

Country Roads

Volume 1, Issue 2

May 2012



KARRN Mission:

A collaborative team including individuals impacted by neurological conditions, providers who serve them, members of communities in which they live, advocates, and researchers who investigate these impairments will identify, develop and disseminate information and strategies, and maximize resources to improve outcomes and quality of life.

Inside this issue:

Greg Hockensmith	2
Caregiver Support	3
FEATURE: Accessible Gardening	4
KY State Parks	6
About Stroke	7

Project CARAT will help to refurbish and distribute assistive technology

The Kentucky Office of Vocational Rehabilitation (KYOVR) was recently awarded a \$450,000 grant to develop the infrastructure to recycle and redistribute assistive technology and durable medical equipment (DME) in the Appalachian region of Kentucky.

Project CARAT (**Coordinating and Assisting the Reuse of Assistive Technology**), as it is titled, is a collaboration with the Kentucky Appalachian Rural Rehabilitation Network (KARRN), the Kentucky Assistive Technology Services (KATS) Network, the Bluegrass Technology Center (BTC), and several other partners. The goal is to improve the health and quality of life of individuals with disabilities who may not be able to afford the needed equipment to become independent.

To accomplish its goal, CARAT will provide the following services: 1) develop a system of providers who identify and collect unused assistive technology and DME ; 2) recondition and refurbish the equipment to make it suitable for use; and 3) redistribute to those in need. For further information about Project CARAT, visit our website at <http://www.bluegrass-tech.org/carat.html>



Greg Hockensmith speaks at Cardinal Hill

Greg Hockensmith, world renowned hand cyclist, spoke to a group of therapists, community members and more at Cardinal Hill Rehabilitation Hospital in Lexington on May 1, 2012, regarding his experiences as a Para athlete. Greg is a 4-time National Champion, a 2004 Paralympian, and holds numerous national and international titles and records, including the fastest arm-powered ascent of Mt. Fuji in 2007.

His talk on May 1st was titled "Making an impact by pedaling; converting achievements in sports to advancements in daily life." His messages included living life to its fullest no matter your circumstances.

After the presentation, representatives from Invacare brought several examples of hand cycles for attendees to try. Thank you to Paul Erway and Superior Van and Mobility for sponsoring this great event.

For information on other events happening at Cardinal Hill Rehab Hospital, visit www.cardinalhill.org/events or call 800-233-3260

*Right:
Hockensmith
discusses his
experiences as a
para athlete*

*Far Right: Testing
out the hand
cycles provided
by Invacare.*



4th Annual KARRN conference to be held at Eastern Kentucky University

The fourth annual KARRN conference will be held September 19th at Eastern Kentucky University in Richmond, KY. The theme of this year's conference is "Issues related to spinal cord injury and stroke across the life span". Conference attendees will include community members and their caregivers, healthcare providers, and researchers, and anyone interested in learning. Several fantastic presenters are lined up to discuss spinal cord injury and stroke issues from pediatrics to old age. There will also be a poster session for students and researchers to share their findings.

Registration for the conference will open in August, so stay tuned for more information. If you have questions or would like to apply as a vendor at the conference, please contact KARRN.

Grant will aid development of Appalachian Caregiver Peer Mentor Program

Beth Hunter, PhD, Director of Research at Cardinal Hill Rehabilitation Hospital has received a grant from the University of Kentucky CCTS Community Engagement Core for the health outreach project titled "A Community-Based Appalachian Caregiver Peer Mentor Program." The CCTS grant supports evidence-based and evidence-informed health outreach projects. This project will expand the current spinal cord injury peer program at Cardinal Hill to include caregivers from Appalachian Kentucky, whose loved ones have received inpatient care at Cardinal Hill and have or will transition home to an Appalachian Kentucky community. The proposed Caregiver peer mentor network will be designed to provide appropriate mentors for this population.

