

Thinking the UNTHINKABLE

PREPARE NOW FOR THE LATER STAGES OF LIFE

by julie estlick

s the 24-hour news cycle constantly reminds us, accidents and serious illness can disrupt a life at any moment. Everyone dies of something. For some, it happens quickly. But most of us will experience a gradual decline in health. The significant medical advancements in recent decades are very effective at keeping people alive longer and longer—but as that happens, our body's ability to function inevitably declines in a process that is relentless.

While Americans treasure our health and self-sufficiency, we have to accept that at some point we'll need someone to help care for us, as Atul Gawande points out in his book, "Being Mortal: Illness, Medicine and What Matters in the End."

"Serious illness or infirmity will strike. It is as inevitable as sunset," Gawande says.

In this new age of living longer, many of us still haven't recognized that it is up to each of us to plan ahead if we want to improve the chances that our last days will go the way we want them to go. We can no longer count on relatives to take care of us as we age thanks to significant shifts in family life away from multigenerational households and children moving for jobs and settling down, often hours away.

DON'T WAIT, ACT NOW

How you will be cared for as you lose your health and independence could be remarkably different if you think ahead and plan now versus

Oral

cancer

Dental

screenings

save lives



if you do not. Preparing early—both emotionally and financially—and sharing your wishes with others is your best chance for living out your golden years as you imagine.

Three questions to think about now: What do I want when I can't take care of myself? What do I need to do now to increase the chances of that happening? How do I make sure others know my preferences?

Although when asked their preference, many people say they prefer to be healthy and pass away peacefully in their sleep with family at their side, unfortunately, things will be different for most of us. The way will be much easier, however, if we have thought through what we want at the end of life, put those thoughts in writing, and discussed our preferences with those we trust, including loved ones/close friends and health

care providers, says Yvonne Myers, health systems director for Columbine Health Systems.

"Record your thoughts. You don't have to write down every scenario, just basic outlines so family and caregivers can respond," Myers advises. Sure, what you think today might change, but you have to start someplace, she adds.

The guides on the Health District's Advance Care Planning Team can meet with you personally to help you understand your choices and get them down in writ-

ing (see breakout box on page 6).

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Art as therapy Chalk channels the hurt

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Health District news

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Medicaid dental benefit spent? Family Dental Clinic can help

It always seems

too early, until



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meetings

Board meetings are usually held monthly on the fourth Tuesday at 4:00 p.m. at the Health District office. The public is welcome; call 224-5209 to confirm meeting dates and times.

programs and services

Cholesterol and Blood Pressure Testing

Connections

Mental health and substance use answers, options, and support

Dental Connections

Family Dental Clinic

HealthInfoSource.com

Healthy Mind Matters Mental health and substance use issues and solutions

Integrated Primary Care/ Mental Health Program

Mental Health Program A partnership with Salud Family Health Centers and Family Medicine Center

Larimer Advance Care Planning Team

Engaging and supporting individuals in completing advance care plans

Larimer Health Connect Connect for Health Colorado and CHP+/Health First Colorado (Colorado's Medicaid Program), Prescription

Quit Tobacco Program

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Information in this publication is not a substitute for medical attention from your health-care provider.

'Healthy' Snacks

THAT DON'T MEASURE UP



by michelle venus

nacks can be a real puzzle. Grocery stores are filled with packages touting low-salt this, sugar-free and fat-free that. Before you toss all those healthy-looking snacks into the grocery cart, pause for a moment. Are they really nutritious options? Let's take a look at some of the usual suspects:

GRANOLA

Considered a healthy alternative to sugary cereals granola can pack a whopping 6 grams of fat in one cup and as much as 13 grams of honey, molasses, and even white sugar.

Try trail mix instead. Make your own with nuts,

seeds, and dried fruit. Raisins have a natural sugar content

of 59 percent, so if you're watching sugar intake, keep the fruit to a minimum.



