



SOUTH SHORE SENIOR News

AND METRO WEST

For Boomers and Beyond

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Love Finds a Way

Senior communities offer creative ways for loved ones to connect during COVID-19 quarantine

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Rita LaRosa Loud offers practical advice and action you can take now to alleviate the agony of the feet... Page 6

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**SENIOR SERVICES
DIRECTORY**
ON PAGE 8

Six questions to ask if a loved one is in a nursing home

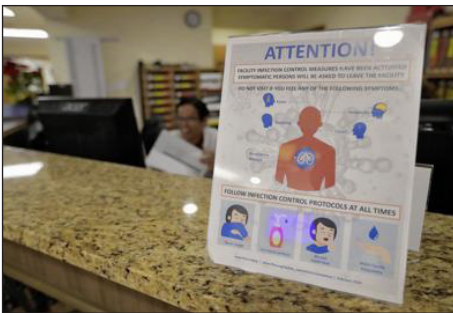


By Mike Festa
State Director, AARP Massachusetts

If you have a spouse, sibling, parent or other loved one in a nursing home, you may be worried about their safety and well-being because of the coronavirus pandemic. AARP consulted with top experts to develop these six key questions to ask the nursing home.

- **Has anyone in the nursing home tested positive for COVID-19?** This includes residents, as well as staff or vendors, who may have been in the nursing home.
- **What is the nursing home doing to prevent**

infections? How are nursing home staff members being screened for COVID-19, especially when they leave and reenter the home? What precautions are in place for residents who are not in private rooms? Does nursing home staff have the personal protective equipment (PPE)—like masks, face shields, gowns, gloves—that they need



to stay safe and keep their patients safe? Has nursing home staff been given specific training on how to use this personal protective equipment? If not, what is the plan to obtain PPE?

- **What is the nursing home doing to help residents stay connected with their families or other loved ones during this time?** Does the nursing home help residents call their loved ones by phone or video call? Will the nursing home set up a regular schedule for you to speak with your loved one?
- **What is the plan for the nursing home to communicate important information to residents and families on a regular basis?** Will the nursing home be contacting you by phone or email, and when?
- **Is the nursing home currently at full staffing levels for nurses, aides and other workers?** What is the plan to make sure the needs of nursing home residents are met – bathing, meals, medication management, social engagement – if the nursing home has staffing shortages?

Massachusetts has established a hotline to help families get information about their loved ones' care at nursing homes, which have been hit especially hard by the coronavirus pandemic. If you're concerned about the safety and well-being of a spouse, parent or other loved one who lives in a nursing home, call the family resource number at 617-660-5399. ∞



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Elder Law & Estate Planning

The Hardest Question: Who Do You Want to Make YOUR End-of-Life Decisions?



By Patrick J. Kelleher, Esq.
ElderLawCare.com

HANOVER AND QUINCY – In this Covid-19 epidemic, a wrenching question especially demands an answer: if you or someone you love is taken down into life-threatening illness, how far would you want extreme life-prolonging measures to be tried? I previously wrote about this and coined end-of-life incapacity planning as the “Big 6 Disability Planning” that you can read more about at www.elderlawcare.com under the blog

tab. You can also read about the “Big 6” in my book, “How To Avoid the Four-Headed Monster of Estate Planning and Elder Law,” on Amazon. For those of us who are particularly vulnerable—seniors, individuals with compromised immune systems, those who are already struggling with medical conditions—this question is particularly stark. Many people are familiar with DNR orders—“Do not resuscitate.” These are intended for cardiac arrest. The threats posed by the current virus, though, more often implicate breathing problems. The longer time spent on a ventilator, the greater the chances of permanent damage, disability or death.

Many are dying alone, without their loved ones present. The *New York Times* recently reported on a particularly heartbreaking case. Most people over 60 with a serious illness say they would prefer to be kept in comfort at the end, even if that care shortens life. But where to draw the line? How much time alive would you be willing to sacrifice to decline aggressive treatment and possibly die sooner? The need to provide at least some answers is important not just for you—clinicians and caregivers need guidance, too.

A 2017 study showed that approximately two-thirds of Americans had neglected to provide prior guidance by creating advance health-care directives, such as health care powers of attorney and living wills. Back then, most of us could not have imagined being in an epidemic like the one now. Even if you or your loved ones have already done the responsible thing and created advance directives, now is the time to review those documents to make sure they reflect what you want under current conditions.

Health-care providers are ethically obligated to do everything feasible to keep us alive. If we have no advance directives in place, the system will take over, and families can end up in long-lasting anguish for having had to be the ones to make the final call. Don't let that happen. Think through the question for yourself and talk with a person whom you trust to make

that decision for you, if need be. Call us for your advance health-care directives – and may you and yours not need them for a good long while! To learn more, watch our next free educational virtual, on-demand estate planning and elder law webinar at www.elderlawcare.com. Contact our friendly elder law care team at 781-871-7526 or email pat@elderlawcare.com to register for the next webinar, as we fill up quickly. Click the link below to watch our new on-demand webinar to get your \$500 coupon because it is available for a limited time. <https://elder-law-care.bambiz.net/auto-webinar-registration1584444673558>

About the Author: Patrick Kelleher is an author and Estate Planning & Elder Law attorney and founder of the Elder Law Care Learning center in Hanover, Massachusetts. Patrick has been teaching free educational workshops for over 10 years at his learning center and in surrounding communities. Learn more at elderlawcare.com or follow Patrick Kelleher on Facebook because you will learn a lot! His offices are in Hanover and Quincy. You can find Patrick's new book “How to Avoid the Four-Headed Monster” of Estate Planning & Elder Law on Amazon at <https://www.amazon.com/How-Avoid-Four-Head-Monster-Financial-ebook/dp/B084MB96SK>

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Aging with Sass & Class

By Loretta LaRoche

I remember when I was only about six, my mother took me to Radio City Music Hall, which, as you probably know, is an enormous show palace and movie theater in New York City. The movie playing that day was Disney’s Dumbo. When the show ended and all the kids started streaming out of the theater, I was miserable that this glorious experience had come to an end. So I ran to the front of the theater, in front of probably a couple of thousand people, and started yelling at the screen, “Dumbo, Dumbo, take me with you! Take me with you!” And all the people started to laugh, which is just what I hoped would happen. I felt the need to perform and make people laugh at a very young age. I was and am a “ham.”

What truly makes us feel our most authentic self and gives meaning to our lives is not always apparent. My childhood was often difficult, but I was able to navigate it because of my humor, zaniness, and my ability to see pain and suffering in others. When I saw people smile at my antics, it would help to reduce the anxiety I often felt from living in a volatile environment.

When I look back on my life, it’s clear that much of what I share with others about how to handle stress comes from how I was able to find the “bless in the mess” with humor. It is not possible to get everyone to engage in this process. We are all wired differently, and many situations in life are just not funny! Our current situation does not give us much pause to laugh, but there are always times when we can glimpse a moment of absurdity, which can lead to a good chuckle.

However, in our everyday life, we can elicit more giggles and guffaws at the petty annoyances that we identify as “World War.” Spilled milk or a wet towel that’s left on a bed is not analogous to a mugging. Unfortunately, much of how we react is embedded in our brains. The way we respond is similar to Bill Murray’s character in the movie Groundhog Day. We wake up and our lives become mirror images of the previous day. And now our lives are being directed in a similar fashion to that movie because of a virus.

We can opt to continue reacting in the same old ways, but we will continue to get the same outcome. Take some time to examine your thinking to see if it really serves you well. Keep in mind that you become what you think about. That could continue to get the same old outcome. The ancient Persian poet Rumi said, “Wake, wake up, you have been asleep a thousand years!”

I have been fortunate to use my humor to reduce everyday stress; you may opt for another modality. Maybe you are able to use patience, compassion, or the ability to say, “What will it all mean in a hundred years?”