Developing an Appalachian Kentucky Caregiver peer mentoring network will help lessen potential isolation and enhance well-being with the long term potential of improving health and preventing secondary conditions for both the caregiver and the person they care for. The goal is to identify, develop and share information and strategies, and maximize resources to improve quality of life for individuals caring for people with physical disabilities living in rural Kentucky Appalachian counties. The ultimate goal of the Peer Mentor Network is to connect caregivers impacted by physical disability with those who can empathize, support and educate. By facilitating connections between community members in need, it can ease our caregivers' transition back to their hometowns and enhance their quality of life through one-on-one interactions that will provide them with information and assistance for their new reality. Secondly, a goal is to use the network to provide prevention educational information to reduce secondary complications and conditions.

The Kentucky Appalachian Rural Rehabilitation Network (KARRN) will play a major role in the facilitation of the peer-mentoring network. The Cardinal Hill Caregiver peer mentor network will be affiliated with KARRN through participation in KARRN meetings and conferences as well as through the newly developed KARRN website. This program as a natural partner with KARRN and its mission and the peer idea was actually generated by the KARRN community network. For more information, you may contact Dr. Hunter at egh1@cardinalhill.org or at 859-367-7213

"The ultimate goal of the Peer Mentor Network is to connect caregivers impacted by physical disability with those who can empathize, support and educate."





Vertical Planting on the side of a building in downtown London, England- via flickr user mira66

ACCESSIBLE GARDENING – Vertical Gardening

By Ryan Creech, Office of Vocational Rehabilitation, Rehabilitation Technologist

As we've been preparing for our HDI Assistive Technology Institute at the Kentucky State University (KSU) Research Farm in Frankfort this June, we have been taking a look at a variety of alternatives to traditional Gardening. Gardening can be a very rewarding and stimulating hobby. Our goal has been to find some of the best ways to make gardening easier for those with a physical or mental disability.

Vertical gardening is one area that we have been researching. Vertical gardening essentially involves building planters or frames to hold plants off of the ground. This makes garden chores like planting, weeding, and harvesting much easier for those who have limited mobility or range of motion.

Vertical gardens can be as simple as a raised planter box, or as elaborate as a landscape wall filled with plants. Vertical methods can be used to grow decorative plants like vines and flowers as well as fruit and vegetable produce.

One of the simplest ways to incorporate vertical gardening is by building a trellis frame. These can be elaborate constructions of wood or metal, but they can also be made simply by attaching some livestock fencing or builders' mesh to an existing element like a stair rail or around the outside of a porch or deck. Trellis

(continued on page 5)



Above: Raised cedar beds recently added at Kentucky Arboretum. Right: Basket planter on a metal stand to raise it to comfortable working height at Kentucky Arboretum. Photos by Ryan Creech



FEATURE: Accessible Gardening

gardens are great for climbing produce like beans, tomatoes, and peppers. They can also be used for traditionally ground sprawling plants like cucumbers, squash, or pumpkins. Decorative vines, ivy, and even flowering bushes can be trained to grow along this type of fencing, too.

Another simple idea for vertical gardening is using containers. These can be as elaborate as a ceramic planter or a wooden box to simple plastic pots from your local garden store or other retailer. In our accessible garden at KSU, we have gone a step beyond these, recycling plastic bottles and milk jugs to create planters. Hanging these planters or raising them on a bench or railing makes a very easy accessible garden that can be scaled up or down depending on the space you have available.

Wall gardens are a beautiful way to bring your garden off of the ground and up to a workable level. Several products are available on the market today for growing wall gardens. One clever idea is to use old guttering (make sure it hasn't been painted with lead paint). Another idea is to mount some milk crates to your wall with the openings facing outward. You can then use some landscape fabric and pots to create a stunning wall of flowers with very little financial investment.

The possibilities for vertical gardening are endless! By bringing the plants off of the ground, the garden becomes an accessible and enjoyable place for everyone, regardless of physical limitations. Vertical gardening is great for city dwellers because it doesn't require much room. It lets the gardener grow the same amount of plants in a much smaller area. Be sure to join us for the HDI Summer AT Institute at KSU on June 13th and 14th to see demonstrations of all types of accessible gardening!

<http://www.hdi.uky.edu/atworkshop/>



Left: Standing and seated work areas at Kentucky Arboretum. Right: Stand built to hold milk crates for vertical planting wall at Kentucky Arboretum. Photos by Ryan Creech

Needs Assessment of People with Stroke (NAPS): A Team Qualitative Study

KARRN researchers are investigating life experiences of individuals living with stroke and their caregivers in Appalachian Kentucky. The objectives are 1) to describe the experiences of people with stroke and caregivers across the continuum of health care and 2) to determine barriers to and facilitators of community re-integration for people with stroke. The research is being done through interviews.