VEGGIE CHIPS

You may think those beet and taro chips are healthy potato chip substitutes, but not so much. One ounce of veggie chips contains 134 calories and 6.6 grams of fat. Consider kale chips instead, but pay attention to the salt content. Or go straight to the source and serve up fresh baby carrots, celery, cherry tomatoes, and slices of bell pepper.

RICE CAKES

They may be low in calories, but rice cakes are little more than carbs with salty or sugary flavor additives. What about apple slices with peanut butter instead? Crunchy and sweet, full of fiber and the added punch of protein, this can be your kids' new favorite go-to treat.

POPCORN

Popcorn actually falls into both camps. Buttery, salty popcorn is full of fat and excess sodium.

Steer away from microwave popcorn—yes, it's convenient, but full of artificial flavorings and trans fats. Go with air-popped instead, and jazz it up with your own low-fat toppings like Italian seasoning, a sprinkle of Parmesan, and a dash of olive oil. Sweet toothers,

look to Mexican hot chocolate for inspiration: a drizzle of melted butter sprinkled with cinnamon, cayenne pepper powder, and cocoa powder.

You CAN feel good about what you're serving while keeping the kiddos satisfied with nutritious and delicious munchies. And it's not hard to do. \checkmark



Checking for signs of oral cancer

by julie estlick

ver 49,000 people in the U.S. will be diagnosed with oral cancer this year, a number that has continued to rise for the past decade, according to the Oral Cancer Foundation. The survival rate after 5 years is just 57 percent. While these numbers are startling, the good news is that the vast majority of new cases may be prevented with regular screenings and a healthy lifestyle, a message that is especially timely since April is Oral Cancer Awareness Month.

Oral cancer is the largest group of cancers in the head and neck category, and includes all cancers that occur in the mouth itself, in the very back of the mouth or throat, and on the outside lip of the mouth. Men are now twice as likely as women to be diagnosed with this type of cancer.

Symptoms of oral cancer include pain while swallowing or chewing or persistent growths on your gums, cheek, tongue, or lips. Any growths that keep getting larger or start bleeding also need attention. However, many people don't experience pain or obvious symptoms.

"A lot of times, nothing hurts and patients don't notice a problem until they come in for an exam and we see something that needs to get checked out," says Dr. Rob Gartland of the Health District Family Dental Clinic. Gartland estimates the clinic refers 15 to 20 patients a year to an oral cancer surgeon, although not all of those patients end up with a cancer diagnosis.

All of his routine exams include an oral cancer screening, which takes about 5 minutes and does not cost extra. During a screening, Gartland checks the gums, tongue, the floor of the mouth, the roof of the mouth (or palate), teeth, tonsils, and lips. "I'm looking for any abnormal growths. They usually appear different than the surrounding areas."

Historically, the death rate associated with this cancer is high not because it's hard to discover or diagnose, but because it is routinely discovered late in its development. Less than 25 percent of dental patients in the U.S. say they are screened for oral cancer, according to findings by the Oral Cancer Foundation. A cancer screening should be part of a routine dental exam and not require a special appointment, Gartland emphasizes. If you're not sure whether you've had a dental cancer screening, ask for one the next time you're in the dentist's chair, and find out how to do a self-exam.

Caught early, stage 1 and stage 2 oral cancer can be treated with chemotherapy or radiation. In addition to treating the cancer, doctors will try to preserve the function of nerves, organs, and tissue around the area. "It's a big deal—there are so many structures going on in your mouth and jaw," Gartland explains.

Fortunately, oral cancer is largely a preventable disease. Tobacco users and people who drink alcohol in excess are at a much higher risk, as are those who contract the sexually transmitted virus HPV16 (the human papilloma virus). Changing your behavior may significantly cut down your chances of getting oral cancer. (See breakout box for addiction resources.) Even in the absence of these risk factors, a person can still develop oral cancer.