About the Author: Loretta LaRoche is an internationally acclaimed stress expert, humorist, author, speaker, and star of seven one-woman television specials airing on 80 PBS stations across the country. She has spoken internationally to widely diverse clients such as NASA, The New York Times, Microsoft, and a host of other Fortune 500 companies, hospitals and organizations. She has shared the stage with former Presidents Bill Clinton and George Bush, Arianna Huffington, Anthony Robbins, Gloria Steinem, Laura Bush, Mia Farrow and more, before thousands of participants. She is author of seven books, including “Life is Short, Wear Your Party Pants.” Her career path has also included many one-woman shows across the country, and her passion for singing has led her to record and produce a jazz album. Recently, Loretta was on a stadium tour, The Power of Success, in Canada with Tony Robbins. She believes and lives her message, “Life is not a stress rehearsal!” Learn more at her website: www.LorettaLaRoche.com. ∞



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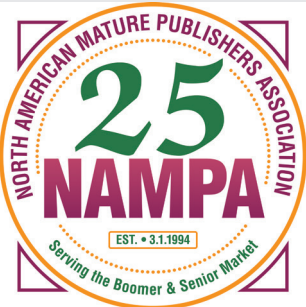
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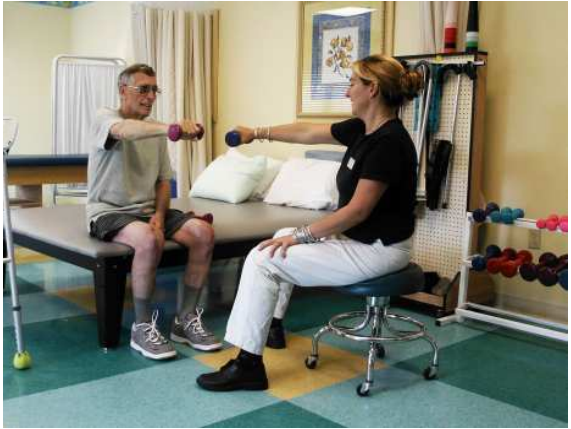
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The Agony of the Feet



By Rita La Rosa Loud, B.S.

QUINCY – The agonizing pain in Mary’s foot woke her up one morning, and as the days went on, it got progressively worse. Mary was worried she may have hurt her arch while training for a 10K along a concrete beach walkway. Would she be able to continue her physical training, she wondered.



It’s not surprising that Mary’s foot pain and stiffness could prevent her, or anyone going through this, from giving up on exercising. The most common foot complaint many people suffer from, and what Mary was likely experiencing, is heel pain in the rear arch area of her foot, caused by *plantar fasciitis*. More than 3 million Americans suffer with this condition yearly.

There are numerous reasons one can end up with this ailment. It tends to occur in those who spend a lot of time on their feet, such as nurses, doctors, teachers, mail carriers, supermarket cashiers, and people, in general, who work at jobs standing all day. It also happens to exercise enthusiasts, like Mary, who spend a lot of time walking or running on hard surfaces, and athletes who are involved in contact sports. Wearing shoes that do not provide adequate support may also contribute to foot discomfort, and those with flat feet or high arches are more susceptible.

Surprisingly, the lower leg is where the source of this pain is actually generated. Tight calf muscles, called *gastrocnemius* muscles that connect to the *Achilles tendon*, could be responsible for Mary’s arch pain. There are other muscles, besides the calf, that are located in the lower leg that can stress the fascia. The *soleus* muscle, for one, if it is tight, can also cause sore arches. Like the *gastrocnemius*, it too merges into the *Achilles tendon*. Another muscle that inserts into the arch is the *tibialis anterior*. Not only does it cause stress and strain, but it can also lead to shin splints, which are quite painful. Then there are the *peroneals*, and when they become tight, this can also result in chronic arch pain.

If you are experiencing stabbing pain, tenderness, or swelling in your heel, similar to Mary’s distress, meet with an orthopedist or a podiatrist to determine if you require medical treatment or physical therapy sessions for your arch and heel cord. More than 98 percent of people get better with treatment, and 90 percent significantly improve within two to three months of initial treatment.

Julie Donnelly, LMT Pain Relief Expert and Deep Muscle Massage Therapist, suggests the best approach to relieve plantar fasciitis pain is a muscle release technique performed prior to stretching, which unties the “knot” in the shortened muscle(s). This treatment for the major muscles involved in foot pain can be found in the book, *Treat Yourself to Pain-Free Living*. Another resource regarding symptoms and causes of plantar fasciitis is the *American Academy of Orthopedic Surgeons*.

Here are a few strengthening and stretching exercises that assist in moving your feet and may alleviate the actual causes of plantar fasciitis pain. In fact, the same exercises to relieve arch or heel cord pain can help to prevent fasciitis pain. It is imperative to keep these muscles flexible, but also to build strength in the muscles that are responsible for this condition

that may, over time, reduce fasciitis pain.

The following seven exercises can be done anywhere.

• Arch Strengthening Towel Exercise

Perform this exercise in a sitting position in bare feet. Place a small hand towel on the floor. With both feet on the floor, start with your affected foot, and with your toes, grab the towel and pull it towards you. Perform this exercise three to five times. Repeat with your unaffected foot for preventive purposes.

• Manual Toe Pulls

Remain seated in bare feet. Cross the leg of the affected foot over the other. With your hands, grasp all of your toes and gently pull them toward you. You should feel a mild stretch in the arch of your foot. Hold this stretch for 20-30 seconds (no bouncing). Breathe throughout the stretch. Perform one or two more repetitions. Repeat with the opposite foot.

• Calf Raises

This will increase strength in feet and calf muscles.

Stand barefoot with both feet flat on the floor. Hold onto the back of a sturdy chair for support. Rise up onto your toes and tighten your calf muscles. Pause for three to five seconds, then slowly lower your heels back down. Perform 10-15 repetitions.

• Wall Ankle and Calf Stretch

The Achilles tendon and gastrocnemius muscles benefit from relaxing tight calf muscles.

Stand facing the wall, legs staggered, with arms outstretched against the wall. Keep your chest lifted, shoulders down, and hips squared. Bend your front leg and extend the back leg behind you, heel flat. Press your hip forward until you feel a stretch in the calf. Hold the stretch for 20-30 seconds (no bouncing). Breathe throughout. Repeat with the opposite leg.

• Wall Calf Stretch

This will help realign and ease heel pain.

Stand facing the wall. With your heel of the affected foot flat, place the ball of your foot against the wall. Gently press your hips toward the wall. You should feel a stretch in your calf. Hold this stretch for 20-30 seconds then release your hips. Repeat with your other foot.

• Seated Towel Calf Stretch

Targets muscles in your feet and calf (tibialis anterior, Achilles tendon, plantar fascia)

Sit on the floor with bare feet. Extend the leg of the affected foot, keeping the other leg slightly bent for support. Use a towel or elastic band and wrap it around the flexed foot of the extended leg. Grasp the towel or elastic band with both hands, and gently pull your foot towards you, keeping your knee straight. Hold this stretch for 20-30 seconds. Perform one or two more repetitions. Repeat with the opposite leg.

• Foot Roller Foot Roll

Foot roller will support and massage both sides of arches.

Stand or sit with bare feet. Put the *roller* beneath the heel of the affected foot. Roll your foot back and forth, first to the ball of your foot then back to your heel for 5-10 repetitions. Repeat with the other foot.

Relieving plantar fasciitis chronic pain can be challenging and very frustrating for many who struggle with this condition. Fortunately, there are steps you can take to treat it naturally with a variety of effective stretching and strengthening exercises that can be done daily in the comfort of your home. However, should your heel pain worsen for any reason while performing these exercises, please stop and contact your doctor.

About the Author: Rita La Rosa Loud holds a B.S. in Exercise Physiology with additional education in Sports Medicine and Athletic Training. She is NASM Certified and has been actively involved in the fitness industry for over 35 years. She is also an author and writes fitness related articles for various fitness publications. Currently, she is a Fitness Researcher, who Co-Directs the Health & Fitness Center at Quincy College with Dr. Wayne L. Westcott. ∞

Real Estate Tips, Tricks and Secrets for Seniors

By Wendy Oleksiak
V.P. Compass Real Estate



Downsize

Life happens quickly. Your last move was in search of space, the bigger, the better! The next thing you know, your kids are grown and you’re left with a large house that’s more work than it seems to be worth. Here are some signs that it’s time to consider downsizing:

Need to Stretch the Budget – Your retirement savings are only going to go so far. If you need to stretch them, then it’s time to consider downsizing to stretch your housing budget.

House Upkeep Becomes Overwhelming – If the task of cleaning and maintaining your home is just too much work, and you don’t have the budget to hire outside help to do the job, then it’s time to consider downsizing.

Vacant Rooms – If you have multiple rooms in your home that you never use, then you don’t need them. They are costing you money to heat and maintain, and downsizing will fix this problem.

You Need a Different Layout – As we age, getting up and down stairs gets harder and

harder. If you have a multi-story home, you may need to downsize to a single-story home or apartment to ensure you can navigate your home successfully.

If you’re noticing any of these are true about you, then downsizing is going to be the right choice.

2. Sorting Belongings

Once you’ve made the decision to downsize, then it’s time to sort through your stuff. Moving to a smaller place means you can’t take everything with you, no matter how attached you are to your things.

To sort, you will need to sort your things into four basic categories: Keep, Store, Sell/Give, and Trash. Start with one area of your home at a time, even if it’s just one closet or one dresser, and go through each item, deciding which fits into which category.

Stumbling on what will make the trip? Utilize the questions below to prioritize.

