Elkins Rehabilitation & Care Center November 2026 Newsletter

SPOTLIGHT OF THE MONTH



Regina McGraw

Regina was born in Clarksburg, WV to Eugene and Dorothy Channell. The family moved to Elkins when Regina was approximately two years of age. She went to school in Elkins and graduated from Elkins High in 1978. She has two sisters (one deceased) and three brothers (two deceased). Her siblings, Brenda Coffman and Gary Channell both live in Elkins. She was married to John McGraw (deceased) in the 80's. She has no children, except a stepson, Dewey Lee Mann. Her baby is Carly—Jack Russell Terrier. She has worked at ERCC, both in the old building and current. She has also worked at Davis Memorial and Home Community Care. She is a C.N.A. by trade. She likes different crafts—crocheting, plastic canvas, knitting, and stated, "I will try anything." She is very talented with any crafts she carries out. She did many Christmas decorations and individuals were always asking her to make things for them. She previously had wreaths she had made in the ERCC gift shop for sale. Congratulation, Regina on being the Spotlight of the Month for November!



Evelyn Conley

Mary Demotto

Janice Dugan

Clyde Gibson

Thomas Miller

Ramona Pack

Pamela Standridge

Esher Stiles

Mabel Weese











SPOOKY
TASTE
TEST.
CHECK OUT

THE
VIDEOS ON
FACEBOOK!







Autumn welcomes them into the

"Spooky Taste Test" room













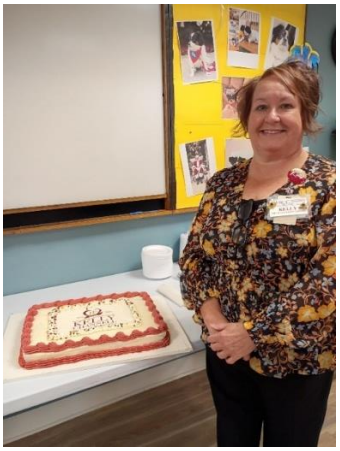




Doesn't look like anything was good……..yuk

HAPPY RETIREMENT

One of our staff members retired on September 30. Kelly Channell, RN/DSD/IP has been with us for 11 years. She received a cake and gifts during her retirement party. We will surely miss her, but happy for her. May she enjoy the next chapter in her life's journey.
However, we welcome Misty Bolyard, RN/DSD/IP to our facility to fulfill her position.













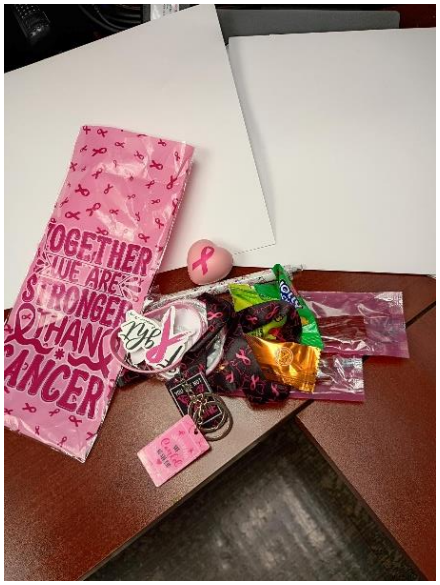
Staff dressed in Pink to observe Breast Cancer day on Tuesday, October 13. Misty, RN, Director of Staff/Infection Control gave everyone goodie bag. We observe October as Breast Cancer Month.





Together in Pink We can make a difference



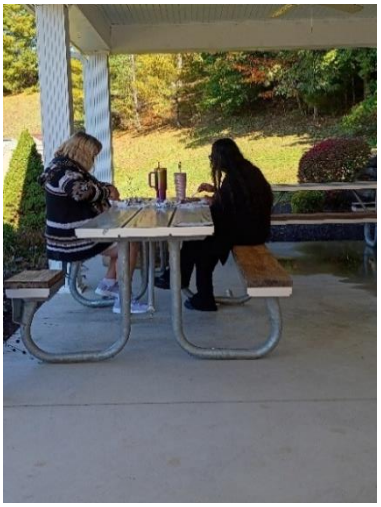




Our administrator, Tara Shaver, shows us in so many ways her appreciation for what we do. We had a good survey and in return, she gave us a steak/chicken luncheon with all the trimmings to show how much she appreciated the hard work put into each day. We love working at ERCC!!