The bottom line is this: get checked at least once a year for any signs of oral cancer, and contact your dentist if you notice symptoms during self-exams between checkups. If you don't have dental insurance and can't afford an appointment, contact the Family Dental Clinic to see if you qualify to be seen for a dental appointment at the Health District.

Resources:

- Need affordable dental care? Contact the Family Dental Clinic at 970-416-5331 or go to healthdistrict.org/dental for information about services and eligibility.
- For more information about oral cancer, go to oralcancerfoundation.org.
- Checkyourmouth.org is a new public awareness campaign encouraging monthly self-exams of your mouth.
- For help quitting tobacco, contact the Health District Quit Tobacco Program at 970-224-5209, or email quitsmoking@ healthdistrict.org.
- For help with alcohol or drug addiction treatment, contact Connections at 970-221-5551 or mentalhealthconnections.org.



Dentist Rob Gartland performs an oral cancer screen at the Health District Family Dental Clinic. Over 49,000 people in the U.S. will be newly diagnosed with oral cancer this year. April is Oral Cancer Awareness month.



ead east on Drake Road, to the curve where Drake turns into Ziegler. Straight ahead: the refreshing sight of undeveloped land. Notice the trees, the water, the birds overhead. More than a century ago, the Arapaho Indians hunted buffalo here. Today, this generous parcel of nature is one of our community's richest educational and environmental resources.

Welcome to the Colorado State University Environmental Learning Center, a place for indulging in all that nature has to offer.

"We believe strongly in people unplugging and connecting to the beautiful environment we have around us in Colorado," says ELC Director Nicole Stafford. Accessing the property makes that connection possible.

"But what makes us really unique is that CSU students create and teach the programs we offer," says Stafford. "They're innovative and they're really good at modeling enthusiasm and comfort in the environment."

Across ELC's 212 acres of cottonwood forest, riparian areas, and prairie grasslands, natural resources students lead themed programs that engage younger students in exploring their surroundings, regardless of the weather.

During a recent sunny Northern Colorado day, kids took a closer look around the edge of the Poudre River to investigate how creatures fit into their habitats and ecosystems. Leaders design the programs for the younger students' education and enjoyment, and also to impart a reverence for nature. Educator Lauren Hughes says that kids who attend regularly often evolve into leaders.

She tells of Indigo, a young girl who began participating in ELC programs

about three years ago: "Now she's 8, and if she sees someone trampling on plants, she'll gently explain to them the importance of respecting the environment," says Hughes. "It's been awesome seeing her passion for the environment grow."

ELC's week-long Summer Camp programs and its E-Camp, an outdoor adventure program for students in grades 6-8, fill up quickly. Kids have fun building forts, catching crawdads, and learning outdoor survival skills while they explore and connect with nature.

Also popular is the citizen-scientist wildlife monitoring program, which allows trained volunteers to visit the property on their own and record the various species they see, for the benefit of scientists and future visitors. Says Stafford, "We enter that data into a GIS [geographic information system] program and map where they're seeing these species and then use that information in our programs."

ELC also creates custom programs. "If a group wants a program on insects, we'll develop a program and lead them on a walk through the property," says Stafford.

Entry to the ELC is free. Paid memberships help support the organization and provide members with program discounts and invitations to special events.

Visitors are welcome anytime from dawn till dusk. Feel free to bicycle to ELC which is accessible via the Poudre Trail, but bicycles are not allowed on ELC trails. Leave dogs at home as they are not allowed on the property. ELC is open year-round, and

diverse ecosystems. "Waterfowl, other bird species, trees, and shrubs change

throughout the year," Stafford notes.

Learn More

Getting There

From the east end of Drake Rd., turn left onto Environmental Dr., curve around over

The center's offices are located in

the Natural Resources building on CSU's main campus.