- You never took it out of the box
- It doesn’t fit your style or needs
- You think “I might need this someday”
- It’s old or out of date
- You won’t use or read it again
- It’s an unfinished project
- It hasn’t been touched in more than a year and holds no sentimental value
- Furniture that won’t fit in your new space

Next, know which items should be stored. Some items you don’t need for day-to-day living, but need to keep for a variety of reasons. Items that are best stored include:

- Paperwork and documents
- Items with sentimental value
- Seasonal items you don’t have room to store at your new home

Finally, deciding what to keep. Make sure you don’t overlook:

- Sentimental items that you want to see regularly
- Items with high value that you wish to keep close
- Clothing items important for special occasions

Keep in mind that the more you get rid of before your move, the easier time you will have fitting everything into your new space.

More next month... in the meantime, it would be my pleasure to send my free moving guide to interested readers. Please reach out by phone or email. Home is certainly where the heart is, and I am dedicated offering the most personalized, sophisticated and confidential real estate support available.

About the Author: *As a former Registered Nurse, Wendy Oleksiak understands the importance of trust and accountability in creating a successful partnership. Honesty, hard work and professionalism paved the road to Wendy becoming the top selling agent at her previous firm. Wendy made the move to Compass to utilize cutting edge technology and state of the art marketing that provides her clients with the competitive advantage.*

Her extensive network within the real estate community ensures that her clients learn about off market properties, and enables her to get her buyers offers accepted and listings sold for the highest price with the best possible terms.

Wendy has lived on the South Shore for 20 years, raised two children and owned homes in the towns of Hingham, Scituate, Cohasset, and Duxbury. Her hobbies include oil painting, paddle boarding, boating, hiking, and enjoying the fabulous beaches in the area! You can reach Wendy at 781-267-0400. ∞

Virtual Parkinson’s Disease Symposium for Veterans, First Responders, and Caregivers

Rockland-based 110 Fitness, in collaboration with St. Elizabeth’s Medical Center’s Department of Neurology, will soon host its 2nd Annual Parkinson’s Disease Symposium for Veterans, First Responders, and Caregivers. Due to the Covid-19 pandemic, this year’s event, originally scheduled to take place in March at Dorchester’s Florian Hall, will be held virtually on the 110 Fitness YouTube Channel on Friday, June 19, from 8:30 a.m. to 12:00 p.m. ET.

The event is free and open to the public—all are welcome! RSVP by June 18 by visiting semc-parkinsonsevent.eventbrite.com or call Keith J. Ciccone, BS, LPN, Nurse Specialist, Department of Neurology, St. Elizabeth’s Medical Center at 617-789-3320.

The 2020 symposium will focus on the connection between Parkinson’s Disease, military service, first responders, and the frequency at which veterans and first responders are diagnosed with PD. Virtual attendees will be provided with an abundance of information, as well as resources available to help them live their best lives with Parkinson’s Disease.

The symposium will feature presentations by prominent members in the Parkinson’s healthcare community, as well as noteworthy members of the military. Speakers include: Francisco Urena, Secretary of Veterans Affairs for the Commonwealth of Massachusetts and U.S. Marine Corps veteran; Okeanis Vaou, M.D., Movement Disorder Specialist, Director, Movement Disorders and DBS, Steward Medical Group/St. Elizabeth’s Medical Center; Brett Miller, physical therapist, owner of 110 Fitness and retired US Army combat medic; Anna DePold Hohler, M.D., FAAN,

Movement Disorder Specialist, Chair, Steward Medical Group, St. Elizabeth’s Medical Center and former major at Madigan Army Medical Center, Tacoma, WA; Irene Piryatinsky, Ph.D. Clinical Neuropsychologist, St. Elizabeth’s Medical Center Affiliated Neuropsychological Assessment Clinic, and Chip Maury, retired US Navy diver and parachutist.

110 Fitness owner Brett Miller was looking forward to hosting the live symposium at Florian Hall in March, but he is excited about the possibility of reaching and helping thousands more people nationwide and globally through a virtual platform.

“It’s always nice to be in the room with attendees,” said Miller. “But the YouTube venue allows us to bring information and resources to a much larger group of people with PD who truly need what we’re presenting.”

Anna Hohler, M.D., Chair of the Neurology Department at St. Elizabeth’s Medical Center, and a former Army neurologist, provides care to numerous veterans and first responders who are dealing with the progressive nervous system disorder.

“Understanding the risk that these vets and first responders face from environmental toxins and trauma is crucial in mitigating their factors,” said Hohler. “We approach each patient in an individualized way to provide holistic care for their motor and non-motor symptoms.”

The 2nd Annual Parkinson’s Disease Symposium for Veterans, First Responders and Caregivers is currently sponsored by Medtronic, Allergan, Acadia Pharmaceutical, Boston Scientific, and GE Healthcare. ∞

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"THE WICKED SMART INVESTOR"

One Size Does Not Fit All

By Chris Hanson

HANOVER — Retirement planning is so complex it's tempting to use a product that implies simplification. Target date funds are one example. But there are things in life that should be highly suited to your personal preferences, like your financial plan or your wedding dress.

Filene's Basement's "Running of the Brides" was a cherished Boston tradition. Hundreds of prospective brides would cobble together a pack of trusted advisors, storm subterranean Downtown Crossing, and chase the bridal gown of long held dreams. With deep discounts, the price was always right, but the dress had to be the proper size, style, cut, train length, fabric, etc. It was no easy feat, so teams had to be strategic with matching shirts and secret hand signals. With a great deal of effort, and maybe some trading, the bride would score a captivating dress on a parsimonious budget.

Now imagine this absurd scenario: You decided to stay in bed that Saturday morning for the "Running of the Brides" and sent a football team instead. The only instruction you give them is a size 12. On the surface, some of this makes sense. Gridiron galoots already have matching shirts and understand last second audibles. Aggressive offensive linemen can clear paths through the ruthless bridezillas so the wide receiver can snatch a dress—all this occurring while you're in your jammies leisurely browsing china patterns. Sounds great, huh?

But I bet you wouldn't blissfully spike the dress in the end zone. I wonder if it would actually be a dress and not some burlap sack. Then, despite your somber disappointment, you're confronted with a Mount Rushmore-faced head coach insisting, "We're on to photographer selection." But remember, the guys did their job. When you give generic instructions, expect generic results.

This is exactly the same logic employed by investors purchasing target date funds. If you purchase shares of "Retirement 2030" funds, you forgo the opportunity to plan, based on your personal situation and preferences. While the funds are managed somewhat aggressively in earlier years, their investments get more conservative as it gets closer to the target date. All decisions are based solely on that date. Your life expectancy, estate planning needs, retirement travel plans, and other assets are not taken into account. There is no financial planning; you're simply lumped in with the rest of the fund shareholders—maybe even with a few of those bridezillas and galoots.

If that is not bad enough, target funds present another obstacle to a

happily-ever-after retirement. A widely held criticism of target funds is that the investment becomes too conservative once the date is reached.

Remember, a 20-30-year retirement is very common. If you do not earn at high enough returns and keep up with inflation, you increase your chances of running out of money. It is important to holistically consider your personal situation and plan from there. It is impossible for target funds to do so.

For many, the perceived drudgery of actually sitting with an advisor and crafting a personalized plan seems intimidating. But you're as special as the bride to a quality advisor, and it does not take much time. A long retirement should be something that is anticipated, not feared. It is quite possible you'll renew your wedding vows or meet a second Prince Charming at age 80. The Wicked Smart Investor wants you to have the budget for another nice dress.

About the Author: Chris Hanson is the author of *The Wicked Smart Investor* blog and a CPA who specializes in financial planning at Lindner Capital Advisors in Hanover. He earned his BBA at the Isenberg School of Management University of Massachusetts and an MBA at Babson College's F. W. Olin Graduate School of Business. He may be reached at (978) 888-5395 and you can read his blog at wickedsmartinvestor.blogspot.com. ∞



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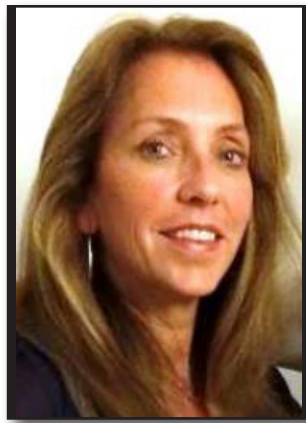
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ASK THE HIPPIE

The journey that caregivers are on when caring for someone with Alzheimer's/dementia is full of mystery, self-doubt, and loneliness. This column offers a chance to reach out, seek new ideas, and by reading about the experiences of others, learn that you are never alone.

"Eye" See You

By Phyllis DeLaricheliere, MS

During these unprecedented times, we are all trying to adjust to how we can interact with one another. How do we communicate with these masks on? We sound so muffled; we can't get close. It's hard to understand someone! Welcome to a world that, unfortunately, for so many, is familiar—those with a diagnosis of dementia.