Initial findings have revealed that upon return to home, Kentuckians in rural Appalachia often benefit from support provided by faith communities and individuals within their social network. Support systems often decline considerably over time, due in part to a lack of linkages to existing supports. Recommendations related to increased support for navigation and connections to existing services are being developed, and avenues for developing peer alliances are being examined.

Analysis of Kentucky's state parks wheelchair accessibility reveals both strengths and shortcomings

Groups of University of Kentucky physical therapy students have spent the last two years visiting over 50 of Kentucky's state parks and recreation areas to investigate their wheelchair accessibility, measuring over 40 items to see if they complied with ADA guidelines.

Every park visited for the study had some level of wheelchair access. Overall, national parks and state resort parks scored best. Historic parks scored the lowest- for preservation purposes, these parks are often unable to modify the buildings or grounds. However, they do provide wheelchair-friendly features where possible.

For specific amenities, restroom facilities and lodging seemed to have good accessibility across the board, although it can vary within each park— the most common issues are handrails that are too low, and urinals and mirrors that are too high. Most parks with camping had concrete pads available, and about half had fully paved sites that make it easier to maneuver in a wheelchair. A few parks had paved trails, but terrain can be steep so bring a friend who can assist you if needed. Unfortunately, fishing and boating amenities scored the worst for accessibility. Always call ahead to check water levels, since it may affect the ability to access docks and piers in a wheelchair.

Information about the individual parks, along with tips to help you travel and enjoy the outdoors in a wheelchair, are available in the "Travel Tips for Persons in Wheelchairs" series, available at www.karrn.org. The State Parks edition 1 has been published, editions 2, 3, and 4 are planned to be released later this year.



About Stroke:

Stroke is the third leading cause of death in the United States, and a leading cause of major long-term disability. The National Stroke Association explains a stroke in this way:

The brain needs a constant supply of blood, which delivers the oxygen and nutrients it needs to function. Arteries are vessels that carry blood to specific areas of the brain. A stroke occurs when one of these arteries to the brain either is blocked or bursts. As a result, part of the brain does not get the blood it needs, so it starts to die.

There are many factors that can cause a stroke. Some factors that can put you at risk for stroke are high blood pressure, high cholesterol, diabetes, inactivity, obesity, tobacco, and alcohol use. While medications can treat some of these factors, the *best ways you can reduce your chances of stroke* are to move your body every day, eat healthy foods low in salt and saturated fat, and stop using tobacco. Work with your doctor to make sure existing health conditions are under control. Visit www.stroke.org for more information.

If a stroke does occur, it is important to get medical help immediately. To recognize a stroke, remember— Act FAST:

- ⇒ **Face**— is their smile lopsided, or does one side droop?
- ⇒ **Arms**— If they raise their arms, does one arm drift down?
- ⇒ **Speech**— Is their speech slurred, can they repeat a simple phrase?
- ⇒ **Time**— note the time and call 9-1-1 immediately if *any* of these symptoms are present. For the best treatment, you must be at the hospital **within 3 hours of stroke onset**.

Education Spotlight: STROKE



The Numbers:

- ◆ In 2009-2010, there were an estimated **70,035** cases of non fatal stroke in Kentucky.
- ◆ The ages of persons who had a stroke ranged from less than **4** years old to over **85** years old.



Kentucky Stroke Database:

KARRN is working to develop a database that contains information on over 70,000 cases of stroke in Kentucky from 2009 and 2010. This database will provide important information about where community and healthcare support is needed most. It is the first of its kind in the state and will hopefully help contribute to improving stroke care in Kentucky.

Kentucky Appalachian Rural Rehabilitation Network
Charles T. Wethington Building, Rm 208
900 S. Limestone Ave
Lexington, KY 40536-0200

Phone: 859-218-0515

Fax: 859-323-6003

E-mail: chandra.lloyd@uky.edu

www.karrn.org



Working Towards a Common Goal