Creative Healing

teenager serving time in a youth correctional facility received an upsetting phone call before his therapy session. "He stormed in completely enraged about what was going on at home," said James Schultz, a licensed professional counselor and trained art therapist with a private practice in Fort Collins. Schultz broke out a graphite pencil and suggested the young man scribble it across a blank piece of paper until it was completely black. Then he handed him an eraser and asked him to transform it.



by rhea maze

Art therapy is a technique

that uses the creative process to treat a wide range of mental health issues in people of all ages. According to the American Journal of Public Health, there is growing evidence that art-based interventions, including the artwork shown on this page, are effective in reducing adverse psychological and physiological outcomes, and

that they can have significantly positive effects

on health.

"Art therapy uses art media, the creative process, and the resulting artwork as a therapeutic and healing process," says Jennifer Amaral-Kunze, a licensed professional counselor at Beyond the Mirror Counseling and Wellness in Fort Collins, a center that has been using art therapy with clients of all ages for over a decade. "Through art therapy, clients can explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior, develop social skills, reduce anxiety, and increase their self-esteem."

For example, Amaral-Kunze may ask a teen experiencing family conflict to create a family sculpture. Afterwards, she and the client work together to make meaning from the art, such as by noticing the differences in the size and position of each family member. "Talking through the art creates insights that wouldn't normally be noticed otherwise," Amaral-Kunze says. "It also allows clients to identify feelings and work through scary emotions in a gentler way. Talking about the art feels so much

rally during the art process that wouldn't necessarily come out through sitting down and asking pointed questions.

Similar to art therapy, in the fly fishing therapy that Schultz practices, metaphors often show up during the process, giving clients

> new ways to look at their issues, and creating a space where they are more comfortable talking about them. Clients are often more relaxed during art and fly fishing therapy sessions because they're also having fun. "When they're involved in a task, rather than being knee deep in their issues, it provides an observation point, and an opportunity to lighten or intensify things as needed," Schultz says. "Sometimes, a client just needs to slow down and take their time with something or be provided with a new challenge, which creates a dynamic where they can then reflect."

safer than talking about

their mother drinking, their

father leaving, the loss of a

loved one, or a rape. Talk-

Schultz, who provides

counseling, art therapy, and experiential fly fish-

ing therapy for people of

all ages as well as at-risk

youth, agrees and says that

difficult to simply sit down and talk about their issues.

Having another activity to

focus on can melt away that

stress while also enhancing

the relationship between

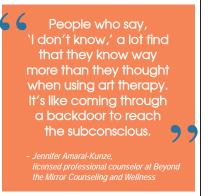
the client and counselor. Things often come up natu-

many of his clients find it

ing about art is safe."

For the young man in the correctional facility, scribbling the blank page black allowed him to release his rage. Schultz then handed

him the eraser as a way of asking, 'what are you going to do now to turn it around?' With the eraser, he created a beautiful landscape depicting a rainy day mountain scene. "He left the session a completely different kid," Schultz said. "He came in enraged and left covered in graphite, but also very relaxed, in a state of mind where he knew he would be alright and could move forward, rather than feeling like everything was out of control."





Information and Resources

The American Art Therapy Association: arttherapy.org

The Art Therapy Association of Colorado: arttherapycolorado.org

Connections staff can help locate a certified art therapist in the community to fit specific needs: mentalhealthconnections.org or 970-221-5551.

Healthinfosource.com is a website where you can search for Fort Collins-area therapists.

TYPES OF CARE

Next you should consider these questions: What types of care are available as my abilities decline? Where do I go to get care?

Here's a breakdown:

Family care—Family members can be trained to provide care in the home, from basic hygiene to giving medications. Questions to consider: Will your family be available? Will relatives be able to provide the level of care you need?

Home health care—Visiting nurses and home health aides provide short- and long-term care in your home following hospital stays, surgeries, injuries, illness, or as health declines. Personal care aides help people with disabilities, chronic illnesses, or cognitive impairment by assisting in their daily living activities.

Assisted living care—Assisted living residences allow you to have your own apartment while staff provides meals and supervision or assistance with activities of daily living; coordination of services by outside health-care providers or nursing care; transportation;

and monitoring of residents' activities to help ensure their health, safety, and well-being. Higher levels of care may cost more or require you to move into a skilled nursing facility.