In the world of dementia, patients primarily only understand seven percent of verbal language. They rely so much on body language to articulate someone's message. Caregivers are educated to understand that eye contact is crucial to making that connection with someone who has been diagnosed. That old phrase that "eyes are the windows of the soul" justifies that they can send a variety of non-verbal signals.

Communication with eye contact is key to a successful interaction, but in today's society, we are so busy, fast moving, and physically disconnected that we don't really do this well at all anymore. Here's a chance to change that. Working with people with dementia teaches us so much about patience, communication, compassion and the joy that is life. When you look at others, it respectfully shows that you are interested in them. The connection is made, and when they lock eyes with yours, communication is already beginning.

When we communicate with a loved one with dementia, the way our eyes move tells them more than our words do. Your eyes don't lie. Be present with them, focus on them, and, with a mask on, they can still see the love in your eyes. Many of us can use this in our everyday lives since we are now living in a new norm.



Here are some fun things to try with another person and you will see how the eyes say SO MUCH!

(Remember—social distance and wear a mask; it's part of the exercise) Sit across from someone and lock eyes (you can't move your head). Then one of you try these next few eye signals and pay attention to how you feel and what message it is sending:

1. Gaze
2. Glance
3. Look up
4. Look down
5. Look sideways one way
6. Look side to side repeatedly
7. Wink
8. Close them
9. Squint
10. Blink

No matter what language you speak, if you can speak, no matter your age, as long as I can see your eyes, they will tell me all I need to know. And when you are happy, they will smile; when you are sad, they will cry. Our eyes are the universal language that bonds us together.

About the Author: *Phyllis A. DeLaricheliere, MS, has made a career of working with seniors. She is a sought-after speaker/educator and author of Embracing the Journey: Knowing your Inner Hippie. To book her for a lecture, or receive a copy of her book, email Phyllis at knowyourhippie@gmail.com ∞*

Domestic Violence & Elder Abuse



By Nicole Long, MSW, LICSW

Domestic violence is a problem that occurs in any community and can affect anyone, including older adults, regardless of race, ethnicity, gender, sexual orientation or socioeconomic status. Nationwide, domestic violence hotlines receive more than 20,000 calls on a typical day, according to the National Coalition Against Domestic Violence (NCADV).

Domestic violence is not always obvious

Domestic violence is perpetrated by a current or former intimate partner and may be physical, sexual or emotional/psychological. Domestic violence involves behavior meant to control, scare

or harm. It may include physical violence, such as hitting, kicking and shoving, or emotional/ psychological abuse, which includes threats, verbal abuse, accusations and social isolation. It may be in the form of coercion (including sexual coercion) and stalking or cyber stalking. Many different tactics may be used. For example, a perpetrator may use technology to harass, monitor and track a current or former partner.

The frequency and severity of domestic violence can vary, and in many instances, the signs can be difficult to recognize. Since domestic violence often occurs in the home, being confined at home with an abusive partner (such as during the COVID-19 global pandemic) is a significant threat for victims of domestic violence. For comprehensive information about the warning signs of domestic violence, visit the NCADV's website at www.ncadv.org.

Protective services for older adults

Old Colony Elder Services (OCES), a non-profit agency designated as one of 25 Aging Services Access Points (ASAPs) in the Commonwealth of Massachusetts, has a Protective Services Program team that works with older adults or their designees to prevent, eliminate or remedy situations

involving emotional, physical or sexual abuse, neglect by a caregiver, financial exploitation and/or self-neglect.

According to the National Center on Elder Abuse, the number of older Americans (age 60+) who have experienced abuse is approximately one in 10. Common risk factors of elder abuse include social isolation, poor physical health, and dementia. Older adults who are at risk of harm from others (or from themselves) due to safety concerns, can receive assistance to keep them safe in their own homes. OCES' staff can advocate for older adults in these situations and provide services and resources to resolve these difficult matters.

Raising awareness

In an ongoing effort to raise awareness of elder abuse, OCES holds annual "March Against Elder Abuse" community events in Brockton and Plymouth for World Elder Abuse Awareness Day (WEAAD) in June. This year, WEAAD's theme is "Lifting Up Voices," and information will be announced in the near future about how OCES will recognize this with the community.

Abusive behavior should never be tolerated or accepted. Recognizing the warning signs is key in preventing or stopping domestic violence and elder abuse. If you or someone you know is a victim of domestic violence, call the National Domestic Violence Hotline at 1-800-799-7233 (SAFE) or 1-800-787-3224 (TTY), or visit www.thehotline.org.

If you have a Protective Services concern, call 1-800-922-2275 or visit www.ocesma.org for more information.

About the Author: *Nicole Long is the Chief Executive Officer of Old Colony Elder Services (OCES). Founded in 1974, OCES is a private, non-profit organization proudly serving greater Plymouth County and surrounding communities. OCES is designated as one of 25 Aging Services Access Points (ASAPs) in the Commonwealth of Massachusetts. OCES' mission is to support the independence and dignity of older adults and individuals with disabilities by providing essential information and services that promote healthy and safe living. The agency offers a number of programs to serve older adults, individuals with disabilities, their families and caregivers. For more information call 508-584-1561 or visit www.ocesma.org ∞*

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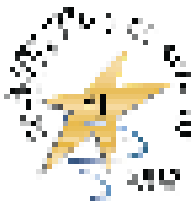
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Choices in Hospice Care



By Toni Eaton, Pres./CEO
Old Colony Hospice & Palliative Care

Deciding when to involve hospice in your loved one's care can be an anxious, emotional time, and it can be made even more difficult by the confusion that often surrounds how hospice actually works, and the options that are available to families.

Even as Americans make greater use of hospice care—for the first time in a century, more Americans are choosing to die at home than in hospitals and that trend is expected to continue—families don't always understand that, in most regions, they have a choice of agencies and settings. When the time comes to decide, many families are in the midst of a crisis that makes researching the options feel overwhelming.

As a registered nurse who has been involved in hospice care and administration for more than a decade, I am heartened to see the growth in hospice services allowing for more loved ones in this country to die in the most dignified, comfortable way possible. Asking questions and doing research ahead of a crisis can help families find the best fit.

Understanding which hospice services are available to you, as well as the role family members play, can help people navigate end-of-life care. Families should feel comfortable contacting different hospice providers and asking questions to figure out when is the right time to ask for hospice support and what kind of hospice support is the right kind.

Families basically have three choices when it comes to hospice care, and each has its advantages and disadvantages:

In-home hospice offers patients the comfort of dying in the familiarity of their own home surrounded by loved ones who care for them with the support of a home hospice agency's nurses, aides and doctor. Family and friends must be able to perform a significant amount of necessary tasks, from administering medication to providing care.

Hospice care can also be provided in a hospital or nursing home. There are times when patients with very complex symptoms or conditions cannot be cared for at home. Hospice nurses and caregivers would visit patients in these facilities.

A third alternative is a freestanding facility known as a hospice house, offering round-the-clock care in a home-like setting where family can visit. This is a good option for people whose families live far away or are not able to provide the care needed in home.

Medicare-certified hospices provide the same basic services, but there are differences that could make one a better choice than another for your

family and loved one. The best way to know is to reach out and ask questions. Many of the questions are the same, whether you opt for in-home support, in-hospital support, or care in a hospice house.

Are the hospice's doctors and nurses certified in palliative care to help ease the symptoms and stress of serious illness? Having the credential indicates specialized study in palliative medicine and/or nursing.

How quickly can a care plan be developed? Some hospices can start hospice services within a few hours—even at night or on weekends. Depending on your loved one's situation, a hospice's ability to start services quickly might be very important.

How often will a nurse visit my loved one? Ask how often and when a nurse will visit. What additional support is available? Does the agency have social workers, hospice aides, or spiritual or bereavement support counselors who will come? Who will come after hours when needed?

What kind of crisis response is offered? Ask who will be available after normal business hours, on weekends and holidays. Ask about the hospice's average response time and who will make the visit. Some hospices offer limited in-home support on nights and weekends, while others are able to send staff out to a patient's home whenever a crisis arises.

What are the expectations for the family's role in caregiving? See whether the hospice's expectations are consistent with what the family can provide. Often the care partner has no idea what it's going to take to be with someone as they die at home—administering medication, helping with bathing and toileting, and more. Will the hospice provide support and training to family caregivers?

How quickly can we expect pain and/or symptoms to be managed? Pain management is a key part of hospice care. Ask about the process if medications don't seem to sufficiently address pain or symptoms, and how quickly they can be adjusted.

