands of dollars. Cross-border scams include overseas lotteries and sweepstakes and money transfer schemes.

To avoid becoming a victim of a telephone scam,

- Add your phone number to the national do-not-call list. Call toll-free 1 (888) 382-1222 or visit the website at <www.donotcall.gov>.
- Fill out the Direct Marketing Association's telephone and mail preference letter; the DMA will remove your name from all telephone and mail lists.
- Contact the office of the North Carolina Telemarketing Fraud Prevention and Privacy Protection Project if you think you are being scammed. Their number is 1 (877) 566-7226.

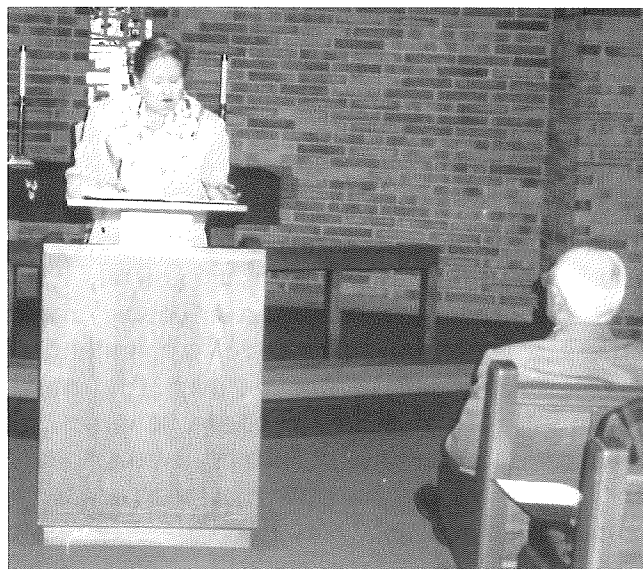
Calendar

Thursday, April 26	Eastern Region meets at The Forest at Duke
Thursday, May 17	Board (statewide reps) meets (at Thomasville?)
Thursday, May 24	Western Region meets at Tryon Estates
Thursday, June 7	Central Region meets at Salemtowne
Thursday, October 18	Annual Meeting (all regions) at Christ United Methodist Church, Greensboro

“Living to the Max”

DENISE WATERS, Chaplain at Croasdaile Village, conducted a breakout session on “staying alive as long as you live” at the October 26, 2006, Annual Meeting. She stressed the importance of keeping your brain sharp (read, do puzzles, learn a language, take a course) and of engagement (participate in the community, build something, cook). Basic principles are diet, exercise, challenge, novelty, and human relationships/love. Specific strategies may include:

- Build in control over your environment.
- Try new things.
- Count your blessings. Gratitude helps manage stress and helps us to be more optimistic—two things that bolster the body’s ability to ward off illness.
- Volunteer—helps build self-esteem, reduce depression, and improve physical health.
- Travel.
- Enrich your environment.
- Find something to laugh about each day.
- Share some love each day.
- Write (not type).
- Incorporate all your intelligences each day (verbal/linguistic, logistical/mathematical, visual/spatial, musical/rhythmic, body/kinetic, interpersonal, intrapersonal).
- Create patterns to help your brain remember.
- Ask questions of yourself in solving problems.



Denise Waters leads breakout session



At the October Annual Meeting in Greensboro (photo by Myles Walburn)

Executive Committee Report

THE EXECUTIVE COMMITTEE of CCCR of NC met at Friends Home West in Greensboro Thursday, January 11. Present were President Willie Johnson, Vice President and Eastern Region coordinator Bob Wyatt, Secretary Ted Blount, regional coordinators Allen Trelease of the Central Region and Dick Nielsen of the Western Region, and Sandy Lovegrove, editor of the *Hotline*. Walton Boyer, Treasurer, was not able to be present.

The treasurer’s report revealed that we had spent 30.22% of our budget as of January 5, 2007, and we had received 53.1% of anticipated income. We had total assets of \$44,953.60.

Allen Trelease reported that the Central Region Steering Committee had met September 22, at which time Don Hasty relinquished the office of coordinator to Hope Davis and Grey Calvert of Trinity Oaks, who will be co-coordinators. Hope Davis reported, through Allen Trelease, some of Don Hasty’s findings concerning the presence of residents on the governing boards of the communities. Communities that are independent and not parts of chains are more likely to have residents on their governing boards. There is a strong tendency for management or existing board members to select resident representatives, rather than for residents to elect them. Where there is at least one resident board member, there is the perception that the board has the interests of residents at heart, and residents are apt to be more satisfied. The Steering Committee of the Central Region was scheduled to meet January 16 for further planning.

Bob Wyatt reported that the Eastern Region had had no regional meeting but that one is planned to April 23 at the Forest of

Duke. New officers will be elected at that time. The Steering Committee will meet January 23 at Carol Woods to plan the April 23 meeting.

Dick Nielsen reported that the Western Region will meet in mid-February to elect new officers and will meet May 24 at Tryon Estates for a general session with a speaker and breakout sessions. A speaker from the N.C. Department of Insurance will be sought. Paul Sunderland has agreed to let his name be proposed for coordinator.

The Eastern Region drew up bylaws when the districts were created. The Western Region has none, and seems to feel no present need for anything beyond its current understandings.

Sandy Lovegrove said that she had material left over from the annual meeting for the next *Hotline*, but would welcome any new material.

Willie spoke of the sincere interest of AAHSA in the wellbeing of the CCCR residents. She expressed the opinion that another resident in addition to the president should attend AAHSA’s annual meeting.

The subject of smoking in the various communities was revisited. Willie mentioned her meeting with Susan Williamson regarding NCANPHA’s assistance with the preparation of a statement of CCCR of NC’s non-smoking resolution. Susan is talking with her board and with state officials about the smoking issue. NCANPHA seems to be on our side. But current smokers will almost certainly have to be grandfathered in. AAHSA is sponsoring an audio conference on smoking in retirement communities, to be held January 31, offering solutions to some