Skilled nursing facility (SNF) care—An SNF provides around-the-clock, expert nursing care and daily assistance. Staff includes certified nursing assistants, registered nurses, and physical, speech, and occupational therapists. Sometimes referred to as skilled nursing homes, they serve long-term residents and also offer short-term care for patients who live independently but may need extra help and therapy while recovering from an injury, surgery, or illness.

Palliative care—Palliative medicine is a medical specialty that focuses on relief of suffering or distressing symptoms due to a serious or chronic illness. Palliative care teams work with patients to determine their goals for care and communicate with the medical team to help improve quality of life for patients and their family members, explains Lisabeth Paradise, a family nurse practitioner and a member of

the UCHealth Northern Colorado Palliative Care team. Hospital social workers and the hospital chaplain are also on the team to ensure a person's physical, emotional, and spiritual needs are addressed.

Palliative care can be started at any stage of a chronic or serious illness, not only near the end of life. It may include medication for nausea, pain relief, or breathing issues, and can be provided alongside treatments that are curing a condition. Palliative care is given at a hospital, outpatient clinic, nursing home, or wherever you live.

Hospice care—A medical benefit provided only at the end of life for those who prefer a more natural, peaceful death. Hospice nurses and aides provide comfort and relief from pain in your final days. Before receiving hospice care, a physician and hospice medical director must decide that you are likely to have 6 months or less to live if a terminal illness runs its normal course. You then sign a consent form agreeing to forego aggressive curative treatment and life-sustaining measures.

Hospice care can be provided in many different settings including an inpatient hospice home, nursing facility, assisted living apartment, or your own home. If treatment is given in your own home, remember that it does not replace full-time assistance since hospice caregivers handle specialized tasks in a set period of time.

"Hospice and palliative care should be in your advance care planning because these approaches to care begin with a physician's order and there are still some doctors who don't understand hospice requirements, or might not think about it until a patient is knocking on death's door," says Nate Lamkin, president of Pathways, a local nonprofit that offers palliative care, hospice care, and grief counseling.

PAYING FOR IT

Now let's look at the bottom line: Who pays for what? How can I prepare financially?

Many people falsely assume that Medicare will pay for all of their care at the end of their life. This is not true.

Medicare does provide some health-care insurance for most Americans after the age of 65, although most people pay monthly premiums for much of the insurance, as well as copays for care. For most people on Medicare due to their age, rather than a disability, it's a good bet that Medicare will NOT cover all the costs of the long-term care you need. Saving money for end-of-life care is an important part of everyone's financial plan, and starting early makes a big difference.

For those who have mostly run out of money and assets at the end of their life, Medicaid may cover their long-term care, although not every facility accepts Medicaid, so it can be difficult to find a care center.

Purchasing a long-term care (LTC) insurance policy may help pay for long-term care such as home health care, assisted living, and skilled nursing homes. But don't assume you can 'wait until later' and still purchase long-term care policies; you may be denied if you have a pre-existing condition. Policies differ greatly in terms of whether they protect for inflation, what they cover, how much they pay, and how long the stay must be before benefits kick in. Financial advisors with LTC expertise can help you decide what type of long-term care insurance might make sense for you.





Take the next step

National Healthcare Decisions Week is April 16–22. Find information on the importance of advance care planning at **nhdd.org**.

The Larimer Advance Care Planning Team can guide anyone, 18 and older, in considering your options so you can make informed decisions about end-of-life care that represents your values and what is important to you—at no cost. For more information or to make a contribution, go to larimeradvancecare.org or call 970-482-1909.