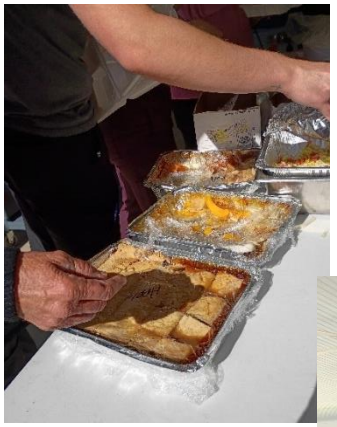


























If you have Facebook….Be sure to catch the video on our page. No Bees wanted! ☺























Breast Cancer Fact Sheet for Patients and caregivers

Breast cancer can start in any part of one or both breasts. For women in the US, breast cancer is the most common cancer (after skin cancer) and the second-leading cause of cancer death (after lung cancer).

Risk Factors

Risk factors for breast cancer that you cannot change include:

Sex: Being born female is one of the strongest risk factors for breast cancer. Males can also get breast cancer, but it is much more common in females.

Age: As a person gets older, their risk of breast cancer goes up. Most breast cancers are found in women age 55 or older.

Personal or family history: Someone who has had breast cancer in the past or has a parent, sibling, or child with breast cancer has a higher risk of getting it. Having more than one close blood relative increases the risk even more. However, it's important to know that most people with breast cancer don't have a close blood relative with the disease.

Inheriting gene changes: Certain gene changes (most commonly in *BRCAl* and *BRCA2* genes) can create a higher risk for breast cancer.

Starting menstruation early or having late menopause: There may be a higher risk due to longer exposure to the hormones estrogen and progesterone.

Having dense breast tissue: People whose breasts appear dense on mammograms have a higher risk of breast cancer. Dense breast tissue can also make it harder to see cancers on mammograms.

Having radiation to the chest: Women who were treated with radiation therapy to the chest before age 30 have a much higher risk for breast cancer.

Some benign breast conditions: Certain noncancerous breast conditions can increase the risk of getting breast cancer.

Lifestyle-related risk factors for breast cancer:

- Drinking alcohol
- Weight gain after age 18 or having excess body weight (for postmenopausal breast cancer)
- Not being physically active
- Using menopausal hormone therapy with estrogen and progesterone
- Never having children or having a first child after age 30
- Certain types of birth control

Prevention

There is no sure way to prevent breast cancer, and some risk factors can't be changed, such as being born female, age, personal or family history of the disease, and inherited gene changes. But there are things a person can do that can help lower the risk for breast cancer. Avoiding or limiting alcohol, getting regular physical activity, and getting to and staying at a healthy weight might help lower risk.

If you have a family history or inherited gene changes, your health care provider may have you see a genetic counselor or recommend certain medicines or procedures. They can help you better understand your risks and make informed decisions about your care.



Screening and Early Detection

Screening is a process used to look for cancer in people who have no symptoms. The earlier breast cancer is found, the better the chances for successful treatment. The American Cancer Society recommends the following for finding breast cancer early in women at average risk:

- **Women ages 40 to 44** should have the option to start yearly breast cancer screening with a mammogram (x-ray of the breast).
- **Women ages 45 to 54** should get a mammogram every year.
- **Women 55 and older** can switch to a mammogram every 2 years, or can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live at least 10 more years.
- Annual MRIs and screening mammograms are recommended for certain women at high risk of breast cancer. Talk to a health care provider for more information.
- If you are getting a mammogram for breast cancer screening, you should understand what to expect and what the test can and cannot do. Mammograms can miss cancer (called a false-negative) or look abnormal even though it's notcancer (called a false-positive). Additional tests can be costly and stressful.

Signs and symptoms

The most common sign of breast cancer is a new lump or mass. While most lumps or masses are not cancer, it is important to have a health care provider check them. Other signs of breast cancer can include swelling of all or part of a breast (even if no lump is felt); skin dimpling (sometimes

looking like an orange peel); nipple pain or retraction (turning inward); nipple discharge (other than breast milk); nipple or breast skin that is red, dry, flaking, or thickened; or swollen lymph nodes under the arm or near the collar bone. Have any breast changes checked by a health care provider.

To learn more about breast cancer, visit the American Cancer Society website at **cancer.org/breastcancer** or call us at **1-800-227-2345.** We're here when you need us.



Treatment

Treatment for breast cancer depends on the type and stage (how big the cancer is and if it has spread) and the results of testing that might be done on the tumor, as well as the person's age, other health problems, and personal choices. If you have breast cancer, talk to your doctor about the best treatment for you.

Living With Breast Cancer

Breast cancer affects a person's quality of life. Physical, social, mental health, spiritual, and money issues can come up at any time.