Finding the right hospice fit for your family may be the most important health care decision you have to make. The American Hospice Association has more information and suggested questions families can ask as they decide. Hospice Compare reports information on hospices across the nation and the quality of care each hospice provides. <https://www.medicare.gov/hospicecompare/>

About the Author: Toni L. Eaton, RN, BSN, MS, is the President & CEO of Old Colony Hospice & Palliative Care of West Bridgewater, a dynamic non-profit hospice serving more than 55 communities south of Boston. A native and resident of the South Shore, Toni brings her compassion and experience as a nurse, a veteran, and community leader to her insightful columns for South Shore Senior News. Her leadership has been honored by several groups, including the South Shore Women's Business Network, and she currently sits on the boards of the Hospice & Palliative Care Federation of Massachusetts and the Brockton Hospital School of Nursing Alumni Association. For more information, call (781) 341-4145 or visit Old Colony Hospice & Palliative Care. ∞



Protocols for Family Members Caring for a COVID-19 Positive Loved One

How to Protect Yourself and Others

By Maria Burke, RN
Owner - Celtic Angels
Home Health Care

Family members taking care of their mothers, fathers or any loved ones who are confirmed COVID-19 cases will want to follow the best protocols for protecting themselves and others who are living in the same household.

Here are some basic tips:

- Take preventative steps every day; be consistent.
- Keep the ill person in a separate room from others in the household.
- Wash your hands frequently, throughout the day.
- Wear a mask and eye covering if possible, at all

times, when in the vicinity of the COVID-19 positive family member.

- Avoid touching your eyes, nose, and mouth.
- Cover your cough or sneeze with a tissue, and then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.
- Avoid sharing personal items.
- Limit close contact with other family members who are not sick, as much as possible; stay about six feet away.
- Monitor your own temperature daily using a digital thermometer.
- Stay at home and away from crowds.

Celtic Angels...continued on p.16



April McGann, CNA



Mary Irving, RN



Claudine Irbagiza



Yvette Hunte



Emma O'Donoghue



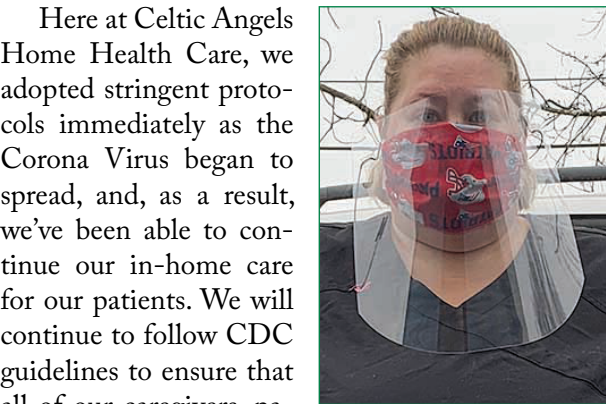
Madeline Aubourg, CNA



Susan Hoffman



Kristina Bean-Robichaud



Kelly Toomey

Here at Celtic Angels Home Health Care, we adopted stringent protocols immediately as the Corona Virus began to spread, and, as a result, we've been able to continue our in-home care for our patients. We will continue to follow CDC guidelines to ensure that all of our caregivers, patients, and their family members remain safe and healthy.

Here are just a few of our own "True Heroes" at Celtic Angels Home Health Care. ∞



Celtic Angels is a trusted home health care agency that has been providing personalized care services for almost 15 years. Owned and managed by Registered Nurse Maria Burke, the company is operated with a particular keen focus on the highest quality medical care and in-home support services.

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Now's the Time to Sign a Health Care Proxy



By Alexis Levitt

If you haven't already, now is the time to create your health care proxy. Now seems to be the time for lots of things, but this one needs to bump to the top of your to-do list. Here's why: Once you turn 18, if you are in a health care situation and unable to speak for yourself (fever is high and you can't think; ventilator tube is in your throat; you have dementia, etc.), without a health care proxy, there is no one who can legally speak for you.

Your spouse is not legally authorized to make your health care decisions, and neither are your kids. Lots of people assume the law authorizes their family to make medical decisions, but it does not. The only person who can legally make your health care decisions when you can't is whomever you have named in a health care proxy.

Are there times when medical staff will turn to spouses and family and let them make your decisions, even without a health care proxy in place? Yes. There are times. But you don't want to depend on the exception to the rule. The only way to be sure that someone can legally speak for you is to sign a health care proxy. This is even more important if you think that your family members would be divided in making your choices—some would say that you would want to pull the plug; others would be sure you would want more measures taken. In a situation like that, you need one person with the authority to provide a definite decision to the medical staff.

Step one is to think through who should be your health care proxy. Who among your family and closest circle is best suited for the job? Who has the right temperament, knows your wishes, and is in the habit of asking questions? And if that person is unable or unavailable, who is second

in line? Once you have decided on who your health care proxy and alternate(s) should be, it's a very simple process to complete a health care proxy form. You can download one from www.honoringchoicesmass.com. Put down this paper and do it now!

Signing requires two witnesses, so you will need to get a little creative during this period of social distancing. Maybe have two neighbors watch you sign from across the driveway.

Once you have your health care proxy in place, you need to make sure it will be available when you need it. Place a copy on your refrigerator or the back of your front door, in the glove compartment of your car, or store it on your phone by emailing it to yourself or taking a photo of it. Send copies to whomever you have named as your agents.

Your next task will be to think through what matters most. What kind of care would you want or not want in various scenarios? If you were very ill, would the company of people soothe you, or would you prefer few visitors? What are your interests and goals that would be worth fighting for? Where is your line in the sand? These are questions that can be difficult, if not impossible, to think through alone. Luckily, there are some amazing resources to help you clarify your thoughts. Check out these websites—www.theconversationproject.org or www.joincake.com.

Your last step is to have a good talk about what matters most with the people in your life who matter most, especially your health care proxy. Share your thoughts with them. You don't need to have it all figured out. But the more guidance you can give them, the better the chances that you will receive the health care you want if you ever reach a point where you can't make or communicate those decisions yourself.

About the Author: *Alexis Levitt practices elder law, special needs planning, estate planning, and veteran's benefits. She sits on the board of the Massachusetts chapter of the National Academy of Elder Law Attorneys and is its representative on the Massachusetts Coalition for Serious Illness Care. Her office is in Norwell, and she frequently meets with clients in their homes. You may reach Alexis at (781) 740-7269 or visit her website and blog for more information at www.alexislevitt.com. ∞*

Storing My Stuff



By Natalie Ahern
Owner, All the Right Moves

A little over a year ago, I wrote an article on storage units and the American addiction to them. There are over 52,000 storage facilities across our country; one in six American families has one.

There are lots of good reasons to have a storage unit; you may need a temporary holding place while you sell your home or a place to store college-age children's dorm belongings between school years. But for many people, a storage unit represents deferred decisions for sentimental items (baby cribs, wedding gowns), family heirlooms, or excess "stuff." If you currently have a storage unit, using this social isolation period may be a great time to start the process of sifting through its contents.

When I work with clients to edit or empty their storage units, we bring a phone (for photos), notepad, large labels, heavy-duty trash bags, empty boxes and a dolly. I recommend opening each box or bag in the unit and going through its contents. Ask yourself if you could use the item in your existing house. If the answer is "yes," box or bag the items to take home and load on the dolly. If the item is not something you could use but may have value to someone else, take a picture.

Perhaps the item would be of interest to your sister, your son, or your neighbor. Maybe the item is something you could sell at auction or con-

signment, or donate. Having a picture of the item will enable you to determine the best method of finding a home for whatever you are currently storing but no longer want. Use your notebook to keep a list of all the items you have photographed and possible ways to pass these things on.

I also recommend labeling the contents of each box or bag. For example, one box might be labeled "Grandma's quilts" or "John's baby clothes." It will make future trips to the storage unit much easier.

If you find objects that are moth-eaten, worn out, broken, or just plain old ugly, bag them up for trash.

Depending on the size of your storage unit, your clean out may take several trips, but soon you will have a notebook with the contents and clearly marked containers of everything in the unit. Follow up with family members and friends to see what they might want. Send photos to auctioneers and donation centers to find a little extra cash or a new home for unwanted items.

Lastly, what to do with the sentimental objects that you don't have room for and your family doesn't want? Now you have pictures of these special mementos, and it may be easier to part with them. If not, read next month's article for some ideas to preserve those memories without the need for a storage unit.

About the Author: *Natalie has extensive experience in project management, home decorating and floor planning in homes on and around Boston's South Shore. Whether a client is downsizing, relocating or aging in place, Natalie manages it all with calm efficiency. Her favorite part of the job is the lasting relationships she forms with her clients. "When you spend time going through a lifetime of personal belongings, you really get to know a person. It's a gift to be able to share so many memories with my clients." Natalie is a member of the National Association of Senior Move Managers, the leading membership organization for senior move managers. ∞*



Pursuing Happiness? Start with Your Daily Diet

By Cindy Crowninshield, RDN, LDN, HHC

The month of June and all it offers—warmer temperatures, colorful flowers and abundant outdoor activities—always makes me smile.

Even this year—though I'm more confined due to social distancing—I intend to soak in all the joy I can.