OTHER RESOURCES:

- Hospice provider comparisons are now available at medicare.gov/hospicecompare
- Learn more about Medicare coverage for nursing home care at medicare.gov/what-medicare-covers/
- Learn more about long-term care insurance at colorado.gov/pacific/ltcpartnership/ ltc-frequently-asked-questions



Election cancelled; two new members join board of directors

The Health District of Northern Larimer County cancelled its May 8 board of directors election after receiving enough candidates to fill the available seats. Three people declared their candidacy, including one incumbent who was running for re-election and two newcomers running for open seats.

Michael D. Liggett, 67, is an attorney and partner in the law firm Liggett, Johnson and Goodman in Fort Collins. First elected to the Health District board in 2014, he currently serves as its president. He is a graduate of Colorado State University and received his law degree from the University of Seattle.

Molly Gutilla, 39, is an assistant professor at the Colorado School of Public Health at Colorado State







Molly Gutilla

Joseph W. Prows

University. She earned B.S. and M.S. degrees in exercise physiology from The Ohio State University and holds a doctorate degree in public health from the University of Colorado, Denver, with a focus on epidemiology.

Dr. Joseph W. Prows, 36, of Fort Collins, is a family medicine physician with Associates in Family Medicine in Fort Collins. He graduated in 2009 from Tulane University School of Medicine and also holds a master's degree in public health, specializing in epidemiology.

All three live in Fort Collins.



Local health statistics subject of new fact sheets

Did you know that 54 percent of Larimer County adults who report a mental health problem have put off getting mental health care due to cost in the past two years? Or that 23 percent reported chronic pain in the preceding six months? You can find these and other local health statistics in a series of new fact sheets based on the Health District's 2016 Community Health Survey.

Topics covered include Access to Care, Advance Care Planning, Alcohol, Driving Habits, Healthy Eating and Active Living, Marijuana, Mental Health, Oral Health, Pain, and Tobacco. View or download the fact sheets at healthdistrict.org/2016-community-health-assessment.

NextFifty supports Advance Care Planning in Larimer County

The NextFifty Initiative has awarded \$158,850 to the Larimer Advance Care Planning (ACP) Team to help make a significant difference in how people receive health care in their later years and at the end of life. "We are excited to be able to continue the program with their support because there is still so much work to be done," says Karen Spink, assistant director of the Health District.

Roughly 43 percent of Larimer County adults say they have completed their advance care directives and of those, only 44 percent had discussed their wishes with their health care providers, according to the 2017 Colorado Health Access Survey.

The collaborative efforts funded by the grant will help raise awareness of advance care planning, provide support to individuals completing their directives, and help local health-care organizations develop sustainable practices. The grant will also fund a new Patient Passport program, so patients can document and communicate essential health information, care preferences, and advance care directives.

Out of Medicaid dental benefits? Family Dental Clinic offers sliding fees

Health District residents who have exhausted their annual dental benefit from Health First Colorado (Medicaid) can find relief at the Family Dental Clinic. The clinic, which is open to district residents who meet income guidelines and do not have commercial dental insurance, offers sliding fees to those with incomes at or below 250 percent of the federal poverty level. This includes residents with dental coverage from Health First Colorado, which offers a \$1000 benefit for adults that expires June 30, then resets July 1. For more information, call the Family Dental Clinic at 970-416-5331 or visit healthdistrict.org/dental.

Woodward Governor Trust funds critical dental care

The Health District Family Dental Clinic received an award from the Woodward Governor Trust to support specialized dental care for individuals with intellectual and developmental disabilities who are unable to receive care in a traditional dental office setting. The grant funds will help the clinic connect these Larimer County residents with local volunteer dental providers who offer affordable care under general anesthesia. For more information or to request these services, call the Family Dental Clinic at 970-416-5331.

classes, screenings, and services

cholesterol tests

Find out your total cholesterol, HDL, LDL, triglycerides, and blood glucose numbers; learn what they mean and what to do about them.

Health District residents who have never received our test are eligible to receive their first test for free. Health District boundaries include Fort Collins, Laporte, Wellington, Red Feather Lakes, Livermore, Bellvue, and Timnath. Cost for all others is \$15. Sliding fees available.