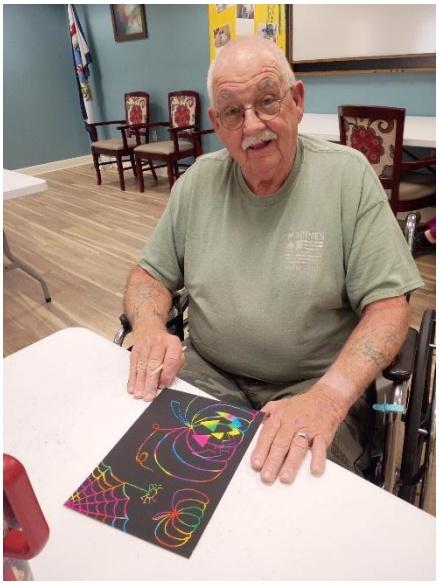
People with breast cancer may be helped by palliative care at any time. Palliative care focuses on helping manage symptoms, addressing issues, and improving quality of life.

Good communication between a person with cancer and the health care team is important and involves:

- Asking and answering questions
- Working together to set care goals
- Making shared decisions
- Managing side effects and other issues
- Scheduling follow-up tests and care











WE HAVE SO MUCH FUN WHEN OLD BRICK COMES.

CRAFTS TO MAKE AND CRAFTS TO TAKE.

WE ARE BLESSED TO HAVE THEM COME TO OUR FACILITY.

OUR RESIDENTS LOVE WHEN THEY COME









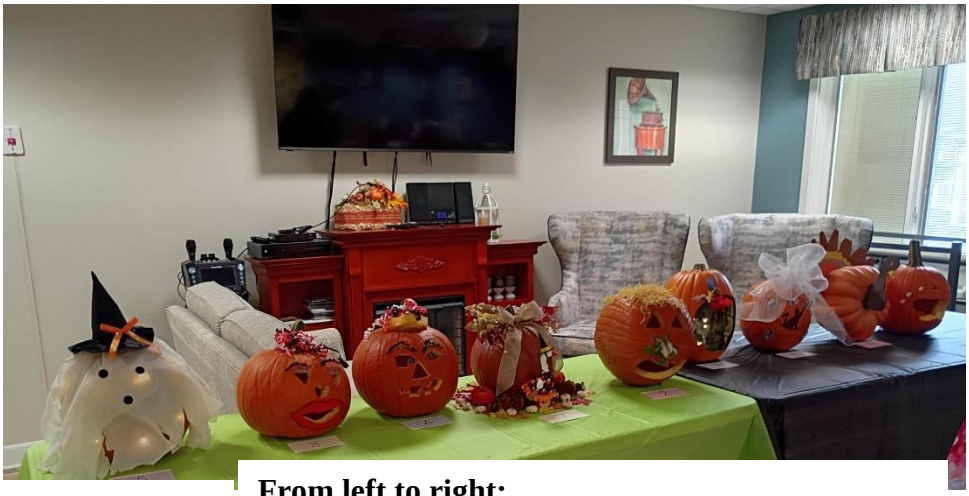


Decorated tree in FMP room. What shall we name her?





Riddle for the month. Answer found in newsletter …..somewhere



From left to right:
Crystal Scott, Activities #1, Activities #2, Autumn Elza, Tory Stewart, Teresa Simmons, Kim Cutright, and Kaitlynn Watts



Pumpkin contest. Winners were: Crystal Scott 1st place; Autumn Elza 2nd place and Teresa Simmons, 3rd place

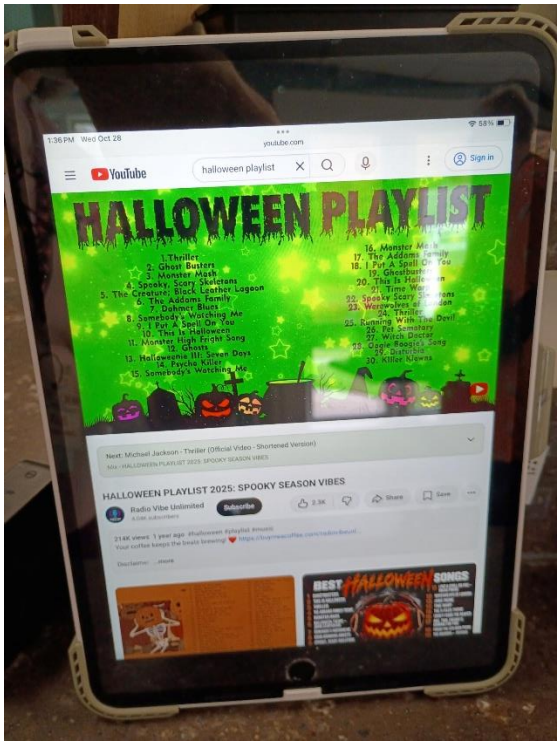






Luncheon was a BIG HIT!

They are afraid they will fly off the handle!!







RESIDENTS BIRTHDAY AND HALLOWEEN PARTY.





























Our staff knows how to dress up and have fun. Just look at all these creations!









ERCC WISHES EVERYONE A HAPPY THANKSGIVING!!