As a dietitian, I know that one way to stay sunny is to eat better. The right balance of vitamins, minerals, carbohydrates, fats and proteins can potentially stave off depression or the blues. Try these possible “ingredients for happiness” yourself, including:

- **Salmon, herring or sardines**, which have two Omega-3 fatty acids, eicosapentaenoic acid (EPA), and docosahexaenoic acid (DHA), which may help some individuals with depression.
- **Vegetables and grains with B vitamins**, such as broccoli, spinach and organic brown rice.
- **Fortified milk, eggs, mushrooms and canned tuna, which all contain vitamin D**. These foods supplement the best source of this vitamin around—the sun.
- **Fruits and vegetables**, which are filled with antioxidants that can also help fight diseases like cancer. For those who are having trouble finding all their favorites in the grocery store, it's easy to get creative. For instance, if you prefer fresh produce but it's nowhere to be found, remember that frozen vegetables and fruits are good alternatives. Or buy shelf-stable fruit and juice blends, and antioxidant powders, and save some extras in your pantry.
- **Proteins**, such as lean meat, chicken, fish and beans. Given concerns about the availability and price of meat, stocking up on beans in advance (navy, black, cannellini, etc.) will help ensure that you always have

enough protein in your diet. Buy either dried beans or canned, low-salt varieties. Protein powder or shakes are also great choices.

- **Carbohydrates** such as white and sweet potatoes, which can be cooked and then frozen for the future. I often prepare them in bulk—filling two bowls with four to six servings apiece—and then freeze them. Another option is to buy frozen potatoes, which may take less time to prepare and enjoy “on demand.”
- **Foods with magnesium**, such as organic brown rice and pumpkin seeds, which can potentially reduce both depression and anxiety.
- **Adaptogens**, such as Ashwagandha and Holy Basil, in teas (hot or cold), for the same purpose.

To keep up your positive outlook, try combining this diet with other strategies. Are you trying to find new uses for the same food items? Search sites like supercook.com, which will let you enter five “random” ingredients and create new recipes.

If you're missing leisurely time with family and friends, enjoy cooking these recipes together via an online video platform.

Do you love to walk? Meet friends while scrupulously social distancing in your masks. I do this regularly with my friends who are dog walkers. We stay on opposite sides of the street, talk and laugh, and return feeling invigorated.

Try your hand at gardening. As the food chain becomes a little less robust, grow seeds and enjoy some of the tastiest produce you'll ever have. Also consider buying more from your local farms, which need support.

Stay positive while finding new ways to savor your favorite foods, people and activities. Wishing you a healthy and safe June!

About the Author: *Cindy Crowninshield, RDN, LDN, HHC is a licensed registered dietitian and nutrition educator in private practice. She sees patients throughout Greater Boston and the South Shore. Cindy empowers patients of all ages to organize themselves in health and wellness through a whole foods approach and making healthy lifestyle changes—using highly individualized nutrition plans. Visit CindyCrowninshield.com for more information.* ∞

Celtic Angels... Continued from page 13

- When you go out in public, keep away from others who are sick and limit close contact with others.
- Discourage children and teens from gathering in or around your home.

Take Care of Your Health: Watch for Symptoms


Stay home and speak to your healthcare provider if you develop any of these symptoms: fever, cough, or shortness of breath.

If you develop emergency warning signs for COVID-19, get medical attention immediately.

- Emergency warning signs include:
- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

* This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning. If you become sick, stay in contact with others by phone or email, not in person. Make sure you have access to several weeks of medications and supplies in case you need to stay home.

About the Author: *Maria Burke, RN, Owner, Celtic Angels Home Health Care. Maria Burke was born in Middleton, County Cork, Ireland. She is the eldest of six and immigrated to the United States in 1988 to pursue a nursing degree to become a registered nurse. She served as a visiting nurse and from there, launched her own home health care company. Celtic Angels has two offices; Weymouth and Needham and services hundreds of elderly people across Massachusetts with a variety of services including skilled nursing, homemaking services and home health aide and CNA care services.* ∞



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THE GRAPEVINE

'Porch Pounder' Whites



By Missa Capozzo

It's been an unusual spring here in New England, but the warm weather will arrive eventually. With the seasonal rise in temperature, refreshing white wines begin to replace the warming reds.

We are all living outside of our comfort zones right now, so why not take advantage and explore some of the lesser known Italian wines that Americans aren't quite as familiar with as they are Pinot Grigio and the like? Northern Italy offers some of the most refreshing, food-friendly white wines in the world.

Gavi comes from the Piedmont region in northwestern Italy. Gavi is a dry white wine made from the Cortese grape, which offers crisp, flinty, mineral-driven characters featuring delicate aromas of white flowers, lemony citrus, tree fruits, and melon, often with hints of almond on the finish. These wines are perfect for sipping on their own, but also accompany seafood, salads, and chicken dishes perfectly.

On the other side of the country, you'll find the Veneto region in northeastern Italy. More commonly known for Prosecco, the Veneto region also produces beautiful still whites, made

primarily from the Garganega grape, known as Soave. The Soave zone of production offers several styles, including crisp, dry still whites, dry sparkling whites, and a sweet passito style wine labeled as Recioto di Soave. A required 70% minimum of Garganega, Soave can also include up to 30% of Trebbiano di Soave and/or Chardonnay in the blend. Soave is a crisp, dry white wine that offers aromatics, such as stone fruit, citrus, and melon, with slight salinity and even an oily texture on the palate, which gives it beautiful roundness and depth. Seafood risotto is a homerun pairing with Soave, as are pasta dishes with rich white sauces and various seafood dishes.

Making your way a little further east from Veneto, you will find the region of Friuli Venezia Giulia, which borders Slovenia and Austria. Known for its delicious Pinot Grigio, Friuli offers a variety of fresh, crisp indigenous whites. Friulano is an herbaceous wine that shares similar qualities with Sauvignon Blanc. Its lively, fruit driven flavors are often enhanced with notes of almond and a note of minerality. Delicious with prosciutto and mozzarella, Friulano is ideal when served alongside a charcuterie board of various Italian meats, cheeses, and nuts.

Planted in several northeastern regions, the Manzoni Bianco grape is in a unique category

of its own. Manzoni Bianco is a cross between Riesling and Pinot Bianco that was created in the early 1930s by Luigi Manzoni, a professor at the Enological School of Conegliano. Manzoni Bianco wines offer beautiful floral notes, such as wisteria and jasmine, and flavors of zesty lemon and citrus, apple, pear, stone fruit, tropical fruit, and even hints of grass. These wines offer great minerality and high acidity, making them perfect pairings alongside seafood dishes, prosciutto, and soft cheeses.

Each of these wines fall under my personal description of "perfect porch pounder." One sip on the porch during a warm summer day, and the next thing you know... gone. Cheers!

About the Author: *Missa Capozzo, CSW, WSET3, FWS, BWSEd is the EVP of Product Development and Sommelier at Worcester's first and only urban winery, Sail to Trail WineWorks. Throughout her career, she has taught students of all levels of experience and interest in classes, wine dinners, and lifestyle experiences. She is a Certified Specialist of Wine (CSW) with the Society of Wine Educators, a certified French Wine Scholar (FWS), certified with the Wine and Spirits Trust, Level 3 Advanced (WSET), and a certified educator with Boston Wine School (BWSEd). Her unique combination of talent allows her to translate the nuances of wine for the everyday wine drinker in an accessible and fun way. Demystifying wine and removing the intimidation is her passion when sharing wine with others. When not fully immersed in the world of wine, Missa is a self-proclaimed "obsessed dog mom" to her Boston Terrier, Peyton. <http://winedowntastings.com> <http://www.facebook.com/winedowntastings> <http://sailtotrail.com> ∞*

Crossword Puzzle Corner

Answers on page 22

ACROSS

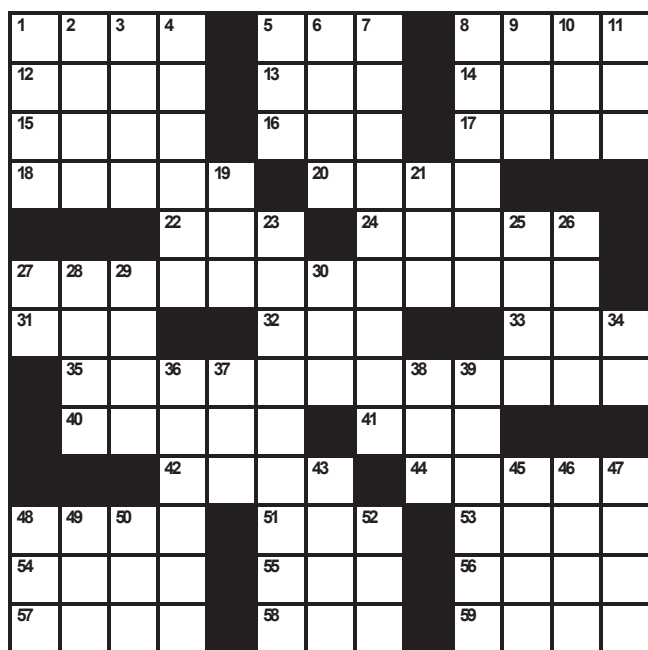
- 1 "Troy" actor, Brad
- 5 Idea of oneself
- 8 Not up
- 12 Light beige
- 13 Hasty escape
- 14 Humdinger
- 15 Base for sauces
- 16 Back again
- 17 Reverse
- 18 Prepare to be knighted
- 20 Canned meat
- 22 Watery film
- 24 Adherent of an Indian religion
- 27 80 year old
- 31 Fraternity letter
- 32 Daybook
- 33 Pen part
- 35 Tender
- 40 As a result of (2 words)
- 41 Street abbr.
- 42 Unpleasant guy
- 44 Birch family tree
- 48 Toward dawn
- 51 U.N. arm, for short
- 53 Fountain order
- 54 Dog pest