Cholesterol tests are 8:15-10:30 a.m. **Appointments required**; call 970-224-5209.

April

Thurs., April 5 – Spirit of Joy Church, 4501 S. Lemay **Thurs., April 12** – Health District, 120 Bristlecone

Thurs., April 19 – Senior Center, 1200 Raintree Tues., April 24 – Harmony Library, 4616 S. Shields

Mav

Tues., May 1 – Senior Center, 1200 Raintree Thurs., May 3 – Spirit of Joy Church, 4501 S. Lemay Thurs., May 17 – Senior Center, 1200 Raintree

June

Tues., June 5 – Senior Center, 1200 Raintree Thurs., June 7 – Spirit of Joy Church, 4501 S. Lemay Thurs., June 14 – Health District, 120 Bristlecone Tues., June 19 – Harmony Library, 4616 S. Shields Thurs., June 21 – Senior Center, 1200 Raintree

An 8-hour fast is recommended for best results; medications and water are permitted. Visit **healthdistrict.org/heart** for more info.

BLOOD PRESSURE CHECKS OFFERED MONTHLY!

Free, 5-10 minute walk-in blood pressure reading and consultation with a registered nurse. The consultation includes discussion and materials on how to keep your blood pressure where it needs to be, how to lower your risk for heart attack and stroke, and follow-up suggestions.

Checks are the second Monday of each month, 10 a.m.-12 p.m. at the Fort Collins Senior Center, 1200 Raintree. No appointment necessary.

Visit healthdistrict.org/heart for more information.



thinking of quitting tobacco?

Hundreds of Fort Collins residents have quit by using our Quit Tobacco Program and YOU CAN, TOO!



Call today:

970-224-5209

INDIVIDUAL COUPLES/BUDDIES GROUP SESSIONS

- Once enrolled, free nicotine patches / gum / lozenges
- Sliding fees for those who qualify
- > First appointment free
- Positive, supportive approach

healthdistrict.org/quitsmoking

free mental health classes

April

Wed., April 4 – Connections Mental Health Speaker Series "Couples Communication"

5:30 p.m. - 6:30 p.m., Health District, 120 Bristlecone Free dinner. Contact Brian at blothrop@healthdistrict.org to RSVP.

Wed., April 11 – Connections Mental Health Speaker Series "Trauma"

5:30 p.m. - 6:30 p.m., Health District, 120 Bristlecone Free dinner. Contact Brian at blothrop@healthdistrict.org to RSVP.

Wed., April 18 - Mental Health First Aid Training

8 a.m. - 5 p.m., Health District, 120 Bristlecone Contact Emily at eleetham@healthdistrict.org to register.

Wed., April 18 – Connections Mental Health Speaker Series "QPR – Question, Persuade, and Refer"

5:30 p.m. - 6:30 p.m., Health District, 120 Bristlecone Free dinner. Contact Brian at blothrop@healthdistrict.org to RSVP.

May

Fri., May 11 – Youth Mental Health First Aid Training 8 a.m. - 5 p.m., Health District, 120 Bristlecone Contact Emily at eleetham@healthdistrict.org to register.

Wed., May 16 – QPR – Question, Persuade, and Refer, a free suicide prevention training program taught by Connections staff

12 p.m. - 1 p.m., Health District, 120 Bristlecone
Snacks provided. Feel free to bring a sack lunch.
Contact Emily at eleetham@healthdistrict.org to register.

June

Tues., June 19 – QPR – Question, Persuade, and Refer, a free suicide prevention training program taught by Connections staff 5:30 p.m. - 6:30 p.m., Health District, 120 Bristlecone Snacks provided. Feel free to bring a sack dinner. Contact Emily at eleetham@healthdistrict.org to register.





Call to see if you qualify! 970-416-5331

healthdistrict.org/dental

Patients must live in the Health District, have no private dental insurance, and meet income guidelines.