- 55 Not a thing

- 56 Bookie's quote
- 57 Greenish blue
- 58 Word on a quarter
- 59 Wyle of "ER"

DOWN

- 1 Benefit
- 2 Desktop symbol
- 3 Real
- 4 Promgoer's rental
- 5 Imp
- 6 Needlefishes
- 7 The eating of raw food
- 8 College graduates
- 9 Hair style
- 10 Vulcan's mind m___ in "Star Trek"
- 11 Two singers
- 19 Part of a relay race
- 21 Balloon filler
- 23 Very cordial
- 25 ___ Point, California
- 26 Troop group
- 27 Connective word
- 28 Neighbor of Libya
- 29 Vegetarian staple
- 30 "___ so fast!"
- 34 To stay the same

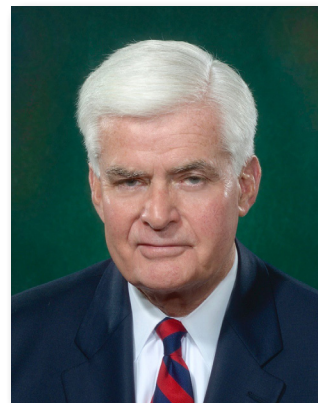


- 36 Merry
- 37 Old verb ending
- 38 Fertility clinic stock
- 39 English admiral in history
- 43 Assortment
- 45 Unfashionably dressed person
- 46 Icelandic poem collection
- 47 Precipitate
- 48 Bank method of funds transfer, for short
- 49 Pub pint
- 50 Large quantity
- 52 Long used

HOME EQUITY WEALTH MANAGEMENT

Mortgage Payment Relief—a Lifeline to COVID-19 Financial Challenges

Financial advisors look to housing wealth and reverse mortgages to improve cash flow, liquidity, and extend financial security for aging homeowners..



By George Downey

BRAINTREE - In hindsight, it seems inconceivable, not so much that the COVID-19 disaster did occur, but that it could occur. This novel crisis caught everyone unaware and unprepared for the financial and other consequences, yet to be known. As the pandemic unfolds, there are no immediate answers to the multitude of questions, except...everything will be different.

In the wake of record financial market declines, financial professionals are scrambling to help clients remain calm and ride out the storm. Beyond handholding, they are recommending clients don't sell in the down market to avoid a dangerous sequence of return risks. However, they urge clients to increase cash reserves and decrease spending to conserve cash flow and build liquidity. Clearly, good advice, but easier said than done, given the situation today.

Retirees Threatened Most by Financial Upheaval

Mandatory shutdowns, loss of income, and battered financial markets wreaked havoc on investment accounts and retirement nest eggs. While it's an obvious problem for investors, it can be devastating for retirees relying on limited income and weakened savings.

Fortunately, immediate relief from making mortgage payments, often the largest monthly obligation, is available for some homeowners.

Temporary Relief from Mortgage Payment Obligations—Forbearance

Under the recently enacted federal Coronavirus Aid, Relief, and Economic Security (CARES) Act, banks are authorized to enable qualified borrowers the ability to defer their monthly mortgage payments up to six months. This is not debt forgiveness, as the unpaid amounts are added to the loan balance at the end, but it provides needed relief to household budgets for a while.

Permanent Relief from Mortgage Payment Obligations—Reverse Mortgages

Older homeowners (62 and older) may be eligible to refinance to a reverse mortgage that defers all payment obligations permanently. No repayment is required until the homeowner sells or no longer resides in the property. Depending on individual circumstances, all existing liens are paid off, eliminating their payment obligations. Further, additional funds, or a line of credit, will be made available for any surplus. The unique terms of reverse mortgages were developed to meet the needs of aging homeowners, who do not want to sell, but wish to remain in their home to age in place.

The HUD/FHA insured Home Equity Conversion Mortgage (HECM) reverse mortgage is the dominant program nationally, accounting for over 95 percent of all reverse mortgage programs. HECMs are most suitable for home values up to approximately \$800,000. Higher valued properties may be better served by new proprietary or jumbo programs.

Massachusetts—Jumbo Reverse Mortgages Now Available

The Massachusetts Division of Banks recently approved new proprietary (jumbo) reverse mortgages for MA homeowners. These programs enable loan amounts up to \$1,500,000 and provide terms substantially similar to the federally insured HECM.

Financial Advisors Utilizing Housing Wealth in Financial Planning

Massachusetts' home values have achieved record highs in recent years.

Thus far, these values have been less affected by the COVID-19 financial turmoil. Recognizing an opportunity, savvy planning professionals are exploring best practices to lock in and monetize these values to increase liquidity and be better positioned to achieve client objectives.

To a large extent, home equity (housing wealth) has not been a mainstream tool in the financial planning process. That is changing. Converting a portion of home equity to a line of credit and/or additional cash through a reverse mortgage is a strategy advisors are now exploring to cope with the financial setbacks and enable clients to maximize use of all their resources.

Timothy Ehlers, RICP, Financial Advisor, Wood Wealth Group, characterized the reverse mortgage as "the Swiss Army knife" in the planning toolbox for its versatility in solving a multitude of retirement challenges.

Reverse Mortgage Overview

No monthly payment obligations—prepayments are permitted without penalty but not required. Monthly charges are deferred and accrue.

Credit line growth—the undrawn balance of the credit line grows (compounding monthly) at the same rate charged on funds borrowed.

No maturity date—repayment not required until no borrower resides in the property.

Non-Recourse loan—neither borrowers nor heirs incur personal liability. Repayment of loan balance can never exceed the property value at the time of repayment. If loan balance exceeds property value at time of repayment, the lender and borrower(s) are protected by FHA insurance.

Access to funds and loan terms is guaranteed—cannot be frozen or cancelled as long as the loan remains in good standing.

Borrower obligations (to keep loan in good standing) are limited to:

- Keeping real estate taxes, liability insurance, and property charges current
- Providing basic home maintenance
- Living in the property as primary residence

About the Author. *George Downey (NMLS 10239) is the founder of Harbor Mortgage Solutions, Inc., Braintree, MA, a mortgage broker licensed in Massachusetts (MB 2846), Rhode Island (20041821LB), NMLS #2846. Questions and comments are welcome. Mr. Downey can be reached at (781) 843-5553, or email: GDowney@HarborMortgage.com ∞*

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Cover Story



Senior communities offer creative solutions for connecting loved ones during Covid quarantine

By Marie Fricker

On Mother's Day morning, Katherine Calabro, 89, a resident of Windrose, an Alzheimer's care community in Weymouth, was surprised to see four of her children and three grandchildren standing in the courtyard outside her building,

wearing masks and waving.

At a safe distance a 5-piece band was playing the sweet strains of *Some-where Over the Rainbow*." Calabro, a slight, white-haired woman with piercing blue eyes, knew the song well and hummed along with it. She smiled at the staff member beside her and pointed at her family members. "Did you know I gave birth to all those people?"



Since the "no visitation" restrictions of the COVID-19 pandemic were instituted in mid-March, many senior living residences are pulling out the stops to bridge the physical gap between their residents and the people who miss them.

Linda Donovan of Quincy, Calabro's daughter, was one of 15 guests, as well as a news crew from Channel 7 TV, who attended the Mother's Day celebration at Windrose. "Not being able to visit my mom for the last few months has been incredibly hard," she said. "I can't wait to take her out to get her hair done and go to lunch again. But for now, the window visits we get with her, the iPad facetime calls, and events like the party are helping a lot. We're very grateful to the staff for the amazing things they do."

Lynn Stefano, Director of Marketing at Windrose, planned and executed the Mother's Day event, making sure that attendees maintained a six-foot distance from one another and kept their face masks on. Shaws Supermarket donated chocolates and tulips for the occasion, and Stop and Shop contributed 40 individual bouquets of carnations that were distributed to the residents and their nurses.

"It isn't just holidays that are difficult for seniors and their families during this time of social isolation," said Stefano. It's doing without the simple pleasures of holding a loved one's hand or watching a TV show together. Even though they have memory loss, our residents are thrilled to see a familiar face. They haven't been able to get a hug or human touch from a loved one for months, and at a certain level of a disease, it's all about the senses. It's a very emotional time for all of us."

At Brookdale, Quincy Bay, a 280-unit building of independent and assisted living apartments, Senior Executive Director Phyllis Delaricheliere and her team of 10 department heads have devised novel ways of connecting with isolated residents. Initiatives include "HELLO windows," Facebook Fridays sessions, Facetime visits, and a newly introduced "Vitamin D Covid Café."

"We allow family members to have coffee with their loved one in a designated outside space, but they are handed a pool noodle when they arrive to place between them," said Delaricheliere. "The 6-foot noodle is a respectful way to help them maintain the proper social distancing without anyone nagging them to do so."

Residents at Brookdale have been self-isolating in their apartments for more than two months. The common areas are closed down, and residents and associates get their temperatures checked daily. "I'll admit it's been tough at times," said Delaricheliere. But safety is of utmost importance to all of us here."

DeLarichiere puts in long hours with her associates, but she is happy to do it. "We are all doing what we need to do right now," she said. I would rather be there for the residents and my colleagues than sheltering at home."



Brookdale's dining program has been featuring crowd favorites, such as Beef Wellington, and preparing three meals a day for the residents. Staff members deliver the meals, as well as mail and packages, directly to the apartment doors, and during a recent Mardi Gras celebration, residents also received deliveries of "mocktails," beads, and homemade warm churros.

To combat the loneliness of seniors who have been isolated since March, DeLaricheliere and her managers visit residents every day, and the eight members of the community's Resident Council take turns calling people regularly to check on their wellbeing.

Brookdale staff members also host a weekly Zoom town hall with about 120 family members and independent living residents taking part. "They ask about Covid, their loved ones, and our protocols here, and thank us for what we've been doing," said DeLarichiere. "There are a lot of misconceptions out there, and it's nice to have clear communications. Nobody likes rules, but the families have become a part of our team. I want them to feel invested in the process. We are all in this together."

Another South Shore senior community—The Bridges by EPOCH, a memory care facility in Hingham, has been using state-of-the-art technology to provide its residents with virtual connections and experiences throughout the last few months.

Adele Pepin, Vice-President of Marketing at Bridges, believes technology is keeping her residents active and happy during this time of physical distancing from their families. "People with dementia don't always understand why their loved ones aren't visiting them anymore," said Pepin. "That's why we set up live video chats so they can see their family members' faces, hear their voices, and know they are still loved and missed."

While residents are under quarantine in their small household units, they are able to engage with interactive, dementia-friendly, online platforms. They can take virtual exercise classes, such as Tai Chi and chair yoga, travel to exciting destinations around the world, play games, and nurture their spirits with sermons, hymns and inspirational videos. The Bridges by EPOCH team recently hosted a "Virtual Memory Café," a Zoom session of '50s trivia and music for residents, family members, and staff.

"We also post frequently on Facebook for families to see their loved one engaged in activities or enjoying the nice spring weather outdoors in our enclosed courtyards," said Pepin. "Our goal is to keep our residents with memory loss physically, cognitively and socially engaged every day," said Pepin. "I think we're doing that very well."

From parties, to pool noodles, senior communities throughout the state are going above and beyond to make their residents feel happy, secure and connected with the people who can no hold their hands.

Shirley Green, 101, has been self-isolating in her apartment at Brookdale Quincy Bay for the last 2 ½ months, but she doesn't view it as a hardship. "I can honestly say that I've never been bored," said Green, who is visually impaired. "I can always find something to do, whether it's rearranging a drawer, looking at photos on my Facebook page, listening to a book on tape, watching the news, or emailing my friends and family. Our director, Phyllis, has done everything possible to keep us all safe here, and I am doing exactly what she wants. I made it through the Great Depression, and I can make it through this too. I'm happy to be exactly where I am." ∞

Art Matters IX
Reflections on various art media, Part 5: Acrylic



By Janet Cornacchio

Over the past few columns, I've discussed basics of composition, and three popular 2-D media—watercolor, oil and pastel. This time, acrylic! Acrylic media contains pigment suspended in a liquid plastic emulsion. It is water-soluble when liquid but is no longer readily water soluble when dry.

Acrylic media reacts differently depending upon the amount of water mixed with the medium when applied. Mixed with a fair amount of water, it can be handled as a watercolor, the difference being—once dry, it is no longer reversible and is generally more opaque (less of the paper shows through).

When the medium is mixed with acrylic gels, media, or pastes, the finished work can resemble an oil painting and have the smooth depth of a Van Gogh or modern master. Over time, artists have discovered possibilities that are unique to acrylic media. More about those possibilities in a bit.

Acrylic media is an outgrowth of the plastics revolution of the first half of the 20th century. (Remember The Graduate's big line—"Plastics!") The artist pigments were developed soon after the appearance of latex acrylic house paint. Liquitex was the earliest manufacturer, and I remember watching my dad experiment with their acrylics in the mid-1960s.

I've played with them on occasion. In high school I painted murals in our basement with them, used white house paint and tinted it to the colors I wanted. They were my first experiments with drawing and painting after my son was born. I painted a number of tee shirts and

sweatshirts with seasonal designs—pumpkins, witches, Christmas trees, and a dragon come to mind. Eventually, I decided I wanted to use a more permanent canvas than a garment for my masterworks.

While I like the fact that acrylics dry rapidly, which has advantages, I prefer watercolors. Acrylic pigments, once they're put out, need to be used rapidly, as with oil paints, while watercolor has a very long shelf life, as do pastels. Someday I may find time to work more with acrylics again from an artist's perspective.

The versatility of acrylics is probably one of their greatest appeals. The range of acrylic media is much greater than that of the other media discussed so far. Acrylic paint's hardness, flexibility, texture, and other characteristics can be modified by using acrylic media or simply by adding water. They can be applied in thin layers or washes and handled as a water-based media. Or, they can be built up in thick layers of paint on special gel bases, which create sculptural relief effects.

Acrylics can be used in mixed media (when more than one medium is incorporated in the same work). For example, pastel, charcoal, or ink can be applied onto a dried acrylic surface. Sand, rice, plastic pieces, and even pasta may be pressed into acrylic surfaces. Acrylics have been developed for use in linoleum block printing and fabric screen printing.

Wet acrylic paint is easily removed from paint brushes and skin with water, soap, or a mild abrasive pad, and, if close to dry, try a few drops of ammonia. Oil paints require stronger solutions for clean up, even when liquid. Acrylics have the ability to bond to many different surfaces. I've used them on birdhouses, fabrics, footstools, furniture, shells, stones and an occasional painting. Last June, I helped a local Girl Scout troop use acrylic traffic paint on the crosswalk in Scituate Harbor. We learned the

importance of using acrylic, as it has a rubberized base, which is more resilient. Some of our colors were sidewalk/concrete paint, and they didn't have the endurance.

My next column will explore printmaking. There are so many kinds of prints that it may actually take two columns to explain the most common ones. Then, it might be a good time to compare and contrast these media from an artist's perspective.

Janet Cornacchio is an artist member of Front Street Art Gallery, President of Scituate Arts Association and a Realtor. You can contact her at jcornacch@aol.com

About the Author: Janet Cornacchio is an artist member of Front Street Art Gallery, President of Scituate Arts Association & a Realtor with Jack Conway. You can contact her at jcornacch@aol.com ∞

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12	E	C	R	U	13	L	A	M	14	L	U	L	U									
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54	F	L	E	A				55	N	I	L		56	O	D	D	S					
57	T	E	A	L				58	G	O	D		59	N	O	A	H					

Quincy College offers online fitness certificate program this summer

The Exercise Science Department at Quincy College is offering a new online Foundational Fitness Certificate Program Summer 2020 Session. The course includes Muscular & Cardiovascular Fitness, Biomechanics & Bioenergetics, as well as Youth & Senior Fitness.

The Foundational Fitness Certificate Program is scheduled to begin in three weeks. For full details and how to register, contact Wayne Westcott, Ph.D., at wwestcott@quincycollege.edu.

If you're already an EXS student and

haven't completed these courses, this is a super time to take one or all of these. EXS students must purchase the ACE Personal Trainer book package, since our courses are based on various chapters in the ACE textbooks.

Quincy College is offering residents of host cities (Quincy & Plymouth) a \$300 tuition voucher, and residents of other communities will receive a \$150 tuition voucher used towards Summer 2020 course enrollment. For more information, visit <https://info.quincycollege.edu/voucher/...> ∞



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